

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

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TABLE 1
OVERVIEW OF BENEFICIARY SELECTION CRITERIA FOR STUDY POPULATION
GEORGIA, 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	1,249,063 (A)	195,687 (E)
2. Benes who had Medicaid pharmacy benefits during at least one month ^b	1,209,508 (B)	157,364 (F)
3. Benes who had fee-for-service pharmacy benefit coverage during at least one month ^{c, d, e}	1,198,823 (C)	156,169 (G)
4. Benes who were all-year nursing facility residents ^f	25,602 (D)	23,698 (H)

Source: Data for this table are from the MAX 1999 file for Georgia, 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 Georgia in 1999 was \$485,571,926, of which \$7,948,466 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 1.8 percent were restricted benefit months without a pharmacy benefit in Georgia, 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}
 GEORGIA, 1999

Beneficiary Characteristics	No. of Benefes							No. of Bene Mos										
	All	Aged	Disabled	Adults	Children	Other/Unknown	All	Aged	Disabled	Adults	Children	Other/Unknown	All	Aged	Disabled	Adults	Children	Other/Unknown
All	1,198,823	84,511	204,033	206,464	703,815	0	10,611,267	872,366	2,184,480	1,488,252	6,066,169	0						
Age																		
5 and younger	348,137	0	8,330	85	339,722	0	2,898,191	0	83,983	596	2,813,612	0						
6-14	299,245	2	20,062	317	278,864	0	2,751,036	24	222,079	2,122	2,526,811	0						
15-20	135,803	0	13,010	38,166	84,627	0	1,135,789	0	140,200	273,759	721,830	0						
21-44	224,110	7	62,594	160,957	552	0	1,834,023	39	673,459	1,156,884	3,641	0						
45-64	79,878	1,250	71,717	6,891	20	0	814,535	13,193	746,668	54,559	115	0						
65-74	42,250	23,617	18,601	31	1	0	454,533	243,829	210,479	215	10	0						
75-84	39,280	31,763	7,509	7	1	0	418,079	333,929	84,095	43	12	0						
85 and older	30,100	27,869	2,210	9	12	0	304,994	281,345	23,517	62	70	0						
Unknown	20	3	0	1	16	0	87	7	0	12	68	0						
Gender																		
Female	728,695	64,614	114,224	200,247	349,610	0	6,393,676	678,001	1,241,843	1,450,107	3,023,725	0						
Male	470,123	19,897	89,809	6,217	354,200	0	4,217,539	194,365	942,637	38,145	3,042,392	0						
Unknown	5	0	0	0	5	0	52	0	0	0	52	0						
Race																		
White	413,838	43,273	75,979	75,867	218,719	0	3,593,095	431,958	809,363	515,563	1,836,211	0						
African American	627,819	28,994	92,914	117,325	388,586	0	5,763,123	309,228	1,008,825	905,717	3,539,353	0						
Other/unknown	157,166	12,244	35,140	13,272	96,510	0	1,255,049	131,180	366,292	66,972	690,605	0						
Use of Nursing Facilities																		
All year	25,602	21,768	3,834	0	0	0	266,090	224,703	41,387	0	0	0						
Part year	13,135	11,140	1,986	7	2	0	125,492	105,063	20,340	66	23	0						
None	1,160,086	51,603	198,213	206,457	703,813	0	10,219,685	542,600	2,122,753	1,488,186	6,066,146	0						
Maintenance Assistance Status																		
Cash	384,651	38,365	180,312	45,634	120,340	0	4,049,146	430,909	1,984,836	410,951	1,222,450	0						
Medically needy	7,667	3,433	4,122	1	111	0	50,179	24,205	25,374	1	599	0						
Poverty-related	545,299	2,217	2,261	102,793	438,028	0	4,306,422	24,443	23,330	646,007	3,612,642	0						
Other/unknown	261,206	40,496	17,338	58,036	145,336	0	2,205,520	392,809	150,940	431,293	1,230,478	0						
Dual Medicare Status^c																		
Full dual, all year	150,726	76,360	73,670	656	40	0	1,598,939	789,268	804,519	4,746	406	0						
Full dual, part year	5,443	3,043	2,394	6	0	0	58,397	33,269	25,058	70	0	0						
Non-dual, all year	1,042,654	5,108	127,969	205,802	703,775	0	8,953,931	49,829	1,354,903	1,483,436	6,065,763	0						
Managed Care Status																		
FFS all year	1,180,509	84,403	202,660	203,098	690,348	0	10,527,064	871,851	2,177,765	1,472,854	6,004,594	0						
FFS part year, with Rx claims	5,672	50	772	1,502	3,348	0	35,411	311	4,701	9,023	21,376	0						
FFS part year, no Rx claims	12,642	58	601	1,864	10,119	0	48,792	204	2,014	6,375	40,199	0						

Source: Data for this table are from the MAX 1999 file for Georgia, 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^{a,b}
 GEORGIA, 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 Benef
All	67.9 %	10.6	\$398	\$38	\$2,643	15.1 %	\$10	1,198,823
Age								
5 and younger	67.0	4.7	95	20	1,403	6.8	0	348,137
6-14	55.0	3.7	137	37	820	16.7	1	299,245
15-20	59.8	4.3	160	37	1,602	10.0	2	135,803
21-44	73.4	10.4	484	47	3,245	14.9	9	224,110
45-64	87.1	35.3	1,502	43	6,909	21.7	56	79,878
65-74	88.8	37.7	1,390	37	5,762	24.1	55	42,250
75-84	91.6	40.2	1,445	36	8,477	17.0	38	39,280
85 and older	92.6	37.0	1,258	34	12,010	10.5	21	30,100
Unknown	10.0	0.7	7	10	65	11.3	30	20
Basis of Eligibility								
Aged	90.4	37.1	1,344	36	9,518	14.1	33	84,511
Disabled	83.4	27.8	1,304	47	6,217	21.0	36	204,033
Adults	71.7	6.1	165	27	2,071	8.0	5	206,464
Children	59.6	3.8	91	24	950	9.6	1	703,815
Unknown	0.0	0.0	0	0	0	0.0	0	0
Gender								
Female	70.7	12.2	433	36	2,832	15.3	12	728,695
Male	63.6	8.2	346	42	2,351	14.7	5	470,123
Unknown	0.0	0.0	0	0	0	0.0	0	5
Race								
White	76.0	14.8	580	39	3,629	16.0	11	413,838
African American	64.2	8.0	284	35	2,018	14.1	9	627,819
Other/unknown	61.4	10.1	378	38	2,545	14.9	10	157,166
Use of Nursing Facilities								
Entire year	98.0	49.0	1,944	40	23,764	8.2	36	25,602
Part year	96.6	39.9	1,599	40	15,209	10.5	32	13,135
None	66.9	9.4	351	37	2,035	17.2	9	1,160,086
Maintenance Assistance Status								
Cash	76.8	18.9	790	42	3,599	21.9	22	384,651
Medically needy	84.9	25.4	1,227	48	5,527	22.2	31	7,667
Poverty related	61.1	3.9	95	24	1,126	8.4	2	545,299
Other/unknown	68.6	12.0	432	36	4,317	10.0	9	261,206

