

**STATISTICAL COMPENDIUM:
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 1999
IOWA**

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TABLE 1
OVERVIEW OF BENEFICIARY SELECTION CRITERIA FOR STUDY POPULATION
IOWA, 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	313,720 (A)	64,155 (E)
2. Benes who had Medicaid pharmacy benefits during at least one month ^b	305,012 (B)	56,015 (F)
3. Benes who had fee-for-service pharmacy benefit coverage during at least one month ^{c, d, e}	272,111 (C)	55,993 (G)
4. Benes who were all-year nursing facility residents ^f	13,481 (D)	12,936 (H)

Source: Data for this table are from the MAX 1999 file for Iowa, released by CMS in 9/2003. This table was produced on 06/25/2004.

- a. MAX data element "Eligible Months Count" was used to determine an individual's Medicaid eligibility. All individuals who had a value greater than zero were considered as beneficiaries and counted in Cell A.
- b. Counts in Cell B were obtained by excluding from Cell A beneficiaries who never had pharmacy benefit coverage during their Medicaid enrollment in 1999 (based on MAX data element "Eligible Restricted Benefits Flag"). Characteristics of beneficiaries represented by Cell B are shown in Appendix Table A.1.
- c. Cell C represents the study population for Tables 2 through 7D. Cell C was obtained by excluding from Cell B beneficiaries who were under MC plans during all months of Medicaid eligibility in 1999, because the MAX files would not include separate prescription drug claims for those beneficiaries. MC plans include HMOs, PHPs, or other MC organizations that provided pharmacy benefits under capitation arrangements. Beneficiaries included are those who were in fee-for-service, PCCM, or PHP plans in selected states. Beneficiaries in PHPs were included if they were in one of 18 states where no PHP in the state provided a pharmacy benefit (see footnote e). For all other states, beneficiaries in PHPs were excluded. For example, if a beneficiary was under fee-for-service, PCCM, or PHPs in one of the 18 states for three months of the year but enrolled in an MC plan for the remaining nine months, only the three months were counted toward the number of benefit months associated with the beneficiary. Therefore, benefit months included represent the benefit months with fee-for-service pharmacy benefits. Beneficiaries and their benefit months included and excluded based on this criterion are shown in Appendix Table A.2.
- d. The total Medicaid pharmacy reimbursement for Iowa in 1999 was \$172,831,402, of which \$4,381,550 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 4.2 percent were restricted benefit months without a pharmacy benefit in Iowa, 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}
IOWA, 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	272,111	34,340	53,919	54,195	129,657	0		2,094,795	346,788	580,421	300,059	867,497	0	
Age														
5 and younger	54,794	0	1,659	137	52,998	0		344,063	0	15,461	882	327,720	0	
6-14	58,888	0	4,438	93	54,357	0		444,242	0	48,778	579	394,885	0	
15-20	30,944	0	3,688	6,016	21,240	0		210,831	0	39,806	31,228	139,797	0	
21-44	68,175	0	21,967	45,190	1,018	0		496,879	0	241,166	250,843	4,870	0	
45-64	22,568	0	19,785	2,742	41	0		228,118	0	211,464	16,439	215	0	
65-74	10,144	8,787	1,343	14	0	0		106,900	93,190	13,620	90	0	0	
75-84	12,585	11,855	728	1	1	0		127,826	120,452	7,356	12	6	0	
85 and older	14,012	13,698	310	2	2	0		135,931	133,146	2,765	16	4	0	
Unknown	1	0	1	0	0	5		0	0	5	0	0	0	
Gender														
Female	161,700	25,591	28,209	43,370	64,530	0		1,244,433	262,067	305,378	246,813	430,175	0	
Male	110,411	8,749	25,710	10,825	65,127	0		850,362	84,721	275,043	53,276	437,322	0	
Unknown	0	0	0	0	0	0		0	0	0	0	0	0	
Race														
White	232,082	32,348	47,667	46,151	105,916	0		1,832,405	326,439	515,923	263,743	726,300	0	
African American	20,371	559	3,670	3,964	12,178	0		139,938	6,167	38,751	19,455	75,565	0	
Other/unknown	19,658	1,433	2,582	4,080	11,563	0		122,452	14,182	25,747	16,891	65,632	0	
Use of Nursing Facilities														
All year	13,481	12,429	1,051	0	1	0		145,919	133,906	12,001	0	12	0	
Part year	7,411	6,414	983	8	6	0		63,635	53,756	9,765	81	33	0	
None	251,219	15,497	51,885	54,187	129,650	0		1,885,241	159,126	558,655	300,008	867,452	0	
Maintenance Assistance Status														
Cash	132,042	7,443	40,457	33,144	50,998	0		1,050,020	84,061	440,521	185,348	340,090	0	
Medically needy	11,269	3,457	3,835	3,054	923	0		87,397	33,881	35,133	14,280	4,103	0	
Poverty-related	65,009	1,085	1,553	9,542	52,829	0		400,752	11,638	15,961	44,192	328,961	0	
Other/unknown	63,791	22,355	8,074	8,455	24,907	0		556,626	217,208	88,806	56,269	194,343	0	
Dual Medicare Status^c														
Full dual, all year	51,444	30,677	20,469	288	10	0		539,613	310,498	227,370	1,694	51	0	
Full dual, part year	4,549	2,219	2,309	21	0	0		48,395	23,894	24,274	227	0	0	
Non-dual, all year	216,118	1,444	31,141	53,886	129,647	0		1,506,787	12,396	328,777	298,168	867,446	0	
Managed Care Status														
FFS all year	214,158	34,340	53,363	36,513	89,942	0		1,862,402	346,788	576,599	234,538	704,477	0	
FFS part year, with Rx claims	39,481	0	506	13,492	25,483	0		170,094	0	3,548	53,055	113,491	0	
FFS part year, no Rx claims	18,472	0	50	4,190	14,232	0		62,299	0	274	12,496	49,529	0	

Source: Data for this table are from the MAX 1999 file for Iowa, released by CMS in 9/2003. This table was produced on 06/25/2004.

Table 2

All Medicaid Beneficiaries

a. Table 2 includes the beneficiaries represented by Cell C of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

b. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services. The total includes some beneficiaries with unknown basis of eligibility and some whose age categories are not consistent with basis of eligibility.

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

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

TABLE 3
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC^{a, b}
 IOWA, 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 Beneficiaries
All	69.7 %	15.5	\$619	\$40	\$4,810	12.9 %	\$12	272,111
Age								
5 and younger	65.8	3.8	91	24	1,523	6.0	2	54,794
6-14	58.6	4.8	223	47	1,860	12.0	2	58,888
15-20	56.6	5.4	260	48	3,297	7.9	3	30,944
21-44	72.4	13.7	678	50	4,990	13.6	6	68,175
45-64	84.1	41.0	1,821	44	10,283	17.7	33	22,568
65-74	85.3	44.4	1,599	36	8,643	18.5	45	10,144
75-84	90.6	48.3	1,597	33	11,676	13.7	48	12,585
85 and older	93.7	45.9	1,329	29	14,771	9.0	46	14,012
Unknown	100.0	30.0	569	19	11,699	4.9	44	1
Basis of Eligibility								
Aged	91.1	47.3	1,523	32	12,383	12.3	48	34,340
Disabled	83.7	32.9	1,687	51	11,506	14.7	21	53,919
Adults	67.3	6.3	191	31	1,801	10.6	3	54,195
Children	59.2	3.7	114	31	1,277	9.0	2	129,657
Unknown	0.0	0.0	0	0	0	0.0	0	0
Gender								
Female	73.0	17.9	658	37	4,769	13.8	14	161,700
Male	64.8	12.0	562	47	4,871	11.5	8	110,411
Unknown	0.0	0.0	0	0	0	0.0	0	0
Race								
White	71.8	16.9	675	40	5,197	13.0	13	232,082
African American	61.9	7.9	309	39	2,632	11.7	6	20,371
Other/unknown	52.9	6.7	275	41	2,494	11.0	5	19,658
Use of Nursing Facilities								
Entire year	95.6	59.3	1,914	32	23,360	8.2	71	13,481
Part year	95.4	48.3	1,667	35	14,257	11.7	48	7,411
None	67.5	12.2	519	43	3,536	14.7	7	251,219
Maintenance Assistance Status								
Cash	72.3	15.5	677	44	3,678	18.4	9	132,042
Medically needy	71.8	25.9	1,200	46	3,808	31.5	18	11,269
Poverty related	54.6	3.1	85	27	1,026	8.3	2	65,009
Other/unknown	79.1	26.4	940	36	11,187	8.4	25	63,791

Source: Data for this table are from the MAX 1999 file for Iowa, released by CMS in 9/2003. This table was produced on 06/25/2004.

