

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

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TABLE 1
OVERVIEW OF BENEFICIARY SELECTION CRITERIA FOR STUDY POPULATION
HAWAII, 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	199,173 (A)	24,862 (E)
2. Benes who had Medicaid pharmacy benefits during at least one month ^b	199,111 (B)	24,803 (F)
3. Benes who had fee-for-service pharmacy benefit coverage during at least one month ^{c, d, e}	94,257 (C)	24,555 (G)
4. Benes who were all-year nursing facility residents ^f	2,384 (D)	2,193 (H)

Source: Data for this table are from the MAX 1999 file for Hawaii, released by CMS in 1/2004. 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 Hawaii in 1999 was \$47,029,096, of which \$1,726,961 was excluded from our analysis because those claims were made for beneficiaries who were outside the study population or took place during months that were excluded from the analysis.

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

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

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

Beneficiaries represented in Cell G, the dual study population, include all dual eligible beneficiaries who had a fee-for-service pharmacy benefit at least during one month in 1999. All benefit months of such dual eligible beneficiaries, of which 0.1 percent were restricted benefit months without a pharmacy benefit in Hawaii, 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}
 HAWAII, 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
All	94,257	18,657	19,724	28,779	27,097	0	504,247	189,160	197,595	60,697	56,795	0					
Age																	
5 and younger	11,831	0	509	0	11,322	0	27,987	0	4,653	0	23,334	0					
6-14	12,045	0	711	0	11,334	0	31,092	0	7,486	0	23,606	0					
15-20	7,795	0	568	2,791	4,436	0	20,901	0	5,390	5,676	9,835	0					
21-44	28,591	0	7,323	21,263	5	0	116,686	0	72,015	44,651	20	0					
45-64	13,768	0	9,080	4,688	0	0	101,593	0	91,325	10,268	0	0					
65-74	8,882	7,529	1,316	37	0	0	92,155	77,622	14,431	102	0	0					
75-84	7,390	7,217	173	0	0	0	76,808	74,969	1,839	0	0	0					
85 and older	3,955	3,911	44	0	0	0	37,025	36,569	456	0	0	0					
Unknown	0	0	0	0	0	0	0	0	0	0	0	0					
Gender																	
Female	50,703	11,983	9,421	15,800	13,499	0	278,285	123,349	94,260	32,605	28,071	0					
Male	43,554	6,674	10,303	12,979	13,598	0	225,962	65,811	103,335	28,092	28,724	0					
Unknown	0	0	0	0	0	0	0	0	0	0	0	0					
Race																	
White	17,763	2,161	5,462	6,527	3,613	0	95,208	20,913	53,502	13,412	7,381	0					
African American	1,572	70	389	675	438	0	6,713	717	3,540	1,483	973	0					
Other/unknown	74,922	16,426	13,873	21,577	23,046	0	402,326	167,530	140,553	45,802	48,441	0					
Use of Nursing Facilities																	
All year	2,384	2,033	350	1	0	0	22,922	19,030	3,891	1	0	0					
Part year	1,656	1,227	393	34	2	0	15,168	11,111	3,958	86	13	0					
None	90,217	15,397	18,981	28,744	27,095	0	466,157	159,019	189,746	60,610	56,782	0					
Maintenance Assistance Status																	
Cash	50,094	8,399	13,108	12,006	16,581	0	287,266	90,981	138,282	24,612	33,391	0					
Medically needy	2,535	1,959	557	11	8	0	19,885	15,419	4,436	15	15	0					
Poverty-related	31,106	8,259	5,325	10,144	7,378	0	173,095	82,358	52,961	21,626	16,150	0					
Other/unknown	10,522	40	734	6,618	3,130	0	24,001	402	1,916	14,444	7,239	0					
Dual Medicare Status^c																	
Full dual, all year	24,516	16,517	7,870	128	1	0	252,668	168,497	83,858	312	1	0					
Full dual, part year	39	17	21	1	0	0	437	194	234	9	0	0					
Non-dual, all year	69,702	2,123	11,833	28,650	27,096	0	251,142	20,469	113,503	60,376	56,794	0					
Managed Care Status																	
FFS all year	41,796	18,466	17,156	3,437	2,737	0	388,767	188,013	184,602	8,305	7,847	0					
FFS part year, with Rx claims	3,797	137	1,580	1,464	616	0	16,269	891	10,129	3,781	1,468	0					
FFS part year, no Rx claims	48,664	54	988	23,878	23,744	0	99,211	256	2,864	48,611	47,480	0					

Source: Data for this table are from the MAX 1999 file for Hawaii, released by CMS in 1/2004. 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}
 HAWAII, 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 Benes
All	36.6 %	10.9	\$481	\$44	\$4,065	11.8 %	\$18	94,257
Age								
5 and younger	5.8	0.6	26	44	2,089	1.3	2	11,831
6-14	6.3	0.8	56	73	1,341	4.1	2	12,045
15-20	7.8	0.8	46	57	1,680	2.8	1	7,795
21-44	23.4	6.2	400	64	2,758	14.5	6	28,591
45-64	61.0	23.7	1,102	47	5,900	18.7	34	13,768
65-74	85.2	25.1	903	36	4,326	20.9	38	8,882
75-84	86.8	25.6	881	34	8,078	10.9	46	7,390
85 and older	85.9	23.4	714	31	17,955	4.0	70	3,955
Unknown	0.0	0.0	0	0	0	0.0	0	0
Basis of Eligibility								
Aged	85.8	24.2	825	34	8,551	9.7	47	18,657
Disabled	82.7	29.0	1,505	52	7,637	19.7	40	19,724
Adults	5.6	0.2	7	30	1,443	0.5	0	28,779
Children	2.3	0.0	1	22	1,162	0.1	0	27,097
Unknown	0.0	0.0	0	0	0	0.0	0	0
Gender								
Female	38.7	12.1	478	40	4,323	11.1	21	50,703
Male	34.2	9.6	483	50	3,765	12.8	14	43,554
Unknown	0.0	0.0	0	0	0	0.0	0	0
Race								
White	39.3	14.2	700	49	4,250	16.5	18	17,763
African American	26.0	7.7	451	59	2,647	17.0	9	1,572
Other/unknown	36.2	10.2	429	42	4,051	10.6	18	74,922
Use of Nursing Facilities								
Entire year	91.6	35.2	1,175	33	47,501	2.5	152	2,384
Part year	95.3	37.5	1,400	37	30,851	4.5	112	1,656
None	34.1	9.8	445	45	2,426	18.4	12	90,217
Maintenance Assistance Status								
Cash	38.9	12.1	544	45	3,097	17.6	16	50,094
Medically needy	76.7	25.7	961	37	22,627	4.2	86	2,535
Poverty related	39.6	11.4	494	43	4,867	10.2	20	31,106
Other/unknown	7.6	0.6	23	39	1,834	1.3	1	10,522