Source: Data for this table are from the MAX 1999 file for Georgia, 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^{a,b}
 GEORGIA, 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	1.2	\$45	15.1 %	32.1 %	47.1 %	7.7 %	9.2 %	3.5 %	0.4 %	\$299	1,198,823	10,611,267
Age												
5 and younger	0.6	11	6.8	33.0	57.9	6.7	2.3	0.1	0.0	169	348,137	2,898,191
6-14	0.4	15	16.7	45.0	49.0	3.9	2.0	0.2	0.0	89	299,245	2,751,036
15-20	0.5	19	10.0	40.2	51.5	5.6	2.5	0.3	0.0	192	135,803	1,135,789
21-44	1.3	59	14.9	26.6	49.2	10.8	10.7	2.4	0.3	397	224,110	1,834,023
45-64	3.5	147	21.7	12.9	20.5	13.4	33.9	16.4	2.8	678	79,878	814,535
65-74	3.5	129	24.1	11.2	19.0	13.5	35.7	18.0	2.6	536	42,250	454,533
75-84	3.8	136	17.0	8.4	16.0	13.4	38.8	20.9	2.5	796	39,280	418,079
85 and older	3.6	124	10.5	7.4	16.6	14.7	39.8	20.0	1.5	1,185	30,100	304,994
Unknown	0.2	2	11.3	90.0	5.0	5.0	0.0	0.0	0.0	15	20	87
Basis of Eligibility												
Aged	3.6	130	14.1	9.6	17.6	14.1	37.3	19.1	2.3	922	84,511	872,366
Disabled	2.6	122	21.0	16.6	30.3	13.0	27.1	11.4	1.6	581	204,033	2,184,480
Adults	0.8	23	8.0	28.3	55.8	9.5	5.6	0.8	0.0	287	206,464	1,488,252
Children	0.4	11	9.6	40.4	52.9	4.9	1.7	0.1	0.0	110	703,815	6,066,169
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Gender												
Female	1.4	49	15.3	29.3	47.0	8.2	10.6	4.3	0.6	323	728,695	6,393,676
Male	0.9	39	14.7	36.4	47.1	7.0	7.2	2.1	0.2	262	470,123	4,217,539
Unknown	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	0	5	52
Race												
White	1.7	67	16.0	24.0	46.7	9.8	12.7	5.8	0.9	418	413,838	3,593,095
African American	0.9	31	14.1	35.8	48.8	6.4	6.9	2.0	0.2	220	627,819	5,763,123
Other/unknown	1.3	47	14.9	38.6	40.9	7.5	9.4	3.2	0.4	319	157,166	1,255,049
Use of Nursing Facilities												
Entire year	4.7	187	8.2	2.0	10.5	11.7	40.9	30.5	4.5	2,286	25,602	266,090
Part year	4.2	167	10.5	3.4	14.8	14.9	40.3	23.7	3.0	1,592	13,135	125,492
None	1.1	40	17.2	33.1	48.2	7.6	8.2	2.6	0.3	231	1,160,086	10,219,685
Maintenance Assistance Status												
Cash	1.8	75	21.9	23.2	41.3	10.1	17.9	6.8	0.8	342	384,651	4,049,146
Medically needy	3.9	187	22.2	15.1	13.9	12.3	34.6	20.7	3.3	845	7,667	50,179
Poverty related	0.5	12	8.4	38.9	53.0	5.7	2.2	0.2	0.0	143	545,299	4,306,422
Other/unknown	1.4	51	10.0	31.4	44.1	8.3	10.4	5.0	0.7	511	261,206	2,205,520

Source: Data for this table are from the MAX 1999 file for Georgia, 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^{a, b, c}
 GEORGIA, 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	1.2	\$45	0.4	\$38	0.2	\$7	0.6	\$9
Age								
5 and younger	0.6	11	0.2	20	0.1	1	0.3	4
6-14	0.4	15	0.1	37	0.0	2	0.2	4
15-20	0.5	19	0.2	37	0.1	3	0.3	3
21-44	1.3	59	0.4	47	0.2	8	0.6	9
45-64	3.5	147	1.3	43	0.5	23	1.5	25
65-74	3.5	129	1.3	37	0.6	22	1.5	24
75-84	3.8	136	1.3	36	0.7	25	1.6	26
85 and older	3.6	124	1.1	34	0.7	24	1.6	26
Unknown	0.2	2	0.0	10	0.0	0	0.1	1
Basis of Eligibility								
Aged	3.6	130	1.2	36	0.6	24	1.6	25
Disabled	2.6	122	0.9	47	0.4	19	1.2	20
Adults	0.8	23	0.3	27	0.1	3	0.4	5
Children	0.4	11	0.1	24	0.0	1	0.2	3
Unknown	0.0	0	0.0	0	0.0	0	0.0	0
Gender								
Female	1.4	49	0.5	36	0.2	8	0.6	9
Male	0.9	39	0.3	42	0.1	6	0.4	7
Unknown	0.0	0	0.0	0	0.0	0	0.0	0
Race								
White	1.7	67	0.6	39	0.2	11	0.8	13
African American	0.9	31	0.3	35	0.1	5	0.4	6
Other/unknown	1.3	47	0.4	38	0.2	7	0.6	9
Use of Nursing Facilities								
Entire year	4.7	187	1.5	40	0.9	36	2.1	36
Part year	4.2	167	1.4	40	0.8	30	1.8	32
None	1.1	40	0.4	37	0.1	6	0.5	8
Maintenance Assistance Status								
Cash	1.8	75	0.6	42	0.3	12	0.8	13
Medically needy	3.9	187	1.5	48	0.6	29	1.7	32
Poverty related	0.5	12	0.2	24	0.1	1	0.3	3
Other/unknown	1.4	51	0.5	36	0.2	9	0.7	10

Source: Data for this table are from the MAX 1999 file for Georgia, 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 Georgia, 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}
 GEORGIA, 1999

Therapeutic Category	No. of Rx per Bene Mo among Users				\$ per Bene Mo among Users				Users								
	Total	Patented	Off-Patent	Brand-Name	Total	Patented	Off-Patent	Brand-Name	Total No. of Rx	Total Rx \$	No.	As % of All Benes	No. of Bene Mos				
														Generic	Generic	Generic	Generic
Anti-infective Agents	0.3	0.1	0.0	0.1	\$11	\$10	\$0	\$1	\$41	\$69	\$42	\$10	1,555,723	\$63,603,552	567,172	47.3 %	5,679,878
Biologicals	0.3	0.2	0.0	0.1	645	373	79	193	1901	1,762	2,692	1,967	1,663	3,161,697	541	0.0	4,902
Antineoplastic Agents	0.5	0.2	0.1	0.2	71	48	15	8	153	243	137	50	35,807	5,460,708	7,308	0.6	76,998
Endocrine/Metabolic Drugs	0.5	0.2	0.1	0.2	15	11	2	2	30	44	21	13	1,040,590	31,324,611	207,263	17.3	2,119,261
Cardiovascular Agents	1.3	0.5	0.3	0.6	41	21	12	8	31	47	36	14	2,325,948	70,973,129	161,970	13.5	1,738,474
Respiratory Agents	0.4	0.1	0.0	0.2	9	6	1	3	25	47	16	14	1,516,408	38,554,021	423,994	35.4	4,266,741
Gastrointestinal Agents	0.4	0.2	0.1	0.2	23	15	4	4	53	88	63	19	620,976	33,019,334	134,445	11.2	1,420,881
Genitourinary Agents	0.2	0.2	0.0	0.1	7	6	0	1	32	38	26	15	184,452	5,928,357	81,213	6.8	804,171
CNS Drugs	0.7	0.3	0.1	0.3	43	29	9	4	62	106	96	14	1,334,267	82,156,188	180,625	15.1	1,924,062
Stimulants/Anti-obesity/Anorexia	0.5	0.1	0.1	0.4	18	4	3	12	35	41	49	32	156,401	5,519,702	28,570	2.4	304,549
Miscellaneous Psychological/Neurological Agents	0.6	0.4	0.0	0.2	52	47	0	5	94	125	37	29	46,120	4,318,690	7,657	0.6	82,771
Analgesics and Anesthetics	0.4	0.1	0.0	0.3	12	7	1	4	28	81	49	13	1,325,611	36,851,655	296,984	24.8	3,052,309
Neuromuscular Agents	0.6	0.2	0.1	0.3	29	18	5	7	46	91	37	22	626,270	29,057,175	92,975	7.8	1,006,688
Nutritional Products	0.4	0.0	0.1	0.2	6	0	3	3	15	22	21	12	343,156	5,187,166	94,021	7.8	895,664
Hematological Agents	0.6	0.1	0.2	0.3	49	23	14	11	86	367	66	40	201,535	17,343,017	33,512	2.8	356,678
Topical Products	0.2	0.1	0.0	0.1	6	3	1	2	25	39	34	13	805,329	20,440,423	316,785	26.4	3,241,741
Miscellaneous Products	0.3	0.1	0.1	0.1	57	38	14	4	195	259	254	51	24,038	4,696,085	7,779	0.6	82,127
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	10	0	0	0	34	0	0	0	589,601	20,027,950	189,867	15.8	1,999,870
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.	12,733,895	477,623,460	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 1999 file for Georgia, 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 (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 Georgia, 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}
 GEORGIA, 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	\$40,900,419	61,078 5.1 %	675,379	0.5	\$112	\$61	
ANTIDEPRESSANTS	32,867,155	125,733 10.5	1,350,595	0.5	54	24	
ULCER DRUGS	25,612,973	124,290 10.4	1,332,825	0.3	59	19	
ANTICONVULSANT	22,730,454	53,089 4.4	584,496	0.6	61	39	
ANTIHYPERTENSIVE	21,796,487	103,748 8.7	1,134,092	0.6	33	19	
ANTIASTHMATIC	21,089,396	216,717 18.1	2,241,246	0.3	34	9	
CALCIUM BLOCKERS	19,940,127	60,294 5.0	659,724	0.7	46	30	
ANTIDIABETIC	19,361,977	70,122 5.8	765,057	0.6	40	25	
ANALGESICS - Narcotic	19,211,631	280,590 23.4	2,925,883	0.3	25	7	
ANTIVIRAL	16,327,016	23,845 2.0	249,552	0.3	241	65	