Table 3

All Medicaid Beneficiaries

a. Table 3 includes beneficiaries represented by Cell C of Table 1.

b. The Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

c. Information about OTC drugs appears in this column only. OTC drugs are not part of the reimbursement amount for prescription drugs.

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

TABLE 4
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a,b}
 IOWA, 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	\$80	12.9 %	30.3 %	38.8 %	8.7 %	12.5 %	7.6 %	2.1 %	\$625	272,111	2,094,795
Age												
5 and younger	0.6	15	6.0	34.2	53.0	6.7	4.4	1.2	0.5	243	54,794	344,063
6-14	0.6	30	12.0	41.4	46.1	6.1	5.0	1.1	0.3	247	58,888	444,242
15-20	0.8	38	7.9	43.4	41.1	7.5	6.0	1.6	0.4	484	30,944	210,831
21-44	1.9	93	13.6	27.6	39.6	11.2	13.8	6.0	1.9	685	68,175	496,879
45-64	4.1	180	17.7	15.9	20.2	11.3	26.1	20.0	6.4	1,017	22,568	228,118
65-74	4.2	152	18.5	14.7	17.8	10.5	26.3	23.6	7.1	820	10,144	106,900
75-84	4.8	157	13.7	9.4	12.9	10.1	31.1	28.9	7.6	1,150	12,585	127,826
85 and older	4.7	137	9.0	6.3	11.8	10.9	35.5	29.9	5.5	1,523	14,012	135,931
Unknown	6.0	114	4.9	0.0	0.0	0.0	0.0	100.0	0.0	2,340	1	5
Basis of Eligibility												
Aged	4.7	151	12.3	8.9	13.3	10.4	31.8	28.6	6.9	1,226	34,340	346,788
Disabled	3.1	157	14.7	16.3	29.4	12.3	23.6	14.5	3.9	1,069	53,919	580,421
Adults	1.1	35	10.6	32.7	43.2	10.4	9.2	3.0	1.5	325	54,195	300,089
Children	0.6	17	9.0	40.8	47.6	6.0	4.1	1.0	0.4	191	129,657	867,497
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Gender												
Female	2.3	86	13.8	27.0	38.3	9.1	13.8	9.1	2.7	620	161,700	1,244,433
Male	1.6	73	11.5	35.2	39.4	8.1	10.6	5.4	1.3	632	110,411	850,362
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	2.1	86	13.0	28.2	38.8	9.0	13.4	8.3	2.3	658	232,082	1,832,405
African American	1.1	45	11.7	38.1	40.8	7.6	8.5	3.7	1.1	383	20,371	139,938
Other/unknown	1.1	44	11.0	47.1	36.2	6.3	6.6	3.0	0.8	400	19,658	122,452
Use of Nursing Facilities												
Entire year	5.5	177	8.2	4.4	8.3	9.3	33.3	34.8	10.0	2,158	13,481	145,919
Part year	5.6	194	11.7	4.6	9.2	9.1	33.2	34.7	9.2	1,660	7,411	63,635
None	1.6	69	14.7	32.5	41.3	8.6	10.8	5.3	1.5	471	251,219	1,885,241
Maintenance Assistance Status												
Cash	1.9	85	18.4	27.7	40.9	9.6	13.0	6.8	2.0	463	132,042	1,050,020
Medically needy	3.3	155	31.5	28.2	20.5	11.1	23.5	13.8	2.8	491	11,269	87,397
Poverty related	0.5	14	8.3	45.4	44.3	5.4	3.7	0.9	0.3	166	65,009	400,752
Other/unknown	3.0	108	8.4	20.9	32.0	9.6	18.5	15.0	4.0	1,282	63,791	556,626

Source: Data for this table are from the MAX 1999 file for Iowa, released by CMS in 9/2003. This table was produced on 06/25/2004.

Table 4

All Medicaid Beneficiaries

- a. Table 4 includes the beneficiaries represented by Cell C of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- b. The Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
- Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE 5
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC^{a, b, c}
 IOWA, 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	\$80	0.6	\$47	0.3	\$14	1.0	\$16
Age								
5 and younger	0.6	15	0.2	9	0.0	1	0.4	5
6-14	0.6	30	0.2	18	0.1	4	0.3	7
15-20	0.8	38	0.3	25	0.1	6	0.4	7
21-44	1.9	93	0.6	59	0.2	17	0.9	15
45-64	4.1	180	1.4	108	0.6	32	1.9	34
65-74	4.2	152	1.4	86	0.7	28	1.9	32
75-84	4.8	157	1.4	82	0.9	32	2.2	35
85 and older	4.7	137	1.2	65	0.9	30	2.3	34
Unknown	6.0	114	0.2	12	1.0	17	4.6	77
Basis of Eligibility								
Aged	4.7	151	1.3	78	0.9	31	2.2	34
Disabled	3.1	157	1.1	97	0.4	28	1.4	27
Adults	1.1	35	0.3	21	0.1	5	0.6	7
Children	0.6	17	0.2	10	0.0	2	0.3	5
Unknown	0.0	0	0.0	0	0.0	0	0.0	0
Gender								
Female	2.3	86	0.7	49	0.3	15	1.1	18
Male	1.6	73	0.5	44	0.2	13	0.8	14
Unknown	0.0	0	0.0	0	0.0	0	0.0	0
Race								
White	2.1	86	0.7	50	0.3	15	1.0	17
African American	1.1	45	0.4	28	0.1	6	0.6	9
Other/unknown	1.1	44	0.4	28	0.1	7	0.5	8
Use of Nursing Facilities								
Entire year	5.5	177	1.4	90	1.0	37	2.6	41
Part year	5.6	194	1.6	104	1.0	37	2.6	43
None	1.6	69	0.5	42	0.2	12	0.8	13
Maintenance Assistance								
Status								
Cash	1.9	85	0.7	52	0.3	15	0.9	16
Medically needy	3.3	155	1.1	93	0.6	30	1.5	27
Poverty related	0.5	14	0.1	8	0.0	2	0.3	4
Other/unknown	3.0	108	0.9	59	0.5	21	1.4	24

Source: Data for this table are from the MAX 1999 file for Iowa, released by CMS in 9/2003. This table was produced on 06/25/2004.

a. Table 5 includes the beneficiaries represented by Cell C of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

b. The Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

Table 5

All Medicaid Beneficiaries

c. Brand-name drugs, sometimes called “innovator single-source drugs,” are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called “innovator multiple-source drugs,” are brand-name drugs whose patents have expired. Generic drugs, sometimes called “non-innovator multiple-source drugs,” are off-patent drugs manufactured and sold by companies other than the original patent holder. In Iowa, 5.3 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}
 IOWA, 1999