Source: Data for this table are from the MAX 1999 file for Hawaii, released by CMS in 1/2004. 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}
 HAWAII, 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	2.0	\$90	11.8 %	63.4 %	13.7 %	6.6 %	11.2 %	4.5 %	0.7 %	\$760	94,257	504,247
Age												
5 and younger	0.3	11	1.3	94.2	4.3	0.8	0.6	0.1	0.0	883	11,831	27,987
6-14	0.3	22	4.1	93.7	4.6	1.0	0.6	0.2	0.0	520	12,045	31,092
15-20	0.3	17	2.8	92.2	5.5	1.2	0.9	0.1	0.0	626	7,795	20,901
21-44	1.5	98	14.5	76.6	10.4	3.9	6.3	2.3	0.5	676	28,591	116,686
45-64	3.2	149	18.7	39.0	16.8	9.9	20.2	11.7	2.4	800	13,768	101,593
65-74	2.4	87	20.9	14.8	31.0	17.1	27.1	8.9	1.2	417	8,882	92,155
75-84	2.5	85	10.9	13.2	30.0	17.1	29.2	9.7	0.9	777	7,390	76,808
85 and older	2.5	76	4.0	14.1	28.9	16.1	30.3	9.8	0.8	1,918	3,955	37,025
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Basis of Eligibility												
Aged	2.4	81	9.7	14.2	30.8	17.0	28.2	8.9	0.9	843	18,657	189,160
Disabled	2.9	150	19.7	17.3	28.4	13.4	25.5	12.6	2.7	762	19,724	197,595
Adults	0.1	3	0.5	94.4	3.5	1.1	0.8	0.1	0.0	684	28,779	60,697
Children	0.0	1	0.1	97.7	1.9	0.3	0.1	0.0	0.0	555	27,097	56,795
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Gender												
Female	2.2	87	11.1	61.3	13.8	6.9	12.2	5.0	0.8	788	50,703	278,285
Male	1.9	93	12.8	65.8	13.5	6.2	10.1	3.8	0.6	726	43,554	225,962
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	2.6	131	16.5	60.7	12.7	6.3	11.9	6.7	1.6	793	17,763	95,208
African American	1.8	106	17.0	74.0	9.5	4.1	7.8	3.8	0.8	620	1,572	6,713
Other/unknown	1.9	80	10.6	63.8	14.0	6.7	11.1	3.9	0.5	754	74,922	402,326
Use of Nursing Facilities												
Entire year	3.7	122	2.5	8.4	18.5	12.7	37.0	20.3	3.1	4,940	2,384	22,922
Part year	4.1	153	4.5	4.7	17.2	16.1	36.4	20.7	5.0	3,368	1,656	15,168
None	1.9	86	18.4	65.9	13.5	6.3	10.1	3.7	0.6	470	90,217	466,157
Maintenance Assistance Status												
Cash	2.1	95	17.6	61.1	14.6	7.0	11.8	4.6	0.8	540	50,094	287,266
Medically needy	3.3	122	4.2	23.3	17.9	13.2	28.6	14.1	2.8	2,885	2,535	19,885
Poverty related	2.0	89	10.2	60.4	15.0	7.1	12.1	4.8	0.7	875	31,106	173,095
Other/unknown	0.3	10	1.3	92.4	4.4	1.6	1.3	0.3	0.0	804	10,522	24,001

Source: Data for this table are from the MAX 1999 file for Hawaii, released by CMS in 1/2004. 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}
 HAWAII, 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	2.0	\$90	0.7	\$58	0.3	\$13	1.0	\$17
Age								
5 and younger	0.3	11	0.0	6	0.0	1	0.2	4
6-14	0.3	22	0.1	16	0.0	1	0.2	4
15-20	0.3	17	0.1	11	0.0	2	0.2	4
21-44	1.5	98	0.5	70	0.2	12	0.8	15
45-64	3.2	149	1.1	96	0.4	21	1.7	29
65-74	2.4	87	0.9	55	0.3	13	1.1	16
75-84	2.5	85	0.9	51	0.4	14	1.1	17
85 and older	2.5	76	0.7	40	0.4	16	1.2	18
Unknown	0.0	0	0.0	0	0.0	0	0.0	0
Basis of Eligibility								
Aged	2.4	81	0.9	49	0.3	14	1.1	16
Disabled	2.9	150	1.0	101	0.3	20	1.5	27
Adults	0.1	3	0.0	2	0.0	1	0.1	1
Children	0.0	1	0.0	0	0.0	0	0.0	0
Unknown	0.0	0	0.0	0	0.0	0	0.0	0
Gender								
Female	2.2	87	0.8	55	0.3	13	1.1	17
Male	1.9	93	0.6	62	0.2	13	0.9	16
Unknown	0.0	0	0.0	0	0.0	0	0.0	0
Race								
White	2.6	131	0.9	86	0.3	19	1.4	24
African American	1.8	106	0.6	74	0.2	14	1.0	16
Other/unknown	1.9	80	0.7	51	0.3	12	0.9	15
Use of Nursing Facilities								
Entire year	3.7	122	1.0	59	0.6	24	1.9	35
Part year	4.1	153	1.2	86	0.6	28	2.1	35
None	1.9	86	0.7	57	0.2	12	0.9	15
Maintenance Assistance								
Status								
Cash	2.1	95	0.7	62	0.3	13	1.0	18
Medically needy	3.3	122	1.0	68	0.5	24	1.6	27
Poverty related	2.0	89	0.7	57	0.3	13	1.0	16
Other/unknown	0.3	10	0.1	7	0.0	1	0.1	2

Source: Data for this table are from the MAX 1999 file for Hawaii, released by CMS in 1/2004. 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 Hawaii, 6.3 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).