Source: Data for this table are from the MAX 1999 file for Georgia, 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 (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}
 GEORGIA, 1999

Beneficiary Characteristics	All Top 10 Drug Groups					ANTIPSYCHOTICS					ANTIDEPRESSANTS						
	No. of Rx	Rx \$	No. of Users	Users as % of All Benes	No. of Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Mos among Users	Mean No. of Rx	Mean Rx \$
All	4,828,400	\$239,837,635	61,078	5.1 %	675,379	0.5	\$61	125,733	10.5 %	1,350,595	0.5	\$24					
Female	3,375,146	159,068,258	37,491	5.1	413,804	0.5	56	93,032	12.8	998,808	0.5	25					
Disabled	1,811,679	96,066,604	21,957	19.2	251,212	0.6	67	47,130	41.3	533,453	0.5	26					
5 and younger	10,758	506,820	42	1.1	499	0.4	38	29	0.8	337	0.4	19					
6-14	28,413	1,686,477	533	7.3	6,109	0.4	45	694	9.5	8,056	0.4	18					
15-20	24,144	1,623,747	624	12.4	7,251	0.5	64	919	18.2	10,541	0.4	27					
21-44	401,100	27,078,267	8,613	26.8	98,528	0.5	73	15,107	47.1	171,391	0.4	26					
45-64	913,677	46,881,962	9,188	20.6	104,705	0.6	68	23,694	53.1	266,037	0.5	27					
65-74	287,616	12,439,652	1,837	13.7	21,285	0.6	56	4,578	34.1	53,024	0.5	23					
75-84	116,117	4,703,028	843	13.7	9,679	0.6	43	1,699	27.7	19,498	0.5	21					
85 and older	29,854	1,146,651	277	14.6	3,156	0.5	29	410	21.6	4,569	0.5	22					
Other Eligibles	1,563,442	63,001,244	15,534	2.5	162,592	0.5	38	45,902	7.5	465,355	0.4	23					
5 and younger	77,008	1,651,700	80	0.0	891	0.3	13	150	0.1	1,618	0.2	7					
6-14	69,295	2,401,488	792	0.6	8,693	0.3	25	2,972	2.1	31,845	0.3	14					
15-20	64,972	2,016,528	777	1.0	7,682	0.3	24	3,569	4.4	34,937	0.3	16					
21-44	280,061	10,246,562	2,368	1.5	22,594	0.2	22	15,756	10.1	145,370	0.3	17					
45-64	59,807	2,786,891	434	6.7	4,603	0.4	53	2,216	34.2	22,072	0.4	24					
65-74	259,777	11,547,337	1,990	12.5	21,545	0.5	54	5,127	32.2	55,857	0.5	27					
75-84	425,303	18,519,398	4,381	17.8	47,057	0.5	47	8,667	35.3	94,564	0.6	29					
85 and older	327,219	13,831,340	4,712	20.1	49,527	0.5	33	7,445	31.8	79,092	0.6	31					
Male	1,453,254	80,769,377	23,587	5.0	261,575	0.6	69	32,701	7.0	351,787	0.4	24					
Disabled	915,732	59,815,242	17,108	19.0	194,819	0.6	78	19,820	22.1	219,134	0.5	25					
5 and younger	15,675	709,069	115	2.5	1,345	0.4	38	76	1.6	855	0.3	11					
6-14	56,058	3,196,505	1,587	12.5	18,362	0.5	53	1,860	14.6	21,519	0.4	19					
15-20	33,722	2,499,666	1,184	14.9	13,481	0.5	69	1,212	15.2	13,675	0.4	27					
21-44	303,294	26,348,945	8,650	28.4	99,176	0.7	91	7,643	25.1	84,848	0.4	26					
45-64	397,784	22,414,088	4,767	17.6	53,341	0.6	72	7,743	28.6	83,772	0.5	25					
65-74	85,151	3,662,527	605	11.7	6,901	0.6	53	991	19.2	11,203	0.5	22					
75-84	20,111	829,104	164	12.0	1,862	0.6	43	231	16.9	2,584	0.5	23					
85 and older	3,937	155,338	36	11.5	351	0.4	22	64	20.5	678	0.5	19					
Other Eligibles	537,522	20,954,135	6,479	1.7	66,756	0.5	40	12,881	3.4	132,653	0.4	22					
5 and younger	106,480	2,429,064	211	0.1	2,243	0.3	16	266	0.2	2,870	0.2	7					
6-14	104,917	3,899,054	1,949	1.4	21,172	0.4	34	4,822	3.4	51,753	0.3	15					
15-20	27,293	1,188,860	538	1.3	5,534	0.4	41	1,472	3.5	14,928	0.3	19					
21-44	16,318	720,945	135	2.7	1,141	0.4	39	797	15.7	6,650	0.4	19					
45-64	19,545	954,939	171	10.1	1,870	0.5	60	476	28.2	4,763	0.5	29					
65-74	104,107	4,785,714	1,118	14.5	11,640	0.5	49	1,936	25.0	20,335	0.5	30					
75-84	103,922	4,639,239	1,404	19.5	14,067	0.5	46	1,988	27.6	20,371	0.6	30					
85 and older	54,940	2,336,320	953	21.3	9,089	0.5	35	1,124	25.2	10,983	0.6	31					
Unknown	25	410	0	0.0	0	0.0	0	0	0.0	0	0.0	0					

All Medicaid Beneficiaries

Table 7A

Source: Data for this table are from the MAX 1999 file for Georgia, 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 (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}
 GEORGIA, 1999