Therapeutic Category	No. of Rx per Bene Mo among Users				\$ per Bene Mo among Users				Total No. of Rx	Total Rx \$	No.	As % of All Benes	No. of Bene Mos			
	Patented		Off-Patent		Patented		Off-Patent									
	Total	Brand-Name	Generic	Total	Brand-Name	Generic	Total	Brand-Name						Generic		
Anti-infective Agents	0.3	0.1	0.0	0.2	\$9	\$0	\$2	\$35	\$65	\$35	\$11	395,024	\$13,827,070	132,880	48.8 %	1,196,347
Biologicals	0.1	0.1	0.0	0.0	14	1	14	262	164	2,342	532	4,228	1,106,530	3,369	1.2	38,004
Antineoplastic Agents	0.6	0.3	0.1	0.2	82	11	10	176	302	121	45	10,599	1,863,634	1,734	0.6	18,037
Endocrine/Metabolic Drugs	0.7	0.3	0.2	0.2	16	4	3	30	48	20	13	356,852	10,809,408	50,273	18.5	486,522
Cardiovascular Agents	1.5	0.4	0.3	0.8	20	12	9	27	47	35	12	732,861	19,762,100	46,718	17.2	486,705
Respiratory Agents	0.5	0.2	0.0	0.3	10	1	5	31	53	28	17	370,541	11,402,749	77,581	28.5	716,845
Gastrointestinal Agents	0.6	0.2	0.1	0.4	17	5	8	48	92	68	22	219,835	10,548,512	34,076	12.5	351,005
Genitourinary Agents	0.4	0.2	0.0	0.2	10	0	3	35	50	39	18	61,262	2,149,940	16,690	6.1	161,176
CNS Drugs	1.2	0.5	0.2	0.5	47	19	10	63	99	98	19	724,027	45,943,148	60,030	22.1	603,651
Stimulants/Anti-obesity/Anorexia	0.7	0.1	0.1	0.4	6	7	16	41	42	52	37	65,686	2,662,569	9,778	3.6	92,544
Miscellaneous Psychological/Neurological Agents	0.7	0.5	0.0	0.2	59	0	4	96	123	41	25	10,718	1,028,431	1,581	0.6	16,287
Analgesics and Anesthetics	0.6	0.1	0.0	0.4	8	2	6	29	85	65	14	344,991	10,105,346	63,808	23.4	603,077
Neuromuscular Agents	0.9	0.4	0.2	0.4	32	7	8	51	90	43	20	276,099	14,183,626	28,307	10.4	294,783
Nutritional Products	0.6	0.0	0.2	0.4	0	6	6	19	20	27	15	112,845	2,179,337	20,324	7.5	185,924
Hematological Agents	0.8	0.1	0.4	0.3	34	13	9	75	544	32	33	86,360	6,515,544	11,181	4.1	114,179
Topical Products	0.3	0.1	0.0	0.2	5	2	2	27	46	35	14	209,371	5,702,225	71,422	26.2	677,045
Miscellaneous Products	0.4	0.2	0.1	0.2	43	21	5	174	278	257	30	13,910	2,425,017	3,391	1.2	35,584
Unknown Therapeutic Category	0.4	0.0	0.0	0.0	0	0	0	28	0	0	0	223,162	6,234,666	51,389	18.9	516,247
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.	4,218,371	168,449,852	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 1999 file for Iowa, released by CMS in 9/2003. This table was produced on 06/25/2004.

- a. Table 6 includes the beneficiaries represented by Cell C of Table 1. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 1999. A beneficiary who used drugs from two or more categories was counted as a user for each category. Therefore, the sum of users across categories may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
- c. For information about these therapeutic categories, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).
- d. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In Iowa, 5.3 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}
 IOWA, 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	\$22,386,970	24,673	9.1 %	269,280	0.8	\$108	\$83
ANTIDEPRESSANTS	17,411,227	50,777	18.7	533,893	0.6	54	33
ANTICONVULSANT	11,530,316	19,927	7.3	219,108	0.9	61	53
ULCER DRUGS	7,892,318	31,911	11.7	342,156	0.4	54	23
ANTIASTHMATIC	7,156,615	46,008	16.9	472,209	0.4	36	15
ANTIDIABETIC	6,108,830	18,819	6.9	201,885	0.7	40	30
ANALGESICS - Narcotic	5,756,296	53,307	19.6	545,158	0.3	30	11
ANTIHYPERTENSIVE	5,730,895	23,871	8.8	254,480	0.7	33	23
ANTIANSIETY AGENTS	4,556,590	25,574	9.4	272,442	0.5	32	17
CALCIUM BLOCKERS	4,307,915	12,427	4.6	132,731	0.7	45	32

Source: Data for this table are from the MAX 1999 file for Iowa, released by CMS in 9/2003. This table was produced on 06/25/2004.

- a. Table 7 includes the beneficiaries represented by Cell C of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 1999. A beneficiary who used drugs from two or more groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
- c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 1999. For information about these drug groups, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).
- Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE 7A
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR TOP 10 DRUG GROUPS COMBINED
 AND FIRST AND SECOND GROUPS SEPARATELY, BY SEX, BOE, AND AGE^{a,b,c}
 IOWA, 1999

Beneficiary Characteristics	All Top 10 Drug Groups					ANTIPSYCHOTICS					ANTIDEPRESSANTS						
	No. of Rx	Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
All	1,819,697	\$92,837,972	24,673	9.1 %	269,280	0.8	\$83	50,777	18.7 %	533,893	0.6	\$33					
Female																	
Disabled	1,210,378	58,151,549	13,920	8.6	151,209	0.7	71	35,458	21.9	372,616	0.6	33					
5 and younger	554,931	31,705,948	7,409	26.3	84,731	0.8	92	15,355	54.4	174,069	0.6	37					
6-14	2,511	107,196	4	0.6	44	0.4	35	8	1.1	83	0.4	17					
15-20	10,267	594,729	180	11.1	2,036	0.7	76	251	15.5	2,862	0.6	28					
21-44	11,871	804,197	241	16.8	2,788	0.7	82	451	31.5	5,152	0.5	31					
45-64	198,385	12,664,937	3,471	31.7	39,799	0.8	97	6,695	61.1	76,074	0.6	38					
65-74	306,074	16,465,719	3,319	28.0	38,061	0.8	91	7,509	63.4	85,182	0.6	37					
75-84	13,724	587,709	94	10.9	996	0.8	60	238	27.7	2,581	0.6	28					
85 and older	8,404	337,348	61	11.4	667	0.6	33	142	26.4	1,551	0.6	27					
Other Eligibles	3,695	144,113	39	15.1	340	0.7	39	61	23.6	584	0.6	30					
5 and younger	655,441	26,445,548	6,511	4.9	66,478	0.6	44	20,103	15.1	198,547	0.6	29					
6-14	7,213	158,435	27	0.1	256	0.3	28	49	0.2	476	0.4	13					
15-20	19,699	793,111	332	1.2	3,484	0.6	54	1,259	4.7	12,814	0.5	22					
21-44	18,450	823,250	412	2.4	3,832	0.5	40	1,679	10.0	15,552	0.5	26					
45-64	73,857	2,877,849	740	2.0	6,345	0.3	21	5,834	15.9	51,254	0.4	25					
65-74	8,489	371,368	52	3.3	455	0.4	57	421	26.4	3,638	0.5	31					
75-84	140,121	6,194,665	1,197	20.6	13,214	0.8	66	2,591	44.5	28,547	0.7	33					
85 and older	191,949	7,891,185	1,752	20.4	18,676	0.7	48	3,810	44.3	40,418	0.7	32					
Male	195,663	7,335,685	1,999	17.9	20,216	0.6	31	4,460	39.9	45,848	0.7	32					
Disabled	609,319	34,686,423	10,753	9.7	118,071	0.9	99	15,319	13.9	161,277	0.6	33					
5 and younger	368,563	24,613,019	7,169	27.9	81,884	0.9	119	7,980	31.0	89,978	0.6	36					
6-14	3,574	144,262	10	1.1	114	0.5	31	13	1.4	156	0.4	20					
15-20	23,975	1,430,954	599	21.2	6,889	0.8	83	659	23.4	7,557	0.6	26					
21-44	18,489	1,337,569	501	22.2	5,700	0.8	98	559	24.8	6,293	0.6	35					
45-64	161,007	12,323,064	3,770	34.2	43,112	1.0	131	3,843	34.9	43,539	0.6	39					
65-74	153,005	8,992,387	2,212	27.8	25,284	1.0	116	2,770	34.9	31,086	0.6	36					
75-84	5,743	263,034	48	9.9	508	0.7	66	92	19.0	953	0.6	34					
85 and older	2,293	101,288	19	9.9	203	0.7	56	32	16.8	301	0.5	21					
Other Eligibles	477	20,461	10	19.2	74	0.4	17	12	23.1	93	0.5	34					
5 and younger	240,756	10,073,404	3,584	4.2	36,187	0.7	53	7,339	8.7	71,299	0.6	28					
6-14	10,815	237,874	58	0.2	595	0.3	26	91	0.3	906	0.4	10					
15-20	39,179	1,729,728	1,021	3.7	10,415	0.7	61	2,123	7.7	21,507	0.5	22					
21-44	15,328	814,399	383	3.7	3,831	0.7	67	1,145	11.0	10,897	0.5	29					
45-64	13,818	562,338	156	1.6	1,193	0.4	54	820	8.6	6,501	0.4	24					
65-74	4,215	184,870	27	2.3	236	0.6	80	148	12.5	1,250	0.5	28					
75-84	54,821	2,425,759	595	19.9	6,510	0.8	64	879	29.5	9,414	0.7	32					
85 and older	61,111	2,517,156	767	23.5	7,749	0.7	43	1,232	37.8	12,165	0.7	36					
Unknown	41,469	1,601,280	577	22.9	5,658	0.6	32	901	35.8	8,659	0.7	35					
	6	53	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 Iowa, released by CMS in 9/2003. This table was produced on 06/25/2004.

a. Table 7A includes the beneficiaries represented by Cell C of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 1999. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 1999. For information about these drug groups, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mdmb.asp (May 13 2003).