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}
 HAWAII, 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						
	Total	Patented	Off-Patent	Generic	Total	Patented						Off-Patent					
		Brand-Name	Brand-Name	Brand-Name	Brand-Name	Brand-Name						Brand-Name					
Anti-infective Agents	0.3	0.1	0.0	0.2	\$21	\$19	\$0	\$2	\$68	\$131	\$47	\$14	67,968	\$4,602,508	20,324	21.6%	216,140
Biologics	0.1	0.0	0.0	0.1	20	15	0	5	175	387	69	66	557	97,396	474	0.5	4,809
Antineoplastic Agents	0.5	0.1	0.1	0.2	64	33	23	9	139	249	159	47	5,068	703,797	1,102	1.2	10,951
Endocrine/Metabolic Drugs	0.8	0.4	0.1	0.3	29	23	2	4	38	57	19	15	105,625	4,035,426	12,961	13.8	137,852
Cardiovascular Agents	1.2	0.5	0.3	0.4	43	26	12	6	35	51	38	14	234,990	8,293,388	18,105	19.2	192,126
Respiratory Agents	0.6	0.2	0.0	0.3	15	10	0	4	26	50	27	13	90,169	2,373,668	14,862	15.8	160,704
Gastrointestinal Agents	0.4	0.1	0.0	0.3	16	9	1	6	36	103	68	17	50,188	1,799,068	10,368	11.0	112,620
Genitourinary Agents	0.4	0.2	0.0	0.2	12	8	0	3	33	53	32	17	12,785	419,086	3,304	3.5	35,423
CNS Drugs	1.0	0.4	0.1	0.5	73	50	11	12	73	140	103	22	147,086	10,699,967	13,863	14.7	146,063
Stimulants/Anti-obesity/Anorexia	0.6	0.1	0.1	0.4	26	4	7	14	45	68	59	37	1,436	65,181	246	0.3	2,531
Miscellaneous Psychological/Neurological Agents	0.5	0.4	0.0	0.1	50	47	0	3	104	120	32	34	2,874	299,426	567	0.6	6,016
Analgesics and Anesthetics	0.6	0.1	0.0	0.5	20	12	2	6	33	103	85	13	102,569	3,386,734	16,338	17.3	171,645
Neuromuscular Agents	0.9	0.3	0.2	0.4	40	23	8	9	47	87	44	21	69,960	3,281,210	7,671	8.1	81,489
Nutritional Products	0.4	0.0	0.2	0.2	11	2	5	5	25	73	26	19	17,987	448,066	3,989	4.2	40,512
Hematological Agents	0.6	0.2	0.2	0.2	43	31	7	5	71	189	38	19	21,197	1,511,170	3,381	3.6	35,475
Topical Products	0.4	0.1	0.0	0.2	10	6	1	3	27	43	36	16	62,962	1,681,156	15,639	16.6	170,545
Miscellaneous Products	0.3	0.0	0.0	0.2	29	10	8	10	100	226	247	49	4,933	494,558	1,670	1.8	17,179
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	11	0	0	0	33	0	0	0	33,235	1,110,330	9,698	10.3	104,984
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.	1,031,589	45,302,135	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 1999 file for Hawaii, released by CMS in 1/2004. 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 Hawaii, 6.3 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}
 HAWAII, 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	\$6,889,149	6,540	71,492	0.7	\$132	\$96	
ANTICONVULSANT	2,595,220	5,366	57,939	0.7	61	45	
ANTIDEPRESSANTS	2,583,963	8,131	85,519	0.5	55	30	
ANTIHYPERTENSIVE	2,550,316	11,055	119,400	0.6	37	21	
ANTHYPERLIPIDEMIC	2,468,767	5,854	65,138	0.6	67	38	
ANTIDIABETIC	2,372,001	8,197	88,157	0.6	44	27	
ANTIVIRAL	2,262,596	2,180	23,725	0.4	271	95	
ANALGESICS - Narcotic	1,893,871	13,407	140,675	0.4	34	13	
CALCIUM BLOCKERS	1,873,342	6,061	66,399	0.6	45	28	
ANTIASTHMATIC	1,735,914	11,511	124,204	0.4	34	14	

Source: Data for this table are from the MAX 1999 file for Hawaii, released by CMS in 1/2004. 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}
 HAWAII, 1999

Beneficiary Characteristics	All Top 10 Drug Groups					ANTIPSYCHOTICS					ANTICONVULSANT						
	No. of Rx	Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
All	458,323	\$27,225,139	6,540	6.9 %	71,492	0.7	\$96	5,366	5.7 %	57,939	0.7	\$45					
Female																	
Disabled																	
5 and younger	260,040	13,802,042	3,205	6.3	35,056	0.7	84	2,638	5.2	28,574	0.7	42					
6-14	141,392	8,708,251	2,337	24.8	26,104	0.8	100	2,058	21.8	22,787	0.7	46					
15-20	554	22,053	0	0.0	0	0.0	0	11	5.0	122	0.6	17					
21-44	1,343	77,491	12	4.3	130	0.5	85	51	18.1	579	0.8	42					
45-64	1,062	74,187	26	10.8	275	0.6	62	57	23.8	602	0.8	56					
65-74	38,362	2,847,214	977	31.0	10,824	0.8	108	873	27.7	9,624	0.8	53					
75-84	84,971	4,981,672	1,175	25.7	13,203	0.8	98	975	21.3	10,801	0.7	42					
Other Eligibles																	
5 and younger	13,637	644,094	134	16.3	1,537	0.7	72	87	10.6	1,012	0.7	32					
6-14	1,199	52,647	11	10.9	116	0.6	77	4	4.0	47	1.1	72					
15-20	264	8,893	2	5.9	19	0.6	12	0	0.0	0	0.0	0					
21-44	118,648	5,093,791	868	2.1	8,952	0.5	35	580	1.4	5,787	0.7	27					
45-64	33	562	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
65-74	35	1,399	3	0.1	3	1.0	113	1	0.0	2	0.5	42					
75-84	95	2,551	8	0.2	42	0.6	17	6	0.1	13	0.5	19					
Male																	
Disabled																	
5 and younger	198,283	13,423,097	3,335	7.7	36,436	0.8	109	2,728	6.3	29,365	0.8	47					
6-14	136,793	10,882,079	2,886	28.0	32,265	0.8	119	2,321	22.5	25,670	0.8	50					
15-20	1,217	45,125	1	0.3	12	0.5	36	40	13.8	450	0.6	34					
21-44	1,744	82,227	25	5.8	273	0.5	55	71	16.5	824	0.7	30					
45-64	1,531	105,368	40	12.2	412	0.6	93	68	20.7	749	0.9	54					
65-74	52,550	5,422,697	1,596	38.2	17,799	0.8	128	1,134	27.2	12,526	0.8	56					
75-84	71,608	4,824,270	1,142	25.4	12,810	0.8	110	942	20.9	10,404	0.7	45					
Other Eligibles																	
5 and younger	7,365	372,886	64	12.9	743	0.9	92	58	11.7	627	0.8	40					
6-14	699	23,823	13	18.1	156	0.7	16	7	9.7	84	0.6	15					
15-20	79	5,683	5	50.0	60	0.5	66	1	10.0	6	0.7	15					
21-44	61,490	2,541,018	449	1.4	4,171	0.5	33	407	1.2	3,695	0.7	28					
45-64	92	3,114	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
65-74	98	3,334	2	0.0	24	0.1	16	2	0.0	14	0.5	47					
75-84	122	5,081	11	0.4	56	0.3	25	3	0.1	17	0.2	9					
Unknown																	
5 and younger	844	39,308	60	0.6	216	0.4	63	49	0.5	137	0.5	28					
6-14	757	25,214	5	0.2	9	0.7	30	23	0.9	100	0.5	22					
15-20	27,289	1,197,009	122	4.3	1,327	0.6	41	142	5.0	1,517	0.7	32					
21-44	24,506	995,804	161	6.0	1,689	0.5	31	130	4.8	1,355	0.7	25					
45-64	7,782	272,154	88	7.6	850	0.4	17	58	5.0	555	0.7	25					
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					

Source: Data for this table are from the MAX 1999 file for Hawaii, released by CMS in 1/2004. 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}
 HAWAII, 1999