Beneficiary Characteristics	ULCER DRUGS					ANTICONVULSANT					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 Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
All	124,290	10.4 %	1,332,825	0.3	\$19	53,089	4.4 %	584,496	0.6	\$39	103,748	8.7 %	1,134,092	0.6	\$19
Female	88,975	12.2	963,580	0.3	20	31,091	4.3	342,043	0.6	37	73,903	10.1	813,712	0.6	20
Disabled	40,242	35.2	461,175	0.3	21	20,054	17.6	228,161	0.6	42	37,622	32.9	426,714	0.6	20
5 and younger	468	12.8	5,120	0.3	12	373	10.2	4,220	0.6	39	100	2.7	1,115	0.5	6
6-14	462	6.3	5,380	0.3	16	1,229	16.8	14,128	0.7	42	366	5.0	4,193	0.5	9
15-20	519	10.3	5,998	0.2	12	874	17.3	9,895	0.7	53	168	3.3	1,933	0.5	11
21-44	8,898	27.7	102,238	0.3	17	7,534	23.5	86,106	0.7	48	4,705	14.7	53,345	0.5	16
45-64	19,991	44.8	227,414	0.4	23	7,906	17.7	89,257	0.6	39	20,321	45.5	227,743	0.6	20
65-74	6,351	47.3	74,170	0.4	23	1,462	10.9	16,883	0.6	29	7,786	58.0	90,498	0.6	21
75-84	2,768	45.1	32,022	0.4	24	553	9.0	6,281	0.6	23	3,277	53.4	37,795	0.6	21
85 and older	785	41.4	8,833	0.5	26	123	6.5	1,391	0.6	24	899	47.4	10,092	0.6	21
Other Eligibles	48,733	7.9	502,405	0.3	18	11,037	1.8	113,882	0.5	26	36,280	5.9	386,986	0.6	19
5 and younger	6,322	3.8	56,764	0.2	3	327	0.2	3,395	0.4	18	141	0.1	1,417	0.4	4
6-14	3,196	2.3	33,998	0.1	4	974	0.7	10,227	0.5	24	639	0.5	6,914	0.5	5
15-20	3,212	4.0	31,949	0.1	7	721	0.9	7,106	0.4	24	415	0.5	3,877	0.3	6
21-44	10,748	6.9	102,668	0.2	11	2,459	1.6	22,682	0.4	23	4,964	3.2	45,840	0.4	11
45-64	1,590	24.6	16,356	0.3	20	479	7.4	4,952	0.5	33	1,851	28.6	18,181	0.5	17
65-74	5,820	36.6	64,773	0.4	25	1,741	10.9	19,014	0.6	33	7,610	47.8	84,032	0.6	21
75-84	9,455	38.5	105,409	0.5	27	2,536	10.3	27,625	0.6	28	11,679	47.6	130,205	0.6	22
85 and older	8,390	35.8	90,488	0.5	29	1,800	7.7	18,881	0.6	24	8,981	38.3	96,520	0.7	21
Male	35,315	7.5	369,245	0.3	18	21,998	4.7	242,453	0.7	42	29,845	6.3	320,380	0.6	19
Disabled	17,202	19.2	191,705	0.4	22	16,668	18.6	187,744	0.7	46	18,430	20.5	201,557	0.6	19
5 and younger	561	12.0	6,143	0.3	13	518	11.1	5,936	0.6	30	192	4.1	2,108	0.5	6
6-14	572	4.5	6,671	0.2	15	2,022	15.9	23,398	0.6	40	1,171	9.2	13,514	0.5	8
15-20	472	5.9	5,317	0.2	14	1,348	16.9	15,248	0.7	52	346	4.3	3,845	0.5	12
21-44	4,971	16.3	55,857	0.3	19	7,116	23.3	80,768	0.7	55	3,748	12.3	40,917	0.5	18
45-64	8,178	30.2	89,700	0.4	24	4,922	18.2	54,052	0.7	40	9,669	35.7	103,301	0.6	20
65-74	1,835	35.5	21,133	0.4	24	613	11.9	6,923	0.7	28	2,539	49.1	29,137	0.6	21
75-84	505	36.9	5,713	0.5	25	106	7.7	1,204	0.6	27	622	45.5	7,152	0.6	21
85 and older	108	34.6	1,171	0.4	22	23	7.4	215	0.6	21	143	45.8	1,583	0.6	22
Other Eligibles	18,113	4.8	177,540	0.3	14	5,330	1.4	54,709	0.6	27	11,415	3.0	118,823	0.6	18
5 and younger	7,199	4.2	63,746	0.2	4	423	0.2	4,311	0.4	16	302	0.2	3,171	0.4	4
6-14	2,556	1.8	27,468	0.1	5	1,606	1.1	17,011	0.4	21	1,954	1.4	20,755	0.5	5
15-20	1,012	2.4	10,445	0.1	7	551	1.3	5,472	0.5	32	229	0.5	2,385	0.4	9
21-44	511	10.1	4,249	0.3	20	243	4.8	1,969	0.4	29	330	6.5	2,628	0.5	16
45-64	438	26.0	4,444	0.4	28	252	15.0	2,719	0.7	35	529	31.4	5,023	0.6	20
65-74	2,377	30.7	25,218	0.4	26	990	12.8	10,377	0.7	35	3,312	42.8	34,905	0.6	22
75-84	2,470	34.2	26,137	0.5	27	852	11.8	8,738	0.7	30	3,116	43.2	32,886	0.6	23
85 and older	1,550	34.7	15,833	0.5	29	413	9.2	4,112	0.7	27	1,643	36.8	17,070	0.6	22
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	5.0	12	0.4	4

Table 7B
 All Medicaid Beneficiaries

Source: Data for this table are from the MAX 1999 file for Georgia, 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 (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^{a, b, c}
 GEORGIA, 1999