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

TABLE 7B
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY,
 BY SEX, BOE, AND AGE^{a, b, c}
 IOWA, 1999

Beneficiary Characteristics	ANTICONVULSANT					ULCER DRUGS					ANTIASTHMATIC				
	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	19,927	7.3 %	219,108	0.9	\$53	31,911	11.7 %	342,156	0.4	\$23	46,008	16.9 %	472,209	0.4	\$15
Female	11,622	7.2	127,718	0.8	48	22,714	14.0	244,803	0.4	23	29,036	18.0	300,896	0.4	16
Disabled	7,468	26.5	85,493	0.9	57	8,946	31.7	102,024	0.4	24	10,800	38.3	122,437	0.5	18
5 and younger	92	13.0	1,011	0.7	46	99	14.0	1,041	0.5	24	243	34.3	2,625	0.3	10
6-14	340	21.0	3,923	0.9	57	106	6.6	1,237	0.4	28	362	22.4	4,158	0.4	14
15-20	367	25.6	4,250	0.9	64	159	11.1	1,843	0.3	22	268	18.7	3,062	0.3	12
21-44	3,442	31.4	39,477	0.9	61	2,993	27.3	34,305	0.3	22	3,655	33.4	42,010	0.4	15
45-64	3,076	26.0	35,208	0.8	53	5,018	42.4	57,318	0.4	25	5,758	48.6	65,147	0.5	22
65-74	98	11.4	1,053	0.8	33	268	31.2	2,999	0.4	23	328	38.2	3,606	0.5	19
75-84	44	8.2	484	0.7	26	204	38.0	2,244	0.4	24	128	23.8	1,309	0.5	17
85 and older	9	3.5	87	0.7	15	99	38.4	1,037	0.5	22	58	22.5	520	0.7	27
Other Eligibles	4,154	3.1	42,225	0.8	32	13,768	10.3	142,779	0.4	22	18,236	13.7	178,459	0.4	14
5 and younger	54	0.2	538	0.6	28	277	1.1	2,226	0.2	7	2,617	10.1	23,719	0.2	4
6-14	236	0.9	2,379	0.6	28	330	1.2	3,335	0.2	8	1,994	7.4	19,564	0.2	8
15-20	222	1.3	2,007	0.6	35	577	3.4	5,446	0.2	8	1,361	8.1	12,328	0.2	7
21-44	845	2.3	7,423	0.5	26	2,336	6.4	21,300	0.2	13	4,096	11.2	35,755	0.3	10
45-64	69	4.3	585	0.6	32	220	13.8	1,900	0.3	20	306	19.2	2,615	0.4	15
65-74	930	16.0	10,387	0.9	41	2,406	41.4	26,998	0.4	24	2,605	44.8	28,965	0.6	22
75-84	1,050	12.2	11,231	0.9	31	3,482	40.5	38,024	0.5	25	2,808	32.7	30,059	0.6	22
85 and older	748	6.7	7,675	0.9	26	4,140	37.0	43,550	0.6	26	2,449	21.9	25,454	0.5	17
Male	8,305	7.5	91,390	0.9	59	9,197	8.3	97,353	0.4	24	16,972	15.4	171,313	0.4	14
Disabled	6,254	24.3	71,380	0.9	65	4,828	18.8	54,694	0.4	25	5,730	22.3	64,286	0.5	18
5 and younger	99	10.4	1,057	0.8	50	98	10.3	1,066	0.4	21	377	39.6	4,161	0.4	12
6-14	608	21.6	7,076	0.8	57	105	3.7	1,228	0.4	33	609	21.6	6,958	0.4	14
15-20	492	21.8	5,638	0.9	65	159	7.1	1,827	0.4	23	326	14.5	3,668	0.3	12
21-44	3,191	29.0	36,361	1.0	70	1,922	17.4	22,046	0.4	26	1,607	14.6	18,278	0.4	15
45-64	1,805	22.7	20,611	0.9	61	2,364	29.8	26,620	0.5	26	2,559	32.2	28,559	0.6	22
65-74	41	8.5	439	0.9	41	113	23.3	1,204	0.4	24	179	37.0	1,924	0.6	23
75-84	17	8.9	187	0.8	30	60	31.4	658	0.5	29	60	31.4	646	0.4	18
85 and older	1	1.9	11	0.5	15	7	13.5	45	0.6	17	13	25.0	92	0.6	27
Other Eligibles	2,051	2.4	20,010	0.8	34	4,369	5.2	42,659	0.4	22	11,242	13.3	107,027	0.4	12
5 and younger	60	0.2	567	0.6	21	313	1.1	2,549	0.2	7	3,848	14.1	34,502	0.2	5
6-14	364	1.3	3,569	0.7	36	263	1.0	2,650	0.2	10	2,643	9.6	26,170	0.3	10
15-20	247	2.4	2,285	0.6	38	219	2.1	2,073	0.2	9	725	7.0	7,005	0.3	9
21-44	239	2.5	1,833	0.5	28	506	5.3	4,045	0.3	20	512	5.4	3,955	0.4	11
45-64	43	3.6	326	0.7	35	117	9.8	939	0.3	22	123	10.4	1,039	0.5	20
65-74	471	15.8	5,119	0.9	38	896	30.0	9,763	0.5	24	1,167	39.1	12,734	0.6	23
75-84	418	12.8	4,179	0.9	33	1,135	34.8	11,678	0.5	26	1,340	41.1	13,120	0.6	23
85 and older	209	8.3	2,132	0.8	31	920	36.6	8,962	0.6	26	884	35.1	8,502	0.6	21
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Table 7B
 All Medicaid Beneficiaries

Source: Data for this table are from the MAX 1999 file for Iowa, released by CMS in 9/2003. This table was produced on 06/25/2004.

- a. Table 7B includes the beneficiaries represented by Cell C of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 1999. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
 - b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
 - c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 1999. For information about these drug groups, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).
- Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE 7C
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY,
 BY SEX, BOE, AND AGE^{a, b, c}
 IOWA, 1999