Beneficiary Characteristics	ANTIDEPRESSANTS					ANTIHYPERTENSIVE					ANTHYPERLIPIDEMIC				
	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean Rx	Mean Rx \$
All	8,131	8.6 %	85,519	0.5	\$30	11,055	11.7 %	119,400	0.6	\$21	5,854	6.2 %	65,138	0.6	\$38
Female	4,796	9.5	50,966	0.6	30	6,291	12.4	68,810	0.6	22	3,761	7.4	42,032	0.6	38
Disabled	3,159	33.5	34,231	0.6	34	2,112	22.4	23,330	0.6	22	1,380	14.6	15,351	0.6	40
5 and younger	0	0.0	0	0.0	0	7	3.2	59	0.4	9	1	0.5	7	0.1	3
6-14	11	3.9	132	0.5	30	13	4.6	144	0.6	20	1	0.4	12	0.2	7
15-20	28	11.7	275	0.5	32	3	1.3	23	0.4	9	1	0.4	12	0.1	5
21-44	1,063	33.8	11,372	0.5	32	293	9.3	3,245	0.5	19	180	5.7	2,026	0.5	33
45-64	1,873	40.9	20,327	0.6	36	1,450	31.7	15,901	0.6	22	970	21.2	10,690	0.6	41
65-74	167	20.4	1,932	0.6	27	309	37.7	3,533	0.6	24	210	25.6	2,427	0.6	41
75-84	12	11.9	137	0.6	25	25	24.8	287	0.6	21	15	14.9	153	0.7	41
85 and older	5	14.7	56	0.5	14	12	35.3	138	0.6	22	2	5.9	24	0.5	43
Other Eligibles	1,637	4.0	16,735	0.5	22	4,179	10.1	45,480	0.6	21	2,381	5.8	26,681	0.6	37
5 and younger	0	0.0	0	0.0	0	1	0.0	1	1.0	5	0	0.0	0	0.0	0
6-14	4	0.1	6	0.7	34	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	11	0.3	46	0.5	17	1	0.0	8	0.1	5	0	0.0	0	0.0	0
21-44	70	0.6	203	0.5	24	19	0.2	59	0.5	15	4	0.0	7	0.6	51
45-64	44	2.0	154	0.6	29	41	1.8	159	0.5	17	26	1.2	115	0.6	39
65-74	511	10.8	5,681	0.5	22	1,664	35.2	18,432	0.6	21	1,252	26.5	14,006	0.6	37
75-84	621	13.7	6,769	0.5	21	1,690	37.4	18,804	0.6	21	922	20.4	10,544	0.6	38
85 and older	376	13.7	3,876	0.6	24	763	27.7	8,017	0.7	22	177	6.4	2,009	0.6	35
Male	3,335	7.7	34,553	0.5	31	4,764	10.9	50,590	0.6	21	2,093	4.8	23,106	0.6	37
Disabled	2,602	25.3	27,904	0.6	33	2,155	20.9	23,083	0.6	22	1,066	10.3	11,800	0.6	38
5 and younger	0	0.0	0	0.0	0	18	6.2	193	0.6	14	0	0.0	0	0.0	0
6-14	32	7.4	360	0.5	23	31	7.2	357	0.6	18	0	0.0	0	0.0	0
15-20	23	7.0	254	0.4	33	28	8.5	288	0.6	21	3	0.9	32	0.1	15
21-44	1,133	27.1	12,105	0.6	33	476	11.4	4,972	0.5	20	254	6.1	2,773	0.5	32
45-64	1,340	29.8	14,322	0.6	34	1,378	30.6	14,726	0.6	22	690	15.3	7,621	0.6	39
65-74	66	13.3	767	0.5	32	201	40.5	2,284	0.7	24	106	21.4	1,231	0.6	43
75-84	4	5.6	48	0.5	23	20	27.8	239	0.5	18	12	16.7	131	0.5	26
85 and older	4	40.0	48	0.4	19	3	30.0	24	0.3	10	1	10.0	12	0.1	3
Other Eligibles	733	2.2	6,649	0.5	22	2,609	7.8	27,507	0.5	21	1,027	3.1	11,306	0.6	36
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	5	0.1	21	0.3	13	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	11	0.4	63	0.5	36	1	0.0	8	0.5	28	0	0.0	0	0.0	0
21-44	88	0.9	326	0.5	33	30	0.3	111	0.6	20	12	0.1	49	0.4	26
45-64	49	2.0	202	0.4	15	51	2.1	193	0.6	17	14	0.6	70	0.6	33
65-74	224	7.9	2,436	0.5	20	1,100	38.8	12,061	0.5	21	557	19.7	6,234	0.6	37
75-84	231	8.6	2,442	0.5	22	1,057	39.2	11,396	0.5	20	409	15.2	4,582	0.6	35
85 and older	125	10.8	1,159	0.6	22	370	32.0	3,738	0.6	22	35	3.0	371	0.6	41
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 Hawaii, released by CMS in 1/2004. 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}
 HAWAII, 1999