Beneficiary Characteristics	ANTI-ASTHMATIC					CALCIUM BLOCKERS					ANTI-DIABETIC				
	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	216,717	18.1 %	2,241,246	0.3	\$9	60,294	5.0 %	659,724	0.7	\$30	70,122	5.8 %	765,957	0.6	\$25
Female	121,522	16.7	1,266,265	0.3	10	46,284	6.4	509,179	0.7	30	54,772	7.5	602,230	0.6	25
Disabled	38,131	33.4	432,054	0.4	15	22,736	19.9	257,952	0.7	31	31,406	27.5	356,119	0.6	27
5 and younger	1,755	48.0	19,624	0.3	10	10	0.3	118	0.6	23	7	0.2	82	0.6	77
6-14	1,864	25.4	21,557	0.3	12	46	0.6	500	0.5	20	54	0.7	614	0.8	30
15-20	866	17.2	10,080	0.3	12	69	1.4	768	0.4	22	137	2.7	1,572	0.7	28
21-44	7,948	24.8	90,530	0.3	12	2,738	8.5	31,045	0.5	27	4,108	12.8	46,989	0.6	25
45-64	18,789	42.1	210,723	0.4	17	11,993	26.9	134,366	0.7	31	18,220	40.8	204,569	0.6	28
65-74	4,928	36.7	56,856	0.4	17	4,967	37.0	57,749	0.7	34	6,296	46.9	72,808	0.7	27
75-84	1,624	26.4	18,690	0.4	15	2,287	37.2	26,307	0.7	33	2,115	34.4	24,187	0.7	24
85 and older	357	18.8	3,994	0.4	14	626	33.0	7,099	0.7	32	469	24.7	5,298	0.6	19
Other Eligibles	83,391	13.6	834,211	0.2	7	23,548	3.8	251,227	0.7	29	23,364	3.8	246,098	0.6	22
5 and younger	33,280	19.9	327,380	0.2	4	6	0.0	58	0.2	7	36	0.0	348	0.7	33
6-14	15,023	10.8	156,562	0.2	7	46	0.0	464	0.3	11	226	0.2	2,287	0.8	29
15-20	6,317	7.8	62,003	0.2	6	460	0.6	4,435	0.2	6	492	0.6	4,686	0.6	24
21-44	13,026	8.3	119,165	0.2	7	3,417	2.2	31,465	0.3	16	3,703	2.4	33,476	0.5	19
45-64	1,369	21.1	13,639	0.4	15	1,140	17.6	10,921	0.6	27	1,392	21.5	13,506	0.6	25
65-74	4,223	26.5	45,709	0.4	17	4,815	30.2	53,223	0.7	31	5,764	36.2	63,295	0.7	25
75-84	5,608	22.8	61,510	0.4	16	7,684	31.3	85,728	0.7	33	7,628	31.1	84,479	0.7	23
85 and older	4,545	19.4	48,243	0.3	13	5,980	25.5	64,933	0.7	31	4,123	17.6	44,021	0.7	19
Male	95,195	20.2	974,981	0.3	9	14,010	3.0	150,545	0.6	31	15,350	3.3	162,827	0.6	25
Disabled	21,711	24.2	240,806	0.4	16	9,202	10.2	100,772	0.6	31	9,934	11.1	107,880	0.6	27
5 and younger	2,627	56.2	29,433	0.3	10	15	0.3	170	0.3	11	13	0.3	140	0.5	22
6-14	3,492	27.4	40,376	0.3	12	46	0.4	510	0.5	19	44	0.3	500	0.9	44
15-20	1,036	13.0	11,741	0.3	12	64	0.8	694	0.5	28	84	1.1	962	0.8	30
21-44	3,429	11.2	38,377	0.3	13	1,821	6.0	19,958	0.6	30	2,008	6.6	21,980	0.6	26
45-64	8,300	30.6	88,774	0.5	19	5,434	20.1	58,732	0.6	32	6,129	22.6	65,491	0.6	27
65-74	2,280	44.1	25,965	0.5	19	1,410	27.3	16,082	0.7	32	1,353	26.2	15,365	0.7	26
75-84	441	32.2	5,023	0.4	17	339	24.8	3,848	0.7	33	259	18.9	2,933	0.7	23
85 and older	106	34.0	1,117	0.4	18	73	23.4	778	0.6	27	44	14.1	509	0.6	19
Other Eligibles	73,484	19.3	734,175	0.2	7	4,808	1.3	49,773	0.7	30	5,416	1.4	54,947	0.7	23
5 and younger	43,720	25.4	428,322	0.2	5	13	0.0	112	0.4	16	41	0.0	381	0.6	21
6-14	19,700	14.1	203,922	0.2	8	60	0.0	630	0.3	15	186	0.1	1,843	0.8	30
15-20	3,113	7.4	31,652	0.3	8	66	0.2	649	0.4	19	126	0.3	1,102	0.7	30
21-44	343	6.8	2,813	0.3	10	170	3.4	1,301	0.5	22	214	4.2	1,620	0.6	23
45-64	408	24.2	4,161	0.4	17	280	16.6	2,672	0.6	31	373	22.1	3,477	0.6	27
65-74	2,410	31.2	24,972	0.4	17	1,702	27.0	18,007	0.7	31	1,987	25.7	20,886	0.7	24
75-84	2,504	34.7	25,488	0.5	18	1,682	23.3	17,806	0.7	32	1,680	23.3	17,604	0.7	21
85 and older	1,286	28.8	12,845	0.4	15	835	18.7	8,596	0.7	29	809	18.1	8,034	0.6	18
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	10.0	13	1.2	24

Table 7C
 All Medicaid Beneficiaries

Source: Data for this table are from the MAX 1999 file for Georgia, 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 (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}
 GEORGIA, 1999

Beneficiary Characteristics	ANALGESICS - Narcotic					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 \$
	280,590	23.4 %	2,925,883	0.3	\$7	23,845	2.0 %	249,552	0.3	\$65
Female	216,657	29.7	2,243,187	0.3	6	14,440	2.0	151,113	0.2	49
Disabled	78,619	68.8	896,097	0.3	9	5,930	5.2	66,570	0.3	77
5 and younger	251	6.9	2,911	0.1	1	85	2.3	952	0.4	48
6-14	793	10.8	9,262	0.1	3	262	3.6	3,002	0.4	76
15-20	1,517	30.0	17,504	0.2	3	117	2.3	1,356	0.2	35
21-44	23,825	74.2	271,958	0.3	9	3,014	9.4	33,506	0.3	93
45-64	37,437	83.9	422,919	0.3	10	1,991	4.5	22,323	0.3	71
65-74	9,636	71.7	112,170	0.3	9	304	2.3	3,590	0.1	25
75-84	4,095	66.7	47,337	0.3	9	121	2.0	1,427	0.1	17
85 and older	1,065	56.1	12,036	0.4	8	36	1.9	414	0.1	7
Other Eligibles	138,035	22.5	1,347,054	0.2	4	8,510	1.4	84,543	0.2	26
5 and younger	3,917	2.3	41,107	0.1	1	1,174	0.7	12,216	0.1	8
6-14	7,026	5.0	74,545	0.1	1	1,030	0.7	10,755	0.1	13
15-20	20,549	25.5	194,707	0.1	1	1,187	1.5	11,483	0.2	13
21-44	70,833	45.3	647,325	0.2	2	3,735	2.4	34,760	0.2	46
45-64	3,844	59.4	38,558	0.3	8	141	2.2	1,364	0.2	57
65-74	8,240	51.8	91,321	0.3	9	320	2.0	3,652	0.2	23
75-84	12,817	52.2	143,493	0.3	10	483	2.0	5,453	0.1	8
85 and older	10,809	46.1	115,998	0.3	10	440	1.9	4,860	0.1	7
Male	63,933	13.6	682,696	0.3	8	9,405	2.0	98,439	0.3	91
Disabled	35,513	39.5	393,040	0.3	11	6,558	7.3	69,137	0.4	124
5 and younger	413	8.8	4,742	0.1	1	110	2.4	1,265	0.4	53
6-14	1,217	9.6	14,223	0.1	2	240	1.9	2,812	0.3	53
15-20	1,408	17.7	16,210	0.2	3	100	1.3	1,114	0.2	31
21-44	12,908	42.3	143,747	0.3	11	4,230	13.9	43,895	0.4	130
45-64	15,864	58.5	171,882	0.4	13	1,732	6.4	18,375	0.4	137
65-74	2,861	55.4	32,789	0.3	9	111	2.1	1,279	0.2	50
75-84	692	50.6	7,766	0.4	8	30	2.2	341	0.3	53
85 and older	150	48.1	1,681	0.4	11	5	1.6	56	0.1	3
Other Eligibles	28,420	7.5	289,656	0.2	4	2,847	0.7	29,302	0.1	14
5 and younger	5,316	3.1	55,562	0.1	1	1,180	0.7	12,087	0.1	6
6-14	7,173	5.1	75,886	0.1	1	936	0.7	9,838	0.1	13
15-20	4,529	10.7	45,903	0.1	1	290	0.7	2,843	0.1	17
21-44	2,442	48.2	19,564	0.4	11	90	1.8	807	0.3	61
45-64	967	57.4	9,225	0.4	11	44	2.6	467	0.3	71
65-74	3,272	42.3	34,857	0.3	9	113	1.5	1,268	0.2	42
75-84	2,899	40.2	30,307	0.3	9	119	1.7	1,233	0.2	20
85 and older	1,822	40.8	18,352	0.3	8	75	1.7	759	0.1	7
Unknown	3	15.0	36	0.1	1	0	0.0	0	0.0	0
All	1,198,823		10,611,267							