Beneficiary Characteristics	ANTIDIABETIC				ANALGESICS - Narcotic				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	18,819	6.9 %	201,885	0.7	\$30	53,307	19.6 %	545,158	0.3	\$11	23,871	8.8 %	254,480	0.7	\$23
Female	13,555	8.4	146,602	0.8	30	39,462	24.4	404,680	0.4	11	15,320	9.5	164,305	0.7	23
Disabled	5,404	19.2	60,643	0.7	34	13,923	49.4	157,615	0.4	13	4,915	17.4	54,935	0.7	23
5 and younger	3	0.4	36	0.5	21	47	6.6	512	0.2	2	26	3.7	301	0.7	9
6-14	9	0.6	103	1.3	98	114	7.0	1,304	0.1	2	136	8.4	1,536	0.7	11
15-20	27	1.9	318	0.8	25	269	18.8	3,101	0.2	4	61	4.3	692	0.6	14
21-44	1,026	9.4	11,649	0.7	32	5,704	52.1	65,307	0.3	12	886	8.1	10,077	0.6	21
45-64	3,935	33.2	44,145	0.7	35	7,145	60.3	80,553	0.4	15	3,221	27.2	35,934	0.7	24
65-74	243	28.3	2,660	0.7	30	311	36.2	3,359	0.4	10	293	34.1	3,244	0.6	24
75-84	122	22.7	1,367	0.8	31	213	39.7	2,281	0.4	13	206	38.4	2,245	0.7	23
85 and older	39	15.1	365	0.7	17	120	46.5	1,198	0.4	14	86	33.3	906	0.7	23
Other Eligibles	8,151	6.1	85,959	0.8	28	25,539	19.1	247,065	0.4	10	10,404	7.8	109,365	0.7	23
5 and younger	7	0.0	51	1.1	34	375	1.4	3,557	0.1	1	39	0.2	368	0.6	8
6-14	42	0.2	384	1.1	34	863	3.2	8,476	0.1	2	313	1.2	3,250	0.6	11
15-20	44	0.3	399	0.8	37	1,928	11.4	17,258	0.2	2	64	0.4	576	0.5	9
21-44	558	1.5	4,750	0.7	28	9,601	26.2	83,019	0.2	3	455	1.2	3,990	0.5	16
45-64	155	9.7	1,335	0.7	32	479	30.0	4,450	0.3	5	157	9.8	1,324	0.6	22
65-74	2,385	41.0	26,462	0.8	31	2,847	48.9	31,752	0.4	14	2,314	39.8	25,656	0.7	23
75-84	2,942	34.2	31,761	0.8	28	4,166	48.5	44,622	0.5	16	3,487	40.6	37,525	0.7	24
85 and older	2,018	18.0	20,817	0.8	23	5,280	47.2	53,931	0.5	16	3,575	32.0	36,676	0.8	24
Male	5,264	4.8	55,283	0.7	30	13,845	12.5	140,478	0.3	10	8,551	7.7	90,175	0.7	22
Disabled	2,674	10.4	29,734	0.7	31	6,763	26.3	75,145	0.3	12	3,856	15.0	42,955	0.6	22
5 and younger	3	0.3	36	1.0	28	54	5.7	600	0.1	3	36	3.8	370	0.8	11
6-14	7	0.2	75	1.2	35	205	7.3	2,372	0.1	2	480	17.0	5,477	0.7	16
15-20	28	1.2	322	0.7	28	280	12.4	3,218	0.1	3	188	8.3	2,160	0.6	16
21-44	746	6.8	8,403	0.8	32	2,991	27.2	33,762	0.3	12	967	8.8	10,896	0.6	22
45-64	1,749	22.0	19,477	0.7	32	3,029	38.1	33,121	0.4	14	1,987	25.0	21,966	0.6	24
65-74	85	17.6	854	0.6	24	123	25.4	1,318	0.4	17	119	24.6	1,243	0.7	24
75-84	40	20.9	413	0.6	20	59	30.9	601	0.3	11	60	31.4	664	0.6	22
85 and older	16	30.8	154	0.4	23	22	42.3	153	0.4	20	19	36.5	179	0.6	23
Other Eligibles	2,590	3.1	25,549	0.8	28	7,082	8.4	65,333	0.3	7	4,695	5.5	47,220	0.7	22
5 and younger	15	0.1	136	0.6	20	576	2.1	5,501	0.1	1	103	0.4	1,023	0.5	8
6-14	45	0.2	423	0.9	32	806	2.9	7,943	0.1	1	1,049	3.8	10,552	0.7	12
15-20	44	0.4	381	1.2	53	672	6.5	5,997	0.1	1	199	1.9	1,946	0.6	12
21-44	174	1.8	1,353	0.8	32	1,722	18.1	13,171	0.3	4	190	2.0	1,541	0.6	19
45-64	90	7.6	574	0.7	34	253	21.3	2,063	0.4	9	138	11.6	1,146	0.6	21
65-74	866	29.0	9,297	0.7	31	938	31.4	10,166	0.4	11	1,006	33.7	10,906	0.7	26
75-84	841	25.8	8,451	0.8	26	1,116	34.2	11,076	0.4	13	1,187	36.4	12,123	0.8	27
85 and older	515	20.5	4,934	0.8	23	999	39.7	9,416	0.5	13	823	32.7	7,983	0.8	27
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	100.0	5	0.8	8

Table 7C
 All Medicaid Beneficiaries

Source: Data for this table are from the MAX 1999 file for Iowa, released by CMS in 9/2003. This table was produced on 06/25/2004.

- a. Table 7C includes the beneficiaries represented by Cell C of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 1999. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
- c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 1999. For information about these drug groups, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).

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

TABLE 7D
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR NINTH AND TENTH TOP DRUG GROUPS
 SEPARATELY, BY SEX, BOE, AND AGE^{a, b, c}
 IOWA, 1999

Beneficiary Characteristics	ANTI-ANXIETY AGENTS				CALCIUM BLOCKERS				Mean Rx \$	Mean No. of Rx	Users as % of All Benes	No. of Users	No. of Bene Mos among Users	Mean Rx \$	Mean No. of Rx	Users as % of All Benes	No. of Users	No. of Bene Mos among Users	Mean Rx \$	Mean No. of Rx	No. of Benes	No. of Bene Mos
	No. of Users	Users	No. of Bene Mos among Users	Mean Rx \$	No. of Users	Users	No. of Bene Mos among Users	Mean Rx \$														
All	25,574	9.4 %	272,442	0.5	\$17	12,427	4.6 %	132,731	0.7	\$33	272,111	2,094,795										
Female	17,663	10.9	188,169	0.5	16	9,258	5.7	99,440	0.7	32	161,699	1,244,428										
Disabled	7,740	27.4	87,794	0.6	19	2,809	10.0	31,427	0.7	32	28,208	305,373										
5 and younger	39	5.5	409	0.3	7	6	0.8	64	0.2	8	708	6,591										
6-14	116	7.2	1,347	0.3	11	7	0.4	76	0.4	20	1,618	17,634										
15-20	155	10.8	1,775	0.4	16	19	1.3	223	0.4	30	1,434	15,639										
21-44	3,154	28.8	36,066	0.5	18	468	4.3	5,350	0.6	29	10,952	120,924										
45-64	3,927	33.2	44,513	0.6	20	1,934	16.3	21,676	0.7	33	11,842	127,751										
65-74	178	20.7	1,902	0.5	16	177	20.6	1,903	0.7	34	859	8,920										
75-84	112	20.9	1,192	0.5	13	140	26.1	1,535	0.7	31	537	5,555										
85 and older	59	22.9	590	0.5	17	58	22.5	600	0.8	35	258	2,359										
Other Eligibles	9,912	7.4	100,370	0.5	14	6,449	4.8	68,013	0.8	32	133,491	939,055										
5 and younger	378	1.5	3,643	0.1	2	2	0.0	18	0.5	19	25,909	159,462										
6-14	424	1.6	4,371	0.2	6	7	0.0	62	0.3	8	26,816	195,203										
15-20	341	2.0	3,153	0.3	8	27	0.2	218	0.2	5	16,864	102,457										
21-44	2,118	5.8	18,558	0.4	9	289	0.8	2,433	0.4	16	36,706	209,736										
45-64	192	12.0	1,684	0.4	11	96	6.0	818	0.6	29	1,595	10,045										
65-74	1,549	26.6	17,038	0.6	18	1,397	24.0	15,574	0.7	33	5,817	62,698										
75-84	2,324	27.0	24,986	0.6	17	2,207	25.7	23,820	0.8	33	8,598	89,197										
85 and older	2,586	23.1	26,937	0.6	17	2,424	21.7	25,070	0.8	33	11,186	110,257										
Male	7,921	7.2	84,273	0.5	18	3,169	2.9	33,291	0.7	33	110,411	850,362										
Disabled	4,420	17.2	50,146	0.6	22	1,543	6.0	17,079	0.7	34	25,710	275,043										
5 and younger	53	5.6	571	0.4	11	2	0.2	24	1.3	33	951	8,870										
6-14	216	7.7	2,489	0.3	15	8	0.3	92	0.5	40	2,820	31,144										
15-20	195	8.7	2,258	0.5	22	17	0.8	203	0.4	33	2,254	24,167										
21-44	2,104	19.1	24,049	0.6	23	418	3.8	4,714	0.6	31	11,015	120,242										
45-64	1,738	21.9	19,616	0.6	21	1,006	12.7	11,077	0.7	35	7,943	83,713										
65-74	66	13.6	703	0.7	22	58	12.0	593	0.6	32	484	4,700										
75-84	37	19.4	371	0.5	14	29	15.2	323	0.7	39	191	1,801										
85 and older	11	21.2	89	0.4	5	5	9.6	53	0.6	29	52	406										
Other Eligibles	3,501	4.1	34,127	0.4	13	1,626	1.9	16,212	0.7	32	84,701	575,319										
5 and younger	423	1.6	4,156	0.1	2	5	0.0	27	0.4	25	27,226	169,140										
6-14	559	2.0	5,675	0.3	10	9	0.0	92	0.4	11	27,634	200,261										
15-20	177	1.7	1,625	0.3	12	13	0.1	130	0.3	10	10,392	68,568										
21-44	336	3.5	2,679	0.4	9	82	0.9	684	0.6	26	9,502	45,977										
45-64	62	5.2	519	0.6	9	69	5.8	530	0.6	25	1,188	6,609										
65-74	585	19.6	6,346	0.6	19	526	17.6	5,734	0.7	33	2,984	30,582										
75-84	758	23.3	7,400	0.6	17	571	17.5	5,659	0.8	33	3,259	31,273										
85 and older	601	23.9	5,727	0.6	16	351	14.0	3,356	0.8	33	2,516	22,909										
Unknown	1	100.0	5	0.4	2	0	0.0	0	0.0	0	1	5										

Source: Data for this table are from the MAX 1999 file for Iowa, released by CMS in 9/2003. This table was produced on 06/25/2004.