Beneficiary Characteristics	ANTIDIABETIC				ANTIVIRAL				ANALGESICS - Narcotic						
	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	8,197	8.7 %	88,157	0.6	\$27	2,180	2.3 %	23,725	0.4	\$95	13,407	14.2 %	140,675	0.4	\$14
Female	5,148	10.2	55,978	0.6	28	952	1.9	10,524	0.2	35	7,633	15.1	81,652	0.4	12
Disabled	2,233	23.7	24,537	0.6	31	501	5.3	5,545	0.3	61	4,373	46.4	47,780	0.4	15
5 and younger	0	0.0	0	0.0	0	11	5.0	132	0.3	40	9	4.1	106	0.1	1
6-14	5	1.8	51	0.8	24	12	4.3	144	0.5	92	16	5.7	186	0.2	2
15-20	2	0.8	24	0.6	19	11	4.6	124	0.2	59	28	11.7	284	0.1	2
21-44	341	10.8	3,746	0.6	30	200	6.4	2,105	0.4	92	1,362	43.3	14,558	0.5	15
45-64	1,565	34.2	17,116	0.6	31	237	5.2	2,684	0.2	43	2,542	55.5	27,870	0.5	17
65-74	300	36.6	3,368	0.7	30	27	3.3	320	0.1	8	381	46.5	4,383	0.3	9
75-84	20	19.8	232	0.6	29	2	2.0	24	0.1	6	28	27.7	309	0.3	5
85 and older	0	0.0	0	0.0	0	1	2.9	12	0.1	8	7	20.6	84	0.1	1
Other Eligibles	2,915	7.1	31,441	0.6	25	451	1.1	4,979	0.1	6	3,260	7.9	33,872	0.3	8
5 and younger	0	0.0	0	0.0	0	2	0.0	4	0.5	11	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	2	0.0	5	0.4	12	3	0.1	8	0.4	3
15-20	1	0.0	1	1.0	46	3	0.1	25	0.2	6	16	0.4	41	0.4	3
21-44	25	0.2	78	0.6	34	3	0.0	8	0.4	21	164	1.4	498	0.5	7
45-64	50	2.3	245	0.6	22	7	0.3	26	0.3	22	72	3.2	269	0.4	8
65-74	1,426	30.1	15,591	0.6	27	158	3.3	1,838	0.1	8	1,189	25.1	13,319	0.3	8
75-84	1,085	24.0	12,071	0.6	23	168	3.7	1,885	0.1	5	1,204	26.6	13,427	0.3	6
85 and older	328	11.9	3,455	0.7	22	108	3.9	1,188	0.1	4	612	22.2	6,310	0.3	12
Male	3,049	7.0	32,179	0.6	26	1,228	2.8	13,201	0.5	144	5,774	13.3	59,023	0.4	15
Disabled	1,656	16.1	17,914	0.6	29	1,038	10.1	11,265	0.5	167	3,944	38.3	42,280	0.5	19
5 and younger	0	0.0	0	0.0	0	6	2.1	68	0.2	16	15	5.2	173	0.2	1
6-14	3	0.7	36	0.6	29	11	2.6	121	0.2	41	30	7.0	344	0.1	1
15-20	7	2.1	58	0.5	37	4	1.2	48	0.1	5	48	14.6	501	0.2	2
21-44	358	8.6	3,868	0.6	29	657	15.7	7,049	0.5	179	1,422	34.1	15,292	0.5	21
45-64	1,126	25.0	12,127	0.6	29	343	7.6	3,802	0.5	158	2,243	49.8	23,905	0.5	19
65-74	151	30.4	1,699	0.6	27	14	2.8	150	0.3	79	174	35.1	1,930	0.4	10
75-84	10	13.9	120	0.5	18	3	4.2	27	0.1	2	11	15.3	123	0.2	3
85 and older	1	10.0	6	0.8	9	0	0.0	0	0.0	0	1	10.0	12	0.2	1
Other Eligibles	1,393	4.2	14,265	0.6	23	190	0.6	1,936	0.1	7	1,830	5.5	16,743	0.3	7
5 and younger	2	0.0	14	1.4	129	1	0.0	2	0.5	16	3	0.1	12	0.3	2
6-14	3	0.1	9	0.8	34	0	0.0	0	0.0	0	4	0.1	16	0.3	2
15-20	2	0.1	3	1.7	52	0	0.0	0	0.0	0	27	0.9	93	0.5	6
21-44	22	0.2	63	0.6	29	11	0.1	29	0.4	21	211	2.2	560	0.6	7
45-64	54	2.2	238	0.5	20	4	0.2	16	0.3	75	115	4.7	332	0.6	14
65-74	647	22.8	7,042	0.6	25	63	2.2	693	0.2	11	668	23.6	7,352	0.3	7
75-84	484	18.0	5,171	0.6	21	71	2.6	786	0.1	3	600	22.3	6,431	0.2	6
85 and older	179	15.5	1,725	0.6	17	40	3.5	410	0.1	3	202	17.5	1,947	0.3	6
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 7C

Source: Data for this table are from the MAX 1999 file for Hawaii, released by CMS in 1/2004. 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}
 HAWAII, 1999

Beneficiary Characteristics	CALCIUM BLOCKERS					ANTI-ASTHMATIC						
	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
	6,061	6.4 %	66,399	0.6	\$28	11,511	12.2 %	124,204	0.4	\$14	94,257	504,247
Female												
Disabled												
5 and younger	1,114	11.8	12,303	0.6	30	3,673	39.0	40,633	0.4	14	9,421	94,260
6-14	0	0.0	0	0.0	0	119	54.1	1,262	0.3	11	220	1,931
15-20	1	0.4	12	1.0	118	113	40.2	1,263	0.4	15	281	2,979
21-44	1	0.4	12	0.6	45	48	20.0	538	0.4	11	240	2,155
45-64	143	4.5	1,570	0.6	33	857	27.2	9,316	0.3	11	3,148	30,180
65-74	745	16.3	8,163	0.6	31	2,159	47.2	23,887	0.4	15	4,577	46,537
75-84	195	23.8	2,230	0.7	28	316	38.5	3,690	0.4	15	820	9,075
85 and older	21	20.8	229	0.7	30	50	49.5	556	0.5	17	101	1,061
Other Eligibles												
5 and younger	8	23.5	87	0.5	20	11	32.4	121	0.6	15	34	342
6-14	2,749	6.7	30,184	0.6	28	2,700	6.5	28,588	0.4	13	41,282	184,025
15-20	0	0.0	0	0.0	0	27	0.5	71	0.4	7	5,501	11,311
21-44	0	0.0	0	0.0	0	18	0.3	88	0.3	8	5,525	11,420
45-64	7	0.1	22	0.5	10	16	0.4	70	0.3	6	4,328	9,037
65-74	17	0.8	76	0.7	31	37	1.7	136	0.4	9	2,218	4,783
75-84	1,084	22.9	12,038	0.6	27	1,157	24.4	12,938	0.3	12	4,733	49,176
85 and older	1,161	25.7	12,946	0.6	28	1,039	23.0	11,540	0.4	14	4,522	47,763
Male												
Disabled												
5 and younger	480	17.4	5,102	0.7	28	340	12.3	3,526	0.4	13	2,754	26,483
6-14	2,198	5.0	23,912	0.6	28	5,138	11.8	54,983	0.4	15	43,554	225,962
15-20	935	9.1	10,160	0.6	30	2,741	26.6	30,252	0.4	14	10,303	103,335
21-44	2	0.7	24	0.3	14	189	65.4	1,975	0.4	13	289	2,722
45-64	2	0.5	24	0.4	107	152	35.3	1,745	0.3	11	430	4,507
65-74	5	1.5	51	0.8	77	51	15.5	563	0.3	9	328	3,235
75-84	190	4.6	1,996	0.6	34	700	16.8	7,699	0.4	12	4,175	41,835
85 and older	617	13.7	6,726	0.6	29	1,404	31.2	15,465	0.5	16	4,503	44,788
Other Eligibles												
5 and younger	97	19.6	1,105	0.6	27	222	44.8	2,545	0.5	17	496	5,356
6-14	20	27.8	210	0.5	24	23	31.9	260	0.5	14	72	778
15-20	2	20.0	24	0.3	16	0	0.0	0	0.0	0	10	114
21-44	1,263	3.8	13,752	0.6	26	2,397	7.2	24,731	0.4	15	33,251	122,627
45-64	0	0.0	0	0.0	0	53	0.9	161	0.4	8	5,821	12,023
65-74	1	0.0	12	1.0	15	24	0.4	105	0.6	14	5,809	12,186
75-84	1	0.0	8	0.6	29	8	0.3	47	0.2	3	2,899	6,474
85 and older	7	0.1	20	0.6	23	32	0.3	89	0.5	11	9,567	20,619
Unknown												
5 and younger	14	0.6	44	0.5	25	47	1.9	209	0.5	13	2,470	5,485
6-14	543	19.2	6,073	0.6	27	959	33.9	10,343	0.4	16	2,833	28,548
15-20	532	19.7	5,839	0.6	25	1,005	37.3	11,082	0.4	15	2,695	27,206
21-44	165	14.3	1,756	0.6	26	269	23.2	2,695	0.4	12	1,157	10,086
45-64	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	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 Hawaii, released by CMS in 1/2004. 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}
 HAWAII, 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	\$122	3.7	2,384	22,922
Age				
0-64	170	4.1	303	3,376
65-74	162	4.4	259	2,545
75-84	126	3.8	696	6,630
85 and older	95	3.3	1,126	10,371
Unknown	0	0.0	0	0
Gender				
Female	118	3.7	1,563	15,242
Male	130	3.7	821	7,680
Unknown	0	0.0	0	0
Race				
White	137	4.1	407	3,812
African American	104	3.8	8	82
Other/unknown	119	3.6	1,969	19,028
Basis of Eligibility				
Aged	113	3.6	2,033	19,030
Disabled	168	4.1	350	3,891
Adults	102	5.0	1	1
Children	0	0.0	0	0
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 1999 file for Hawaii, released by CMS in 1/2004. 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 1,656 beneficiaries who were in nursing facilities for part of their enrollment and their 15,168 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}
 HAWAII, 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	Total	Patented Brand-Name	Off-Patent Brand-Name	No.	As % of All-Year NF Residents	No. of Bene Mos		
Anti-infective Agents	0.3	0.2	0.0	0.1	\$16	\$13	\$1	\$2	\$48	\$77	\$33	\$17	4,493	\$217,549	1,324	55.5 %	13,481
Biologicals	0.1	0.0	0.0	0.1	2	0	0	1	15	8	0	17	236	3,450	212	8.9	2,171
Antineoplastic Agents	0.6	0.0	0.2	0.4	49	11	24	14	85	219	138	41	692	58,836	130	5.5	1,205
Endocrine/Metabolic Drugs	1.0	0.4	0.2	0.4	28	20	3	6	27	45	12	14	8,243	222,917	801	33.6	7,858
Cardiovascular Agents	1.6	0.4	0.5	0.7	38	15	15	8	25	41	31	11	18,004	442,304	1,200	50.3	11,543
Respiratory Agents	0.6	0.2	0.0	0.4	16	10	0	6	27	49	25	16	3,201	87,603	560	23.5	5,637
Gastrointestinal Agents	0.7	0.1	0.0	0.6	27	10	1	16	37	78	56	27	5,091	186,870	692	29.0	6,985
Genitourinary Agents	0.6	0.1	0.0	0.5	12	4	0	7	20	56	32	15	3,064	62,469	528	22.1	5,342
CNS Drugs	1.0	0.4	0.1	0.6	46	30	8	7	44	83	72	13	9,719	425,187	932	39.1	9,315
Stimulants/Anti-obesity/Anorexia	0.4	0.0	0.0	0.4	5	0	0	5	14	0	0	14	16	222	4	0.2	42
Miscellaneous Psychological/Neurological Agents	0.8	0.7	0.0	0.1	81	79	0	3	106	111	0	50	517	55,007	71	3.0	677
Analgesics and Anesthetics	0.6	0.2	0.0	0.4	21	12	5	4	36	78	135	10	3,902	140,398	669	28.1	6,562
Neuromuscular Agents	1.0	0.3	0.4	0.3	43	16	17	9	44	63	47	26	7,138	312,713	709	29.7	7,336
Nutritional Products	0.7	0.0	0.2	0.5	20	1	4	15	28	50	23	30	2,974	83,952	450	18.9	4,293
Hematological Agents	0.9	0.2	0.4	0.4	32	18	11	4	36	100	30	10	2,919	104,919	321	13.5	3,244
Topical Products	0.6	0.2	0.1	0.4	13	6	2	5	23	37	36	15	8,524	197,154	1,455	61.0	14,821
Miscellaneous Products	0.3	0.0	0.0	0.3	15	0	0	15	57	63	63	57	1,953	110,561	707	29.7	7,368
Unknown Therapeutic Category	0.4	0.0	0.0	0.0	11	0	0	0	26	0	0	0	3,331	88,054	794	33.3	7,927
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.	84,017	2,800,165	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 1999 file for Hawaii, released by CMS in 1/2004. 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 1,656 beneficiaries who were in nursing facilities for part of their enrollment and their 15,168 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 Hawaii, 6.3 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

