

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

LIST OF TABLES

OVERVIEW OF STUDY POPULATION

TABLE 1. OVERVIEW OF BENEFICIARY SELECTION CRITERIA FOR STUDY POPULATION

FOR ALL MEDICAID BENEFICIARIES

TABLE 2. CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY

TABLE 3. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC

TABLE 4. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC

TABLE 5. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC

TABLE 6. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY

TABLE 7-7D. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP

TABLE 8. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS, BY BENEFICIARY CHARACTERISTIC

TABLE 9. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NF RESIDENTS, BY BRAND STATUS AND THERAPEUTIC CATEGORY

TABLE 10-10D. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NF RESIDENTS, BY TOP 10 DRUG GROUP

APPENDIX TABLE A.1. CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY

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

FOR DUAL ELIGIBLE BENEFICIARIES

TABLE 11. CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY

TABLE 12. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC

TABLE 13. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC

TABLE 14. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC

TABLE 15. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY

TABLE 16-16D. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP

TABLE 17. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS, BY BENEFICIARY CHARACTERISTIC

TABLE 18. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NF RESIDENTS, BY BRAND STATUS AND THERAPEUTIC CATEGORY

APPENDIX TABLE A.3. CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY

APPENDIX TABLE A.4. MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS

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

Inclusion Criteria (1999)	No. of Dual and Non-dual Eligible Benes (Cell)	No. of Dual Eligible Benes (Cell) ^g
1. Benes who were eligible for Medicaid during at least one month ^a	1,712,826 (A)	217,700 (E)
2. Benes who had Medicaid pharmacy benefits during at least one month ^b	1,663,521 (B)	169,122 (F)
3. Benes who had fee-for-service pharmacy benefit coverage during at least one month ^{c, d, e}	1,554,841 (C)	169,092 (G)
4. Benes who were all-year nursing facility residents ^f	60,201 (D)	52,291 (H)

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

- a. MAX data element "Eligible Months Count" was used to determine an individual's Medicaid eligibility. All individuals who had a value greater than zero were considered as beneficiaries and counted in Cell A.
- b. Counts in Cell B were obtained by excluding from Cell A beneficiaries who never had pharmacy benefit coverage during their Medicaid enrollment in 1999 (based on MAX data element "Eligible Restricted Benefits Flag"). Characteristics of beneficiaries represented by Cell B are shown in Appendix Table A.1.
- c. Cell C represents the study population for Tables 2 through 7D. Cell C was obtained by excluding from Cell B beneficiaries who were under MC plans during all months of Medicaid eligibility in 1999, because the MAX files would not include separate prescription drug claims for those beneficiaries. MC plans include HMOs, PHPs, or other MC organizations that provided pharmacy benefits under capitation arrangements. Beneficiaries included are those who were in fee-for-service, PCCM, or PHP plans in selected states. Beneficiaries in PHPs were included if they were in one of 18 states where no PHP in the state provided a pharmacy benefit (see footnote e). For all other states, beneficiaries in PHPs were excluded. For example, if a beneficiary was under fee-for-service, PCCM, or PHPs in one of the 18 states for three months of the year but enrolled in an MC plan for the remaining nine months, only the three months were counted toward the number of benefit months associated with the beneficiary. Therefore, benefit months included represent the benefit months with fee-for-service pharmacy benefits. Beneficiaries and their benefit months included and excluded based on this criterion are shown in Appendix Table A.2.
- d. The total Medicaid pharmacy reimbursement for Illinois in 1999 was \$705,633,571, of which \$8,277,153 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/mmcs699.asp> and at <http://www.cms.hhs.gov/medicaid/managedcare/mmcs99.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 6.1 percent were restricted benefit months without a pharmacy benefit in Illinois, 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}
 ILLINOIS, 1999