- a. Table 7D includes the beneficiaries represented by Cell C of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 1999. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
- c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 1999. For information about these drug groups, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).

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

TABLE 8
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BENEFICIARY CHARACTERISTIC^{a, b}
 IOWA, 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	\$177	5.5	13,481	145,919
Age				
0-64	244	6.0	1,022	11,715
65-74	231	6.2	1,440	15,755
75-84	193	5.8	3,946	42,194
85 and older	146	5.1	7,072	76,250
Unknown	114	6.0	1	5
Gender				
Female	174	5.5	9,955	108,618
Male	187	5.3	3,526	37,301
Unknown	0	0.0	0	0
Race				
White	177	5.5	13,131	142,361
African American	173	5.3	110	1,234
Other/unknown	171	5.1	240	2,324
Basis of Eligibility				
Aged	171	5.4	12,429	133,906
Disabled	243	6.0	1,051	12,001
Adults	0	0.0	0	0
Children	726	21.8	1	12
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 1999 file for Iowa, released by CMS in 9/2003. This table was produced on 06/25/2004.

a. Table 8 includes the beneficiaries represented by Cell D of Table 1, those who resided in nursing facilities throughout their 1999 Medicaid enrollment. A total of 7,411 beneficiaries who were in nursing facilities for part of their enrollment and their 63,635 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}
 IOWA, 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	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total # of Rx	Total Rx \$	No.	As % of All-Year NF Residents					
												No.	Mos				
Anti-infective Agents	0.3	0.2	0.0	0.2	\$14	\$12	\$0	\$2	\$40	\$66	\$35	\$13	36,829	\$1,469,382	9,477	70.3 %	105,784
Biologicals	0.1	0.1	0.0	0.0	2	1	0	1	17	13	0	24	1,312	22,225	1,172	8.7	13,459
Antineoplastic Agents	0.7	0.3	0.1	0.2	87	66	10	11	131	208	102	44	1,986	260,732	285	2.1	3,005
Endocrine/Metabolic Drugs	1.1	0.4	0.4	0.3	26	16	5	4	24	43	14	13	59,894	1,452,434	5,087	37.7	55,667
Cardiovascular Agents	1.9	0.4	0.5	1.0	41	14	14	12	21	39	29	11	193,443	4,125,581	9,287	68.9	101,075
Respiratory Agents	0.7	0.2	0.0	0.4	22	11	1	10	31	48	23	23	36,178	1,132,912	4,695	34.8	52,402
Gastrointestinal Agents	0.9	0.2	0.1	0.6	33	14	6	13	38	80	58	22	56,802	2,131,145	5,827	43.2	64,718
Genitourinary Agents	0.5	0.3	0.0	0.3	20	14	0	5	36	55	31	19	17,475	636,468	2,838	21.1	32,021
CNS Drugs	1.4	0.6	0.2	0.6	70	47	14	9	50	75	75	14	122,821	6,087,374	7,973	59.1	87,554
Stimulants/Anti-obesity/Anorexia	0.5	0.0	0.1	0.4	14	0	4	10	25	15	37	23	482	12,182	82	0.6	899
Miscellaneous Psychological/Neurological Agents	0.8	0.7	0.0	0.1	84	82	0	2	107	117	0	24	4,638	498,254	553	4.1	5,912
Analgesics and Anesthetics	0.8	0.2	0.0	0.6	25	13	2	9	29	75	46	15	57,302	1,688,663	6,221	46.1	68,285
Neuromuscular Agents	1.3	0.3	0.4	0.6	56	25	18	13	45	76	49	23	46,631	2,085,724	3,368	25.0	37,259
Nutritional Products	0.8	0.0	0.3	0.5	17	0	8	8	20	17	27	16	36,945	730,160	3,997	29.6	43,830
Hematological Agents	1.0	0.1	0.6	0.4	29	8	14	7	29	134	24	20	29,799	864,629	2,716	20.1	29,456
Topical Products	0.5	0.2	0.1	0.2	14	7	3	3	29	44	36	14	42,057	1,214,168	7,600	56.4	85,770
Miscellaneous Products	0.2	0.0	0.0	0.1	4	2	0	2	26	61	119	18	1,591	41,633	856	6.3	9,881
Unknown Therapeutic Category	0.6	0.0	0.0	0.0	16	0	0	0	25	0	0	0	53,299	1,352,984	7,381	54.8	83,045
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.	799,484	25,806,650	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 1999 file for Iowa, released by CMS in 9/2003. This table was produced on 06/25/2004.

- a. Table 9 includes the beneficiaries represented by Cell D of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 1999. A total of 7,411 beneficiaries who were in nursing facilities for part of their enrollment and their 63,635 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 Iowa, 5.3 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

All Medicaid Beneficiaries

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

TABLE 10
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS,
 BY TOP-10 DRUG GROUP^{a, b, c, d}
 IOWA, 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
ANTIDEPRESSANTS	\$2,855,564	6,805	50.5 %	75,193	0.8	\$48	\$38
ANTIPSYCHOTICS	2,252,651	3,948	29.3	44,056	0.7	73	51
ULCER DRUGS	1,622,036	5,175	38.4	57,849	0.6	46	28
ANTHYPERTENSIVE	1,219,321	4,062	30.1	44,312	0.9	32	28
ANALGESICS - Narcotic	1,194,852	5,925	44.0	65,212	0.6	33	18
ANTICONVULSANT	1,162,828	2,312	17.2	25,976	1.1	41	45
ANTIDIABETIC	1,028,370	3,312	24.6	36,202	0.9	32	28
CALCIUM BLOCKERS	945,077	2,383	17.7	26,086	0.9	41	36
ANTIANSIETY AGENTS	894,107	3,784	28.1	41,917	0.6	33	21
ANTIASTHMATIC	862,419	3,664	27.2	40,216	0.6	36	21

Source: Data for this table are from the MAX 1999 file for Iowa, released by CMS in 9/2003. This table was produced on 06/25/2004.

- a. Table 10 includes the beneficiaries represented by Cell D of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 1999. A total of 7,411 beneficiaries who were in nursing facilities for part of their enrollment and their 63,635 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} IOWA, 1999

Beneficiary Characteristics	All Top 10 Drug Groups					ANTIDEPRESSANTS					ANTIPSYCHOTICS				
	No. of Rx	Rx \$	No. of Users	Residents	Mean No. of Rx	No. of All-Year NF Residents	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Residents	No. of All-Year NF Residents	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
All	334,539	\$14,037,225	6,805	50.5 %	0.8	75,193	0.8	\$38	3,948	29.3 %	44,056	0.7	\$51		
Female	246,936	10,205,708	5,176	52.0	0.8	57,609	0.8	37	2,737	27.5	30,832	0.7	51		
Disabled	19,163	942,692	331	59.3	0.9	3,841	0.9	47	205	36.7	2,418	0.8	72		
64 or younger	18,328	903,599	320	59.9	0.9	3,728	0.9	47	195	36.5	2,301	0.8	74		
65-74	410	16,672	7	70.0	1.0	73	1.0	52	3	30.0	33	0.7	33		
75-84	265	17,122	3	37.5	0.8	36	0.8	43	6	75.0	72	0.8	38		
85 and older	160	5,299	1	16.7	1.0	4	1.0	59	1	16.7	12	2.0	10		
Other Eligibles	227,767	9,262,963	4,845	51.6	0.8	53,768	0.8	37	2,532	26.9	28,414	0.7	49		
64 or younger	0	0	0	0.0	0.0	0	0.0	0	0	0.0	0	0.0	0		
65-74	29,845	1,439,166	546	65.9	0.8	6,006	0.8	43	393	47.5	4,461	0.9	81		
75-84	78,007	3,293,624	1,667	61.5	0.8	18,508	0.8	37	918	33.8	10,347	0.7	55		
85 and older	119,915	4,530,173	2,632	44.9	0.8	29,254	0.8	35	1,221	20.9	13,606	0.6	34		
Male	87,603	3,831,517	1,629	46.2	0.8	17,584	0.8	41	1,211	34.3	13,224	0.7	53		
Disabled	15,175	775,561	211	42.9	0.9	2,441	0.9	48	161	32.7	1,829	0.9	85		
64 or younger	15,126	772,807	208	42.7	0.9	2,414	0.9	48	159	32.6	1,811	0.9	86		
65-74	46	2,095	3	150.0	0.7	27	0.7	46	2	100.0	18	0.2	8		
75-84	3	659	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		
Other Eligibles	72,428	3,055,956	1,418	46.7	0.8	15,143	0.8	39	1,050	34.6	11,395	0.7	47		
64 or younger	151	7,026	0	0.0	0.0	0	0.0	0	0	0.0	0	0.0	0		
65-74	17,342	808,099	302	50.3	0.8	3,335	0.8	40	262	43.7	2,901	0.8	68		
75-84	29,683	1,247,301	608	49.7	0.8	6,433	0.8	40	423	34.6	4,593	0.7	45		
85 and older	25,252	993,530	508	42.0	0.8	5,375	0.8	38	365	30.2	3,901	0.6	34		
Unknown	6	53	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 Iowa, released by CMS in 9/2003. This table was produced on 06/25/2004.