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}
 HAWAII, 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
ANTICONVULSANT	\$189,730	386	16.2 %	4,170	1.0	\$44	\$45
ANTIHYPERTENSIVE	175,645	605	25.4	6,107	0.9	33	29
ANTIDEPRESSANTS	173,548	501	21.0	5,073	0.8	44	34
DERMATOLOGICAL	164,186	2,458	103.1	26,207	0.3	21	6
ANTIPSYCHOTICS	164,523	359	15.1	3,813	0.6	69	43
ULCER DRUGS	125,480	473	19.8	4,854	0.7	38	26
ANTIDIABETIC	118,036	479	20.1	4,995	0.9	27	24
ANTIPARKINSONIAN	112,638	455	19.1	4,847	0.5	47	23
ASSORTED CLASSES	102,347	65	2.7	643	1.6	98	159
ANALGESICS - Narcotic	101,761	473	19.8	4,663	0.5	47	22

Source: Data for this table are from the MAX 1999 file for Hawaii, released by CMS in 1/2004. 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 1,656 beneficiaries who were in nursing facilities for part of their enrollment and their 15,168 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} HAWAII, 1999

Beneficiary Characteristics	All Top 10 Drug Groups				ANTICONVULSANT				ANTIHYPERTENSIVE			
	No. of Rx	Rx \$	No. of Users	Residents	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Residents	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
All	37,142	\$1,427,894	386	16.2 %	4,170	1.0	\$46	605	25.4 %	6,107	0.9	\$29
Female	23,785	879,896	213	13.6	2,286	1.0	42	401	25.7	4,132	0.9	29
Disabled	3,420	177,195	66	43.4	777	1.1	56	26	17.1	300	1.0	34
64 or younger	2,829	146,500	60	49.6	717	1.1	55	15	12.4	174	1.0	34
65-74	458	23,502	6	26.1	60	0.9	45	8	34.8	90	1.0	32
75-84	77	6,060	0	0.0	0	0.0	0	1	20.0	12	1.0	31
85 and older	56	1,133	0	0.0	0	0.0	0	2	66.7	24	1.1	38
Other Eligibles	20,365	702,701	147	10.4	1,509	1.0	34	375	26.6	3,832	0.9	28
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	2,837	123,066	37	28.9	382	1.1	47	47	36.7	486	0.9	36
75-84	7,944	284,267	62	13.6	618	1.0	33	134	29.5	1,396	0.9	28
85 and older	9,584	295,368	48	5.8	509	0.8	26	194	23.4	1,950	0.9	27
Male	13,357	547,998	173	21.1	1,884	1.0	50	204	24.8	1,975	0.9	29
Disabled	4,288	223,452	88	44.4	1,017	1.1	62	40	20.2	433	0.8	30
64 or younger	3,961	208,610	83	45.9	957	1.1	62	32	17.7	338	0.8	31
65-74	304	14,223	5	33.3	60	1.0	51	7	46.7	83	0.6	26
75-84	23	619	0	0.0	0	0.0	0	1	50.0	12	1.2	34
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	9,069	324,546	85	13.6	867	1.0	37	164	26.3	1,542	0.9	29
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	1,964	79,017	29	31.2	298	1.0	41	35	37.6	352	0.8	25
75-84	3,631	131,976	31	13.2	328	1.1	35	56	23.9	534	0.9	30
85 and older	3,474	113,553	25	8.5	241	0.9	34	73	24.7	656	0.9	29
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 Hawaii, released by CMS in 1/2004. 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 1,656 beneficiaries who were in nursing facilities for part of their enrollment and their 15,168 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}
 HAWAII, 1999