Source: Data for this table are from the MAX 1999 file for Georgia, 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 (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}
 GEORGIA, 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	\$187	4.7	25,602	266,090
Age				
0-64	233	5.1	2,797	30,622
65-74	222	5.2	3,659	38,704
75-84	199	5.0	8,156	84,661
85 and older	154	4.3	10,990	112,103
Unknown	0	0.0	0	0
Gender				
Female	184	4.7	19,178	201,168
Male	196	4.7	6,424	64,922
Unknown	0	0.0	0	0
Race				
White	198	5	17,676	182,357
African American	162	4.1	7,245	77,555
Other/unknown	176	4.3	681	6,178
Basis of Eligibility				
Aged	182	4.7	21,768	224,703
Disabled	214	4.9	3,834	41,387
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 Georgia, 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 13,135 beneficiaries who were in nursing facilities for part of their enrollment and their 125,492 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}
 GEORGIA, 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			
		Generic	Generic		Generic	Generic		Generic	Generic								
Anti-infective Agents	0.3	0.2	0.0	0.1	\$15	\$13	\$0	\$2	\$49	\$76	\$51	\$14	55,484	\$2,731,123	17,115	66.9 %	184,586
Biologicals	0.2	0.1	0.1	0.0	116	92	25	0	698	1,101	294	0	2	1,395	1	0.0	12
Antineoplastic Agents	0.5	0.1	0.2	0.2	70	31	32	6	137	230	144	43	4,996	684,007	943	3.7	9,812
Endocrine/Metabolic Drugs	0.9	0.4	0.2	0.3	24	17	3	4	25	42	14	13	92,403	2,347,283	9,316	36.4	98,644
Cardiovascular Agents	1.7	0.4	0.4	0.8	45	18	13	14	27	43	30	17	313,394	8,447,153	17,773	69.4	186,382
Respiratory Agents	0.5	0.2	0.0	0.3	14	8	0	6	27	48	32	18	57,966	1,583,906	10,272	40.1	110,796
Gastrointestinal Agents	0.8	0.3	0.2	0.3	42	25	10	7	52	85	54	22	93,837	4,878,708	11,026	43.1	117,457
Genitourinary Agents	0.5	0.3	0.0	0.2	19	15	0	4	40	58	37	19	18,665	747,687	3,521	13.8	38,406
CNS Drugs	1.2	0.6	0.2	0.5	74	54	13	7	61	94	86	14	215,094	13,135,912	16,781	65.5	177,955
Stimulants/Anti-obesity/Anorexia	0.5	0.0	0.1	0.5	13	0	2	11	24	0	46	22	819	19,618	139	0.5	1,520
Miscellaneous Psychological/Neurological Agents	0.7	0.7	0.0	0.0	83	81	0	1	116	123	43	28	14,108	1,635,690	1,917	7.5	19,791
Analgesics and Anesthetics	0.7	0.2	0.0	0.5	24	15	1	8	34	82	48	15	85,410	2,868,210	11,268	44.0	119,871
Neuromuscular Agents	1.0	0.2	0.3	0.5	44	18	13	13	44	81	43	27	80,188	3,535,849	7,418	29.0	80,385
Nutritional Products	0.7	0.0	0.2	0.4	11	0	5	6	17	18	22	15	49,385	863,123	7,184	28.1	75,965
Hematological Agents	0.8	0.1	0.4	0.4	32	11	11	11	40	162	31	29	42,236	1,705,258	5,042	19.7	52,801
Topical Products	0.4	0.2	0.1	0.2	14	8	4	3	33	46	43	14	67,958	2,222,516	14,480	56.6	158,549
Miscellaneous Products	0.3	0.0	0.0	0.2	17	5	2	10	63	186	163	44	1,242	78,498	444	1.7	4,701
Unknown Therapeutic Category	0.5	0.0	0.0	0.0	18	0	0	0	37	0	0	0	62,507	2,289,755	11,568	45.2	126,032
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.	1,255,694	49,775,691	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 1999 file for Georgia, 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 13,135 beneficiaries who were in nursing facilities for part of their enrollment and their 125,492 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 Georgia, 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.

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}
 GEORGIA, 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	\$6,010,863	9,901	38.7 %	107,045	0.6	\$92	\$56
ANTIDEPRESSANTS	5,459,825	12,650	49.4	136,395	0.7	57	40
ULCER DRUGS	3,850,505	10,124	39.5	109,183	0.6	57	35
ANTHYPERTENSIVE	2,622,187	9,071	35.4	95,857	0.8	35	27
ANTICONVULSANT	2,509,207	5,747	22.4	63,150	0.8	48	40
CALCIUM BLOCKERS	2,163,263	5,637	22.0	60,214	0.8	43	36
ANALGESICS - Narcotic	1,712,792	11,052	43.2	118,199	0.4	33	14
ANTIIDIABETIC	1,702,442	6,697	26.2	72,111	0.8	31	24
NEUROLOGICAL	1,635,690	1,895	7.4	19,773	0.7	116	83
ANTIANGINAL AGENTS	1,584,051	4,480	17.5	47,421	0.8	43	33

Source: Data for this table are from the MAX 1999 file for Georgia, 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 13,135 beneficiaries who were in nursing facilities for part of their enrollment and their 125,492 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} GEORGIA, 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	561,926	\$29,250,825	9,901	38.7 %	107,045	0.6	\$56	12,650	49.4 %	136,395	0.7	\$40					
Female	421,410	21,702,946	7,206	37.6	78,572	0.6	55	9,693	50.5	105,202	0.7	39					
Disabled	56,668	3,246,501	1,161	51.8	13,295	0.6	69	1,133	50.6	12,624	0.7	44					
64 or younger	33,106	2,018,928	620	49.7	7,005	0.6	78	719	57.6	7,969	0.7	47					
65-74	9,691	543,482	223	63.2	2,585	0.7	70	164	46.5	1,882	0.7	41					
75-84	9,531	471,038	223	57.2	2,620	0.6	52	164	42.1	1,879	0.7	38					
85 and older	4,340	213,053	95	38.0	1,085	0.6	43	86	34.4	894	0.7	37					
Other Eligibles	364,742	18,456,445	6,045	35.7	65,277	0.6	52	8,560	50.5	92,578	0.7	39					
64 or younger	4,844	289,628	96	64.9	1,066	0.6	77	101	68.2	1,152	0.7	47					
65-74	54,791	3,057,695	961	51.6	10,556	0.6	72	1,262	67.8	13,743	0.7	43					
75-84	140,351	7,305,015	2,358	40.9	25,734	0.6	58	3,288	57.0	35,723	0.7	40					
85 and older	164,756	7,804,107	2,630	28.7	27,921	0.6	39	3,909	42.7	41,960	0.7	37					
Male	140,516	7,547,879	2,695	42.0	28,473	0.6	59	2,957	46.0	31,193	0.7	42					
Disabled	38,565	2,222,452	716	44.9	8,071	0.7	70	700	43.9	7,726	0.8	46					
64 or younger	31,068	1,824,484	556	45.1	6,303	0.7	72	570	46.2	6,337	0.7	47					
65-74	3,953	214,617	96	54.9	1,093	0.7	63	75	42.9	840	0.8	42					
75-84	2,998	157,604	54	37.5	595	0.7	71	45	31.3	472	0.8	45					
85 and older	546	25,747	10	24.4	80	0.4	40	10	24.4	77	0.8	29					
Other Eligibles	101,951	5,325,427	1,979	41.0	20,402	0.6	55	2,257	46.7	23,467	0.7	41					
64 or younger	4,854	278,041	83	49.4	981	0.6	71	84	50.0	994	0.7	46					
65-74	32,221	1,742,299	604	47.6	6,422	0.6	59	719	56.6	7,650	0.7	44					
75-84	39,130	2,046,628	784	42.3	8,032	0.6	57	886	47.8	9,115	0.7	39					
85 and older	25,746	1,258,459	508	33.0	4,967	0.6	43	568	36.9	5,708	0.7	38					
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 Georgia, 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 13,135 beneficiaries who were in nursing facilities for part of their enrollment and their 125,492 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}
 GEORGIA, 1999