a. Table 10A includes the beneficiaries represented by Cell D of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 1999. A total of 7,411 beneficiaries who were in nursing facilities for part of their enrollment and their 63,635 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}
 IOWA, 1999

Beneficiary Characteristics	ULCER DRUGS						ANTIHYPERTENSIVE						ANALGESICS - Narcotic					
	Users as %			Users as %			Users as %			Users as %			Users as %			Users as %		
	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	No. of Users	No. of Bene Mos among Users	Mean No. of Rx
All	5,175	38.4 %	\$28	4,062	30.1 %	\$28	44,312	0.9	\$28	5,925	44.0 %	\$28	65,212	0.6	\$18			
Female	3,848	38.7	28	2,961	29.7	28	32,416	0.8	26	4,706	47.3	26	52,223	0.6	19			
Disabled	214	38.4	36	108	19.4	36	1,234	0.9	30	252	45.2	30	2,864	0.5	18			
64 or younger	203	38.0	36	99	18.5	36	1,126	0.9	31	234	43.8	31	2,675	0.5	16			
65-74	4	40.0	40	5	50.0	40	60	0.8	25	8	80.0	25	85	0.7	28			
75-84	4	50.0	48	2	25.0	42	24	0.8	24	6	75.0	24	72	0.3	87			
85 and older	3	50.0	45	2	33.3	45	24	1.0	17	4	66.7	17	32	0.3	12			
Other Eligibles	3,634	38.7	27	2,852	30.4	27	31,177	0.8	26	4,454	47.4	26	49,359	0.6	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	354	42.8	28	253	30.6	28	2,697	0.9	28	416	50.2	28	4,694	0.6	19			
75-84	1,102	40.6	27	896	33.0	27	9,726	0.9	27	1,346	49.6	27	14,908	0.6	20			
85 and older	2,178	37.2	27	1,703	29.1	27	18,754	0.8	25	2,692	46.0	25	29,757	0.6	18			
Male	1,327	37.6	29	1,101	31.2	29	11,896	0.9	31	1,219	34.6	31	12,989	0.5	16			
Disabled	199	40.4	39	109	22.2	39	1,240	0.8	31	163	33.1	31	1,821	0.6	19			
64 or younger	198	40.7	39	109	22.4	39	1,240	0.8	31	160	32.9	31	1,802	0.6	19			
65-74	0	0.0	0	0	0.0	0	0	0.0	0	3	150.0	0	19	0.3	4			
75-84	1	50.0	55	0	0.0	55	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	1,128	37.2	27	992	32.7	27	10,656	0.9	31	1,056	34.8	31	11,168	0.5	16			
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	221	36.8	28	192	32.0	28	2,122	0.9	30	182	30.3	30	2,040	0.5	16			
75-84	454	37.1	28	419	34.2	28	4,485	0.9	31	403	32.9	31	4,242	0.5	16			
85 and older	453	37.5	26	381	31.5	26	4,049	0.9	31	471	39.0	31	4,886	0.5	15			
Unknown	0	0.0	0	1	100.0	0	5	0.8	8	0	0.0	8	0	0.0	0			

Source: Data for this table are from the MAX 1999 file for Iowa, released by CMS in 9/2003. This table was produced on 06/25/2004.

- a. Table 10B includes the beneficiaries represented by Cell D of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 1999. A total of 7,411 beneficiaries who were in nursing facilities for part of their enrollment and their 63,635 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}
 IOWA, 1999

Beneficiary Characteristics	ANTICONVULSANT					ANTIIDIABETIC					CALCIUM BLOCKERS						
	Users as %					Users as %					Users as %						
	No. of Users	No. of Bene Mos among Residents	Mean No. of Rx	Mean Rx \$	Mean No. of Rx	No. of Users	No. of Bene Mos among Residents	Mean No. of Rx	Mean Rx \$	Mean No. of Rx	No. of Users	No. of Bene Mos among Residents	Mean No. of Rx	Mean Rx \$	No. of Users	No. of Bene Mos among Residents	Mean No. of Rx
All	2,312	17.2 %	1.1	\$45	1.1	3,312	24.6 %	0.9	\$28	0.9	2,383	17.7 %	0.9	\$36	26,086	0.9	\$36
Female	1,535	15.4	1.1	44	1.1	2,432	24.4	0.9	28	0.9	1,851	18.6	0.9	36	20,439	0.9	36
Disabled	305	54.7	1.2	58	1.2	149	26.7	0.9	35	0.9	56	10.0	0.9	44	651	0.9	44
64 or younger	298	55.8	1.2	59	1.2	140	26.2	0.9	36	0.9	54	10.1	0.9	44	627	0.9	44
65-74	5	50.0	1.1	59	1.1	4	40.0	0.7	12	0.7	0	0.0	0.0	0	0	0.0	0
75-84	2	25.0	1.0	36	1.0	3	37.5	1.0	53	1.0	1	12.5	1.0	13	12	1.0	13
85 and older	0	0.0	0.0	0	0.0	2	33.3	0.3	9	0.3	1	16.7	1.1	66	12	1.1	66
Other Eligibles	1,230	13.1	1.0	40	1.0	2,283	24.3	0.9	28	0.9	1,795	19.1	0.9	36	19,788	0.9	36
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	0
65-74	299	36.1	1.1	57	1.1	359	43.4	1.0	33	1.0	157	19.0	0.9	39	1,762	0.9	39
75-84	479	17.7	1.0	39	1.0	903	33.3	0.9	30	0.9	536	19.8	0.9	37	5,846	0.9	37
85 and older	452	7.7	1.0	29	1.0	1,021	17.4	0.8	24	0.8	1,102	18.8	0.9	35	12,180	0.9	35
Male	777	22.0	1.1	47	1.1	880	25.0	0.9	29	0.9	532	15.1	0.9	36	5,647	0.9	36
Disabled	266	54.1	1.3	62	1.3	83	16.9	0.9	33	0.9	42	8.5	0.8	37	468	0.8	37
64 or younger	266	54.6	1.3	62	1.3	83	17.0	0.9	33	0.9	41	8.4	0.8	37	467	0.8	37
65-74	0	0.0	0.0	0	0.0	0	0.0	0.0	0	0.0	1	50.0	2.0	160	1	2.0	160
75-84	0	0.0	0.0	0	0.0	0	0.0	0.0	0	0.0	0	0.0	0.0	0	0	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	0
Other Eligibles	511	16.8	1.0	39	1.0	797	26.3	0.9	28	0.9	490	16.2	0.9	36	5,179	0.9	36
64 or younger	3	300.0	2.9	167	2.9	0	0.0	0.0	0	0.0	0	0.0	0.0	0	0	0.0	0
65-74	181	30.2	1.1	43	1.1	198	33.0	0.9	32	0.9	109	18.2	0.9	40	1,227	0.9	40
75-84	213	17.4	1.0	35	1.0	330	27.0	0.9	29	0.9	213	17.4	0.8	36	2,202	0.8	36
85 and older	114	9.4	0.9	34	0.9	269	22.2	0.8	25	0.8	168	13.9	0.9	33	1,750	0.9	33
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	0

Source: Data for this table are from the MAX 1999 file for Iowa, released by CMS in 9/2003. This table was produced on 06/25/2004.