Beneficiary Characteristics	ANTIDEPRESSANTS						DERMATOLOGICAL						ANTI-PSYCHOTICS					
	Users as %			Users as %			Users as %			Users as %			Users as %			Users as %		
	No. of Users	No. of Bene Mos among Residents	Mean No. of Rx	No. of Users	No. of Bene Mos among Residents	Mean No. of Rx	No. of Users	No. of Bene Mos among Residents	Mean No. of Rx	No. of Users	No. of Bene Mos among Residents	Mean No. of Rx	No. of Users	No. of Bene Mos among Residents	Mean No. of Rx	No. of Users	No. of Bene Mos among Residents	Mean No. of Rx
All	501	21.0 %	0.8	5,073	0.8	\$34	2,458	103.1 %	0.3	\$6	359	15.1 %	0.6	\$43	3,813	0.6	\$43	
Female	333	21.3	0.8	3,431	0.8	33	1,542	98.7	0.3	6	215	13.8	0.6	41	2,233	0.6	41	
Disabled	40	26.3	0.7	446	0.7	37	188	123.7	0.3	5	42	27.6	0.7	73	458	0.7	73	
64 or younger	34	28.1	0.7	386	0.7	34	156	128.9	0.3	5	30	24.8	0.7	66	353	0.7	66	
65-74	5	21.7	1.1	48	1.1	66	26	113.0	0.3	5	10	43.5	0.6	100	93	0.6	100	
75-84	1	20.0	0.4	12	0.4	21	2	40.0	0.3	5	2	40.0	0.8	68	12	0.8	68	
85 and older	0	0.0	0.0	0	0.0	0	4	133.3	0.3	2	0	0.0	0.0	0	0	0.0	0	
Other Eligibles	293	20.8	0.8	2,985	0.8	33	1,354	96.0	0.3	6	173	12.3	0.6	33	1,775	0.6	33	
64 or younger	0	0.0	0.0	0	0.0	0	0	0.0	0.0	0	0	0.0	0.0	0	0	0.0	0	
65-74	29	22.7	0.7	309	0.7	30	115	89.8	0.3	5	23	18.0	0.8	38	251	0.8	38	
75-84	123	27.0	0.8	1,239	0.8	36	442	97.1	0.3	6	72	15.8	0.6	43	724	0.6	43	
85 and older	141	17.0	0.8	1,437	0.8	30	797	96.3	0.3	7	78	9.4	0.5	21	800	0.5	21	
Male	168	20.5	0.8	1,642	0.8	36	916	111.6	0.3	6	144	17.5	0.7	46	1,580	0.7	46	
Disabled	45	22.7	0.7	452	0.7	41	276	139.4	0.3	7	52	26.3	0.9	71	617	0.9	71	
64 or younger	42	23.2	0.8	416	0.8	44	258	142.5	0.3	7	47	26.0	0.8	70	557	0.8	70	
65-74	3	20.0	0.5	36	0.5	7	14	93.3	0.3	9	5	33.3	0.9	80	60	0.9	80	
75-84	0	0.0	0.0	0	0.0	0	4	200.0	0.2	4	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	0	0.0	0	
Other Eligibles	123	19.7	0.8	1,190	0.8	35	640	102.7	0.3	6	92	14.8	0.5	30	963	0.5	30	
64 or younger	0	0.0	0.0	0	0.0	0	0	0.0	0.0	0	0	0.0	0.0	0	0	0.0	0	
65-74	30	32.3	0.9	305	0.9	43	103	110.8	0.3	6	21	22.6	0.6	66	230	0.6	66	
75-84	43	18.4	0.8	424	0.8	40	261	111.5	0.3	5	34	14.5	0.7	19	350	0.7	19	
85 and older	50	16.9	0.7	461	0.7	24	276	93.6	0.3	7	37	12.5	0.4	19	383	0.4	19	
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	0	

Source: Data for this table are from the MAX 1999 file for Hawaii, released by CMS in 1/2004. 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 1,656 beneficiaries who were in nursing facilities for part of their enrollment and their 15,168 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}
 HAWAII, 1999

Beneficiary Characteristics	ULCER DRUGS						ANTIIDIABETIC						ANTIPARKINSONIAN					
	Users as %			Users as %			Users as %			Users as %			Users as %			Users as %		
	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Mean No. of Rx	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Mean No. of Rx	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Mean No. of Rx	No. of Bene Mos among Users	Mean No. of Rx
All	473	19.8 %	0.7	\$26	479	20.1 %	4,995	0.9	\$24	455	19.1 %	4,847	0.5	\$23				
Female	306	19.6	0.7	24	309	19.8	3,342	0.9	25	290	18.6	3,066	0.5	22				
Disabled	24	15.8	0.7	31	29	19.1	330	0.9	27	23	15.1	266	0.5	45				
64 or younger	18	14.9	0.6	30	20	16.5	231	0.9	27	19	15.7	218	0.5	44				
65-74	3	13.0	0.5	46	9	39.1	99	1.0	28	3	13.0	36	0.1	0				
75-84	2	40.0	1.0	39	0	0.0	0	0.0	0	1	20.0	12	1.2	186				
85 and older	1	33.3	1.1	7	0	0.0	0	0.0	0	0	0.0	0	0.0	0				
Other Eligibles	282	20.0	0.7	24	280	19.8	3,012	0.9	25	267	18.9	2,800	0.5	19				
64 or younger	0	0.0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0				
65-74	31	24.2	0.7	21	56	43.8	572	0.9	31	39	30.5	417	0.5	19				
75-84	106	23.3	0.6	25	116	25.5	1,238	0.9	24	103	22.6	1,044	0.6	31				
85 and older	145	17.5	0.7	23	108	13.0	1,202	0.8	24	125	15.1	1,339	0.3	10				
Male	167	20.3	0.7	29	170	20.7	1,653	0.8	20	165	20.1	1,781	0.5	26				
Disabled	34	17.2	0.6	31	27	13.6	315	0.7	20	35	17.7	405	0.4	10				
64 or younger	30	16.6	0.6	32	22	12.2	255	0.7	18	34	18.8	393	0.4	10				
65-74	4	26.7	0.4	21	5	33.3	60	0.8	25	1	6.7	12	0.9	5				
75-84	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				
Other Eligibles	133	21.3	0.8	28	143	23.0	1,338	0.9	20	130	20.9	1,376	0.6	31				
64 or younger	0	0.0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0				
65-74	20	21.5	0.8	38	35	37.6	331	0.8	19	23	24.7	262	0.6	31				
75-84	52	22.2	0.8	26	56	23.9	548	0.9	22	56	23.9	597	0.5	29				
85 and older	61	20.7	0.7	28	52	17.6	459	0.9	19	51	17.3	517	0.6	33				
Unknown	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 Hawaii, released by CMS in 1/2004. 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 1,656 beneficiaries who were in nursing facilities for part of their enrollment and their 15,168 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}
 HAWAII, 1999