Beneficiary Characteristics	ULCER DRUGS						ANTIHYPERTENSIVE						ANTICONVULSANT					
	Users as %			Users as %			Users as %			Users as %			Users as %			Users as %		
	No. of Users	No. of Bene Users	Mean No. of Rx	No. of Users	No. of Bene Users	Mean No. of Rx	No. of Users	No. of Bene Users	Mean No. of Rx	No. of Users	No. of Bene Users	Mean No. of Rx	No. of Users	No. of Bene Users	Mean No. of Rx	No. of Users	No. of Bene Users	Mean No. of Rx
All	10,124	39.5 %	0.6	9,071	35.4 %	0.8	5,747	22.4 %	0.8	5,747	22.4 %	0.8	63,150	0.8	\$40			
Female	7,626	39.8	0.6	6,614	34.5	0.8	3,751	19.6	0.8	3,751	19.6	0.8	41,448	0.8	38			
Disabled	870	38.8	0.6	716	32.0	0.8	961	42.9	0.8	961	42.9	0.8	10,959	0.9	45			
64 or younger	479	38.4	0.6	365	29.2	0.8	705	56.5	0.8	705	56.5	0.8	8,029	0.9	47			
65-74	132	37.4	0.6	136	38.5	0.7	135	38.2	0.7	135	38.2	0.7	1,561	0.9	42			
75-84	164	42.1	0.6	145	37.2	0.7	95	24.4	0.7	95	24.4	0.7	1,084	0.8	33			
85 and older	95	38.0	0.7	70	28.0	0.8	26	10.4	0.8	26	10.4	0.8	285	0.8	42			
Other Eligibles	6,756	39.9	0.6	5,898	34.8	0.8	2,790	16.5	0.8	2,790	16.5	0.8	30,489	0.8	35			
64 or younger	57	38.5	0.6	69	46.6	0.7	86	58.1	0.7	86	58.1	0.7	963	0.9	51			
65-74	802	43.1	0.6	731	39.3	0.8	670	36.0	0.8	670	36.0	0.8	7,462	0.8	42			
75-84	2,431	42.1	0.6	2,179	37.8	0.8	1,141	19.8	0.8	1,141	19.8	0.8	12,540	0.8	35			
85 and older	3,466	37.8	0.6	2,919	31.9	0.8	893	9.8	0.8	893	9.8	0.7	9,524	0.7	28			
Male	2,498	38.9	0.6	2,457	38.2	0.8	1,996	31.1	0.8	1,996	31.1	0.9	21,702	0.9	44			
Disabled	622	39.0	0.6	590	37.0	0.8	796	50.0	0.8	796	50.0	0.9	8,956	0.9	53			
64 or younger	488	39.6	0.6	445	36.1	0.8	709	57.5	0.8	709	57.5	0.9	8,022	0.9	55			
65-74	57	32.6	0.7	66	37.7	0.7	50	28.6	0.7	50	28.6	0.9	541	0.9	35			
75-84	63	43.8	0.6	58	40.3	0.7	30	20.8	0.7	30	20.8	0.9	342	0.9	41			
85 and older	14	34.1	0.7	21	51.2	0.6	7	17.1	0.6	7	17.1	0.7	51	0.7	31			
Other Eligibles	1,876	38.8	0.6	1,867	38.6	0.8	1,200	24.8	0.8	1,200	24.8	0.8	12,746	0.8	38			
64 or younger	73	43.5	0.6	75	44.6	0.8	92	54.8	0.8	92	54.8	0.9	1,077	0.9	45			
65-74	481	37.9	0.6	558	43.9	0.8	474	37.3	0.8	474	37.3	0.9	5,100	0.9	41			
75-84	766	41.4	0.6	708	38.2	0.8	419	22.6	0.8	419	22.6	0.8	4,333	0.8	35			
85 and older	556	36.1	0.6	526	34.1	0.8	215	14.0	0.8	215	14.0	0.7	2,236	0.7	32			
Unknown	0	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 Georgia, 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 13,135 beneficiaries who were in nursing facilities for part of their enrollment and their 125,492 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}
 GEORGIA, 1999

Beneficiary Characteristics	CALCIUM BLOCKERS					ANALGESICS - Narcotic					ANTIDIABETIC						
	Users as %					Users as %					Users as %						
	No. of Users	No. of Bene among Users	Mean No. of Rx	Mean Rx \$	Mean No. of Rx	No. of Users	No. of Bene among Users	Mean No. of Rx	Mean Rx \$	Mean No. of Rx	No. of Users	No. of Bene among Users	Mean No. of Rx	Mean Rx \$	No. of Users	No. of Bene among Users	Mean No. of Rx
All	5,637	60,214	0.8	\$36	0.4	11,052	43.2 %	118,199	0.4	\$15	6,697	26.2 %	72,111	0.8	\$24		
Female	4,339	46,743	0.8	36	0.4	8,639	45.0	93,224	0.4	15	5,050	26.3	54,722	0.8	23		
Disabled	449	4,913	0.8	38	0.4	972	43.4	10,620	0.4	18	751	33.5	8,182	0.8	26		
64 or younger	213	2,363	0.8	40	0.5	567	45.4	6,285	0.5	22	393	31.5	4,213	0.8	27		
65-74	86	934	0.8	41	0.4	143	40.5	1,541	0.4	13	177	50.1	1,987	0.7	25		
75-84	93	1,031	0.8	34	0.4	170	43.6	1,838	0.4	12	135	34.6	1,494	0.7	25		
85 and older	57	585	0.8	33	0.4	92	36.8	956	0.4	12	46	18.4	488	0.7	18		
Other Eligibles	3,890	41,830	0.8	35	0.4	7,667	45.3	82,604	0.4	15	4,299	25.4	46,540	0.8	23		
64 or younger	39	447	0.9	48	0.4	72	48.6	811	0.4	14	69	46.6	785	0.7	24		
65-74	492	5,394	0.8	39	0.5	974	52.3	10,571	0.5	20	759	40.8	8,270	0.8	27		
75-84	1,434	15,406	0.8	36	0.5	2,751	47.7	29,953	0.5	15	1,832	31.8	19,929	0.8	24		
85 and older	1,925	20,583	0.8	34	0.4	3,870	42.3	41,269	0.4	13	1,639	17.9	17,556	0.7	20		
Male	1,298	13,471	0.8	37	0.4	2,413	37.6	24,975	0.4	12	1,647	25.6	17,389	0.8	25		
Disabled	264	2,895	0.8	39	0.4	600	37.7	6,515	0.4	13	387	24.3	4,279	0.8	29		
64 or younger	195	2,167	0.8	40	0.4	500	40.6	5,480	0.4	14	283	23.0	3,117	0.9	31		
65-74	32	354	0.8	35	0.3	51	29.1	526	0.3	7	55	31.4	615	0.7	26		
75-84	32	329	0.9	34	0.3	39	27.1	393	0.3	8	41	28.5	451	0.7	24		
85 and older	5	45	0.9	45	0.3	10	24.4	116	0.3	7	8	19.5	96	0.7	21		
Other Eligibles	1,034	10,576	0.8	36	0.4	1,813	37.5	18,460	0.4	11	1,260	26.1	13,110	0.8	23		
64 or younger	40	463	0.9	42	0.5	59	35.1	669	0.5	12	57	33.9	651	0.7	26		
65-74	317	3,341	0.9	40	0.4	470	37.0	4,943	0.4	13	391	30.8	4,147	0.8	28		
75-84	419	4,203	0.8	36	0.4	698	37.7	7,098	0.4	12	501	27.1	5,175	0.7	21		
85 and older	258	2,569	0.8	31	0.4	586	38.0	5,750	0.4	10	311	20.2	3,137	0.7	18		
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 Georgia, 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 13,135 beneficiaries who were in nursing facilities for part of their enrollment and their 125,492 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}
 GEORGIA, 1999