- a. Table 10C includes the beneficiaries represented by Cell D of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 1999. A total of 7,411 beneficiaries who were in nursing facilities for part of their enrollment and their 63,635 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}
 IOWA, 1999

Beneficiary Characteristics	ANTIANXIETY AGENTS					ANTIASTHMATIC					Bene Mos among All-Year NF Residents		
	Users as %		No. of Bene		Mean	Users as %		No. of Bene		Mean		All-Year NF	
	No. of Users	Residents	NF Residents	Mos among Users		Rx	No. of Users	Residents	NF Residents			Mos among Users	Rx
All	3,784	28.1 %	41,917	0.6	\$21	3,664	27.2 %	40,216	0.6	\$21	13,481	145,919	
Female	2,776	27.9	31,194	0.6	21	2,434	24.5	27,310	0.6	20	9,954	108,613	
Disabled	232	41.6	2,708	0.7	22	163	29.2	1,883	0.8	30	558	6,407	
64 or younger	219	41.0	2,563	0.7	22	156	29.2	1,799	0.8	29	534	6,138	
65-74	5	50.0	49	0.6	13	3	30.0	36	1.5	68	10	109	
75-84	6	75.0	72	0.4	13	1	12.5	12	0.1	2	8	96	
85 and older	2	33.3	24	0.9	27	3	50.0	36	1.0	34	6	64	
Other Eligibles	2,543	27.1	28,481	0.6	21	2,271	24.2	25,427	0.6	20	9,396	102,206	
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0	
65-74	291	35.1	3,221	0.7	25	262	31.6	2,885	0.7	25	828	9,139	
75-84	863	31.8	9,712	0.7	23	746	27.5	8,350	0.6	23	2,712	29,350	
85 and older	1,389	23.7	15,548	0.6	19	1,263	21.6	14,192	0.5	17	5,856	63,717	
Male	1,008	28.6	10,723	0.6	22	1,230	34.9	12,906	0.7	24	3,526	37,301	
Disabled	162	32.9	1,865	0.8	29	152	30.9	1,697	0.7	26	492	5,589	
64 or younger	161	33.1	1,856	0.8	29	150	30.8	1,679	0.7	26	487	5,565	
65-74	1	50.0	9	1.0	29	2	100.0	18	0.3	11	2	10	
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	13	
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	1	
Other Eligibles	846	27.9	8,858	0.6	21	1,078	35.5	11,209	0.7	23	3,034	31,712	
64 or younger	0	0.0	0	0.0	0	1	100.0	12	4.0	86	1	12	
65-74	183	30.5	2,016	0.6	24	189	31.5	2,148	0.7	27	600	6,497	
75-84	340	27.8	3,496	0.6	21	453	37.0	4,537	0.7	24	1,224	12,735	
85 and older	323	26.7	3,346	0.6	18	435	36.0	4,512	0.6	21	1,209	12,468	
Unknown	1	100.0	5	0.4	2	0	0.0	0	0.0	0	1	5	

Source: Data for this table are from the MAX 1999 file for Iowa, released by CMS in 9/2003. This table was produced on 06/25/2004.

a. Table 10D includes the beneficiaries represented by Cell D of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 1999. A total of 7,411 beneficiaries who were in nursing facilities for part of their enrollment and their 63,635 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}
IOWA, 1999

Beneficiary Characteristics	No. of Benes					No. of Bene Mos						
	All	Aged	Disabled	Adults	Children	Unknown	All	Aged	Disabled	Adults	Children	Unknown
All	305,012	34,340	53,919	63,351	153,402	0	2,648,744	346,788	582,716	455,880	1,263,360	0
Age												
5 and younger	65,649	0	1,659	162	63,828	0	516,260	0	16,010	1,279	498,971	0
6-14	68,618	0	4,438	117	64,063	0	617,482	0	49,292	1,006	567,184	0
15-20	34,598	0	3,688	6,652	24,258	0	277,540	0	40,082	47,693	189,765	0
21-44	76,393	0	21,967	53,220	1,206	0	632,061	0	241,930	382,979	7,152	0
45-64	23,012	0	19,785	3,183	44	0	234,736	0	211,653	22,805	278	0
65-74	10,144	8,787	1,343	14	0	0	106,903	93,190	13,623	90	0	0
75-84	12,585	11,855	728	1	1	0	127,826	120,452	7,356	12	6	0
85 and older	14,012	13,698	310	2	2	0	135,931	133,146	2,765	16	4	0
Unknown	1	0	1	0	0	5	0	0	5	0	0	0
Gender												
Female	181,238	25,591	28,209	51,098	76,340	0	1,575,936	262,067	306,661	379,177	628,031	0
Male	123,774	8,749	25,710	12,253	77,062	0	1,072,808	84,721	276,055	76,703	635,329	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	256,586	32,348	47,667	53,377	123,194	0	2,244,395	326,439	517,710	386,979	1,013,267	0
African American	26,366	559	3,670	5,403	16,734	0	242,095	6,167	39,146	43,744	153,038	0
Other/unknown	22,060	1,433	2,582	4,571	13,474	0	162,254	14,182	25,860	25,157	97,055	0
Use of Nursing Facilities												
All year	13,481	12,429	1,051	0	1	0	145,919	133,906	12,001	0	12	0
Part year	7,412	6,414	983	9	6	0	63,673	53,756	9,780	92	45	0
None	284,119	15,497	51,885	63,342	153,395	0	2,439,152	159,126	560,935	455,788	1,263,303	0
Maintenance Assistance Status												
Cash	150,306	7,443	40,457	39,277	63,129	0	1,375,496	84,061	442,679	294,986	553,770	0
Medically needy	11,269	3,457	3,835	3,054	923	0	88,415	33,881	35,200	15,006	4,328	0
Poverty related	74,114	1,085	1,553	10,431	61,045	0	540,928	11,638	15,964	59,305	454,021	0
Other/unknown	69,323	22,355	8,074	10,589	28,305	0	643,905	217,208	88,873	86,583	251,241	0
Dual Status^c												
Full dual, all year	51,466	30,677	20,469	310	10	0	539,946	310,498	227,469	1,928	51	0
Full dual, part year	4,549	2,219	2,309	21	0	0	48,398	23,894	24,277	227	0	0
Non-dual, all year	248,997	1,444	31,141	63,020	153,392	0	2,060,400	12,396	330,970	453,725	1,263,309	0
Managed Care Status												
FFS all year	214,158	34,340	53,363	36,513	89,942	0	1,862,402	346,788	576,599	234,538	704,477	0
FFS part year, with Rx claims	39,481	0	506	13,492	25,483	0	369,172	0	5,652	119,123	244,397	0
FFS part year, no Rx claims	18,472	0	50	4,190	14,232	0	132,080	0	465	26,567	105,048	0
MC all year, with Rx claims	21,988	0	0	6,893	15,095	0	213,592	0	0	63,635	149,957	0
MC all year, no Rx claims	10,913	0	0	2,263	8,650	0	71,498	0	0	12,017	59,481	0

Source: Data for this table are from the MAX 1999 file for Iowa, released by CMS in 9/2003. This table was produced on 06/25/2004.

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

b. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services. The total includes some beneficiaries with unknown basis of eligibility and some whose age categories are not consistent with basis of eligibility.

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

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

APPENDIX TABLE A.2
 MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS
 IOWA, 1999

	Benes and					
	Bene Mos in Cell B of Table 1		Included in Cell C of Table 1		Excluded from Cell C of Table 1	
	No. of Benes	No. of Bene Mos	No. of Benes	No. of Bene Mos	No. of Benes	No. of Bene Mos
All	305,012	2,648,744	272,111	2,094,795	32,901	553,949
FFS all year	214,158	1,862,402	214,158	1,862,402	0	0
FFS part year, with Rx claims	39,481	369,172	39,481	170,094	0	199,078
FFS part year, with no Rx claims	18,472	132,080	18,472	62,299	0	69,781
MC all year, with Rx claims	21,988	213,592	0	0	21,988	213,592
MC all year, with no Rx claims	10,913	71,498	0	0	10,913	71,498

Source: Data for this table are from the MAX 1999 file for Iowa, released by CMS in 9/2003. This table was produced on 06/25/2004.

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