Beneficiary Characteristics	ASSORTED CLASSES					ANALGESICS - Narcotic					Bene Mos among All-Year NF Residents	
	Users as %		No. of Bene		Mean Rx	Users as %		No. of Bene		Mean Rx \$		
	No. of Users	Residents	NF	Users		NF	Users	Residents	Rx \$			
All	65	2.7 %	643	1.6	\$159	473	19.8 %	4,663	0.5	\$22	2,384	22,922
Female	39	2.5	378	1.5	136	337	21.6	3,422	0.5	23	1,563	15,242
Disabled	10	6.6	112	2.7	299	30	19.7	354	0.3	4	152	1,722
64 or younger	9	7.4	100	3.0	335	26	21.5	312	0.3	4	121	1,395
65-74	0	0.0	0	0.0	0	3	13.0	30	0.5	4	23	243
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	5	48
85 and older	1	33.3	12	0.1	0	1	33.3	12	0.1	1	3	36
Other Eligibles	29	2.1	266	1.0	67	307	21.8	3,068	0.5	25	1,411	13,520
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	6	4.7	70	0.9	58	24	18.8	224	0.7	115	128	1,255
75-84	15	3.3	138	1.1	85	106	23.3	1,053	0.5	16	455	4,381
85 and older	8	1.0	58	0.8	36	177	21.4	1,791	0.4	20	828	7,884
Male	26	3.2	265	1.8	192	136	16.6	1,241	0.4	19	821	7,680
Disabled	13	6.6	148	2.4	271	28	14.1	283	0.3	6	198	2,169
64 or younger	13	7.2	148	2.4	271	27	14.9	271	0.4	6	181	1,980
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	15	165
75-84	0	0.0	0	0.0	0	1	50.0	12	0.1	2	2	24
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Other Eligibles	13	2.1	117	1.1	94	108	17.3	958	0.5	22	623	5,511
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	1
65-74	1	1.1	8	1.0	32	12	12.9	93	0.4	3	93	882
75-84	4	1.7	42	1.9	218	43	18.4	403	0.4	38	234	2,177
85 and older	8	2.7	67	0.6	23	53	18.0	462	0.5	13	295	2,451
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 Hawaii, released by CMS in 1/2004. 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 1,656 beneficiaries who were in nursing facilities for part of their enrollment and their 15,168 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}
HAWAII, 1999

Beneficiary Characteristics	No. of Benes					No. of Bene Mos						
	All	Aged	Disabled	Adults	Children	Unknown	All	Aged	Disabled	Adults	Children	Unknown
All	199,111	18,657	21,645	70,116	88,693	0	1,968,570	190,199	231,388	653,907	893,076	0
Age												
5 and younger	35,983	0	509	0	35,474	0	345,975	0	5,182	0	340,793	0
6-14	40,322	0	712	0	39,610	0	424,926	0	7,923	0	417,003	0
15-20	19,514	0	623	5,293	13,598	0	187,587	0	6,443	45,940	135,204	0
21-44	60,235	0	8,484	51,740	11	0	572,267	0	90,450	481,741	76	0
45-64	22,779	0	9,771	13,008	0	0	230,195	0	104,518	125,677	0	0
65-74	8,933	7,529	1,329	75	0	0	93,786	78,660	14,577	549	0	0
75-84	7,390	7,217	173	0	0	0	76,809	74,970	1,839	0	0	0
85 and older	3,955	3,911	44	0	0	0	37,025	36,569	456	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	108,360	11,983	10,644	42,157	43,576	0	1,086,374	124,065	114,353	408,826	439,130	0
Male	90,751	6,674	11,001	27,959	45,117	0	882,196	66,134	117,035	245,081	453,946	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	34,922	2,161	6,071	15,415	11,275	0	335,818	21,047	63,791	139,937	111,043	0
African American	2,856	70	398	1,259	1,129	0	25,873	722	3,950	10,680	10,521	0
Other/unknown	161,333	16,426	15,176	53,442	76,289	0	1,606,879	168,430	163,647	503,290	771,512	0
Use of Nursing Facilities												
All year	2,384	2,033	350	1	0	0	22,922	19,030	3,891	1	0	0
Part year	1,658	1,227	395	34	2	0	15,506	11,111	4,129	252	14	0
None	195,069	15,397	20,900	70,081	88,691	0	1,930,142	160,058	223,368	653,654	893,062	0
Maintenance Assistance Status												
Cash	113,889	8,399	13,341	33,385	58,764	0	1,162,892	91,263	148,021	325,832	597,776	0
Medically needy	2,536	1,959	558	11	8	0	20,051	15,419	4,599	16	17	0
Poverty related	53,322	8,259	5,378	20,756	18,929	0	501,365	83,114	55,946	181,771	180,534	0
Other/unknown	29,364	40	2,368	15,964	10,992	0	284,262	403	22,822	146,288	114,749	0
Dual Status^c												
Full dual, all year	24,764	16,517	7,972	274	1	0	257,441	169,230	85,996	2,214	1	0
Full dual, part year	39	17	21	1	0	0	445	194	242	9	0	0
Non-dual, all year	174,308	2,123	13,652	69,841	88,692	0	1,710,684	20,775	145,150	651,684	893,075	0
Managed Care Status												
FFS all year	41,796	18,466	17,156	3,437	2,737	0	388,767	188,013	184,602	8,305	7,847	0
FFS part year, with Rx claims	3,797	137	1,580	1,464	616	0	39,077	1,591	17,834	13,212	6,440	0
FFS part year, no Rx claims	48,664	54	988	23,878	23,744	0	447,717	595	9,947	209,266	227,909	0
MC all year, with Rx claims	327	0	249	41	37	0	3,686	0	2,919	388	379	0
MC all year, no Rx claims	104,527	0	1,672	41,296	61,559	0	1,089,323	0	16,086	422,736	650,501	0

Source: Data for this table are from the MAX 1999 file for Hawaii, released by CMS in 1/2004. 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
 HAWAII, 1999

	Bene Mos in Cell B of Table 1		Benes and		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	No. of Benes	No. of Bene Mos
All	199,111	1,968,570	94,257	504,247	104,854	1,464,323		
FFS all year	41,796	388,767	41,796	388,767	0	0		
FFS part year, with Rx claims	3,797	39,077	3,797	16,269	0	22,808		
FFS part year, with no Rx claims	48,664	447,717	48,664	99,211	0	348,506		
MC all year, with Rx claims	327	3,686	0	0	327	3,686		
MC all year, with no Rx claims	104,527	1,089,323	0	0	104,527	1,089,323		

Source: Data for this table are from the MAX 1999 file for Hawaii, released by CMS in 1/2004. 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.