Beneficiary Characteristics	MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL						ANTIANGINAL AGENTS						
	Users as %			Users as %			Users as %			Users as %			
	No. of Users	Residents	NF	No. of Bene Mos among Users	Mean Rx \$	Mean No. of Rx	No. of Users	Residents	NF	No. of Bene Mos among Users	Mean Rx \$	Mean No. of Rx	All-Year NF Residents
All	1,895	7.4 %	19,773	0.7	\$83	0.8	4,480	17.5 %	47,421	\$33	0.8	25,602	266,090
Female	1,479	7.7	15,676	0.7	83	0.8	3,471	18.1	37,031	34	0.8	19,178	201,168
Disabled	71	3.2	778	0.6	80	0.7	257	11.5	2,711	31	0.7	2,241	24,304
64 or younger	29	2.3	304	0.6	100	0.8	99	7.9	1,037	32	0.8	1,248	13,716
65-74	10	2.8	120	0.6	52	0.7	51	14.4	528	29	0.7	353	3,902
75-84	19	4.9	200	0.7	65	0.7	69	17.7	769	29	0.7	390	4,241
85 and older	13	5.2	154	0.7	81	0.9	38	15.2	377	38	0.9	250	2,445
Other Eligibles	1,408	8.3	14,898	0.7	83	0.8	3,214	19.0	34,320	34	0.8	16,937	176,864
64 or younger	4	2.7	48	0.7	79	0.7	15	10.1	171	30	0.7	148	1,657
65-74	137	7.4	1,402	0.7	79	0.8	325	17.5	3,489	34	0.8	1,861	19,829
75-84	583	10.1	6,167	0.7	85	0.8	1,012	17.5	10,846	34	0.8	5,770	60,794
85 and older	684	7.5	7,281	0.7	81	0.8	1,862	20.3	19,814	34	0.8	9,158	94,584
Male	416	6.5	4,097	0.7	84	0.8	1,009	15.7	10,390	33	0.8	6,424	64,922
Disabled	17	1.1	171	0.7	99	0.7	150	9.4	1,597	32	0.7	1,593	17,083
64 or younger	11	0.9	110	0.6	106	0.7	91	7.4	967	29	0.7	1,233	13,310
65-74	3	1.7	36	1.0	120	0.9	22	12.6	230	44	0.9	175	1,888
75-84	2	1.4	24	0.4	37	0.7	30	20.8	349	30	0.7	144	1,504
85 and older	1	2.4	1	1.0	122	0.8	7	17.1	51	37	0.8	41	381
Other Eligibles	399	8.3	3,926	0.7	83	0.8	859	17.8	8,793	33	0.8	4,831	47,839
64 or younger	2	1.2	24	1.1	121	0.7	23	13.7	275	31	0.7	168	1,939
65-74	78	6.1	753	0.7	77	0.8	194	15.3	2,036	34	0.8	1,270	13,085
75-84	189	10.2	1,819	0.7	83	0.8	328	17.7	3,338	32	0.8	1,852	18,122
85 and older	130	8.4	1,330	0.7	86	0.8	314	20.4	3,144	32	0.8	1,541	14,693
Unknown	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 Georgia, 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 13,135 beneficiaries who were in nursing facilities for part of their enrollment and their 125,492 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}
 GEORGIA, 1999

Beneficiary Characteristics	No. of Benes					No. of Bene Mos					
	All	Aged	Disabled	Adults	Children	All	Aged	Disabled	Adults	Children	Unknown
All	1,209,508	84,771	206,604	207,768	709,882	483	10,842,712	2,224,619	1,522,921	6,218,140	605
Age											
5 and younger	350,158	0	8,383	85	341,674	16	2,954,214	85,044	596	2,868,558	16
6-14	302,828	2	20,289	317	282,201	19	2,833,459	225,919	2,133	2,605,362	21
15-20	136,839	0	13,132	38,275	85,405	27	1,159,677	142,141	277,214	740,295	27
21-44	226,180	7	63,465	162,049	552	107	1,876,865	687,094	1,185,948	3,650	134
45-64	81,182	1,253	72,751	6,994	20	164	832,902	762,576	56,695	115	221
65-74	42,713	23,765	18,819	31	1	97	460,013	213,551	218	10	114
75-84	39,443	31,844	7,549	7	1	42	419,967	84,706	43	12	59
85 and older	30,145	27,897	2,216	9	12	11	305,528	23,588	62	70	13
Unknown	20	3	0	1	16	0	87	0	12	68	0
Gender											
Female	735,264	64,835	115,948	201,532	352,661	288	6,533,965	1,268,150	1,484,387	3,099,682	353
Male	474,239	19,936	90,656	6,236	357,216	195	4,308,695	956,469	38,534	3,118,406	252
Unknown	5	0	0	0	5	0	52	0	0	52	0
Race											
White	414,324	43,279	76,113	75,883	218,778	271	3,598,200	811,939	515,951	1,837,727	356
African American	637,356	29,201	94,990	118,609	394,455	101	5,976,694	1,040,567	939,846	3,683,863	132
Other/unknown	157,828	12,291	35,501	13,276	96,649	111	1,267,818	372,113	67,124	696,550	117
Use of Nursing Facilities											
All year	25,603	21,768	3,834	0	0	1	266,098	41,388	0	0	2
Part year	13,138	11,142	1,987	7	2	0	125,620	20,401	66	23	0
None	1,170,767	51,861	200,783	207,761	709,880	482	10,450,994	2,162,830	1,522,855	6,218,117	603
Maintenance Assistance Status											
Cash	391,895	38,610	182,866	46,689	123,730	0	4,185,380	2,023,852	435,187	1,292,002	0
Medically needy	7,667	3,433	4,122	1	111	0	50,801	25,836	1	610	0
Poverty related	547,411	2,222	2,262	102,795	440,132	0	4,368,889	23,481	646,596	3,674,178	0
Other/unknown	262,535	40,506	17,354	58,283	145,909	483	2,237,642	151,450	441,137	1,251,350	605
Dual Status^c											
Full dual, all year	151,921	76,599	74,391	661	40	230	1,613,999	815,616	4,844	406	304
Full dual, part year	5,443	3,043	2,394	6	0	0	58,714	25,233	70	0	0
Non-dual, all year	1,052,144	5,129	129,819	207,101	709,842	253	9,169,999	1,383,770	1,518,007	6,217,734	301
Managed Care Status											
FFS all year	1,180,509	84,403	202,660	203,098	690,348	0	10,527,949	2,178,356	1,472,874	6,004,624	0
FFS part year, with Rx claims	5,672	50	772	1,502	3,348	0	63,728	9,038	16,615	37,494	0
FFS part year, no Rx claims	12,642	58	601	1,864	10,119	0	128,356	6,637	17,788	103,288	0
MC all year, with Rx claims	232	0	145	74	13	0	2,774	1,731	888	155	0
MC all year, no Rx claims	9,970	260	2,426	1,230	6,054	0	119,300	28,857	14,756	72,579	0
Unknown	483	0	0	0	0	483	605	0	0	0	605

Appendix Table A.1

All Medicaid Beneficiaries

Source: Data for this table are from the MAX 1999 file for Georgia, 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
 GEORGIA, 1999

	Benes and			
	Bene Mos in Cell B of Table 1 No. of Benes	Bene Mos in Cell C of Table 1 No. of Benes	Bene Mos in Cell D of Table 1 No. of Benes	Bene Mos in Cell E of Table 1 No. of Benes
All	1,209,508	10,842,712	1,198,823	10,611,267
FFS all year	1,180,509	10,527,949	1,180,509	10,527,064
FFS part year, with Rx claims	5,672	63,728	5,672	35,411
FFS part year, with no Rx claims	12,642	128,356	12,642	48,792
MC all year, with Rx claims	232	2,774	0	0
MC all year, with no Rx claims	9,970	119,300	0	0
Unknown	483	605	0	0
			10,202	229,955

Source: Data for this table are from the MAX 1999 file for Georgia, 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.