Beneficiary Characteristics	No. of Benefes							No. of Bene Mos										
	All	Aged	Disabled	Adults	Children	Other/Unknown	All	Aged	Disabled	Adults	Children	Other/Unknown	All	Aged	Disabled	Adults	Children	Other/Unknown
All	1,554,841	95,553	264,400	338,009	856,878	1	14,181,988	928,304	2,842,455	2,621,568	7,789,660	1	14,181,988	928,304	2,842,455	2,621,568	7,789,660	1
Age																		
5 and younger	377,053	0	4,717	75	372,261	0	3,241,427	0	51,715	477	3,189,235	0	3,241,427	0	51,715	477	3,189,235	0
6-14	388,138	0	19,177	102	368,859	0	3,753,057	0	216,836	490	3,535,731	0	3,753,057	0	216,836	490	3,535,731	0
15-20	170,720	0	15,440	40,845	114,435	0	1,531,074	0	168,682	306,433	1,055,959	0	1,531,074	0	168,682	306,433	1,055,959	0
21-44	368,036	2	91,319	275,434	1,280	1	3,130,917	4	979,524	2,142,973	8,415	1	3,130,917	4	979,524	2,142,973	8,415	1
45-64	122,348	49	100,927	21,348	24	0	1,226,906	131	1,057,042	169,556	177	0	1,226,906	131	1,057,042	169,556	177	0
65-74	49,935	24,840	24,910	185	0	0	521,743	240,306	279,921	1,516	0	0	521,743	240,306	279,921	1,516	0	0
75-84	42,765	36,336	6,419	9	1	0	433,833	361,371	72,379	71	12	0	433,833	361,371	72,379	71	12	0
85 and older	35,818	34,326	1,491	1	0	0	342,855	326,492	16,356	7	0	0	342,855	326,492	16,356	7	0	0
Unknown	28	0	0	10	18	0	176	0	0	45	131	0	176	0	0	45	131	0
Gender																		
Female	932,212	69,627	140,705	297,644	424,235	1	8,426,622	685,711	1,531,219	2,348,847	3,860,844	1	8,426,622	685,711	1,531,219	2,348,847	3,860,844	1
Male	622,629	25,926	123,695	40,365	432,643	0	5,755,366	242,593	1,311,236	272,721	3,928,816	0	5,755,366	242,593	1,311,236	272,721	3,928,816	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Race																		
White	603,843	63,604	116,147	137,741	286,351	0	5,538,829	603,707	1,228,398	1,071,484	2,635,240	0	5,538,829	603,707	1,228,398	1,071,484	2,635,240	0
African American	640,848	14,247	121,559	126,039	379,002	1	5,991,724	139,381	1,327,844	1,046,700	3,477,798	1	5,991,724	139,381	1,327,844	1,046,700	3,477,798	1
Other/unknown	310,150	17,702	26,694	74,229	191,525	0	2,651,435	185,216	286,213	503,384	1,676,622	0	2,651,435	185,216	286,213	503,384	1,676,622	0
Use of Nursing Facilities																		
All year	60,201	39,570	20,611	9	11	0	626,459	393,874	232,467	37	81	0	626,459	393,874	232,467	37	81	0
Part year	19,578	10,892	8,379	98	209	0	184,206	93,212	87,914	880	2,200	0	184,206	93,212	87,914	880	2,200	0
None	1,475,062	45,091	235,410	337,902	856,658	1	13,371,323	441,218	2,522,074	2,620,651	7,787,379	1	13,371,323	441,218	2,522,074	2,620,651	7,787,379	1
Maintenance Assistance Status																		
Cash	566,079	22,199	152,160	118,465	273,255	0	5,454,535	250,311	1,704,170	1,011,745	2,488,309	0	5,454,535	250,311	1,704,170	1,011,745	2,488,309	0
Medically needy	320,579	68,979	100,758	146,044	4,798	0	2,819,400	639,469	1,019,808	1,140,568	19,555	0	2,819,400	639,469	1,019,808	1,140,568	19,555	0
Poverty-related	548,107	3,073	6,192	62,676	476,166	0	4,822,587	31,473	66,723	382,687	4,341,704	0	4,822,587	31,473	66,723	382,687	4,341,704	0
Other/unknown	120,076	1,302	5,290	10,824	102,659	1	1,085,466	7,051	51,754	86,568	940,092	1	1,085,466	7,051	51,754	86,568	940,092	1
Dual Medicare Status^c																		
Full dual, all year	151,261	75,896	72,817	2,466	82	0	1,531,954	728,013	783,235	19,924	782	0	1,531,954	728,013	783,235	19,924	782	0
Full dual, part year	17,831	6,206	11,045	580	0	0	194,560	66,518	121,870	6,172	0	0	194,560	66,518	121,870	6,172	0	0
Non-dual, all year	1,385,749	13,451	180,538	334,963	856,796	1	12,455,474	133,773	1,937,350	2,595,472	7,788,878	1	12,455,474	133,773	1,937,350	2,595,472	7,788,878	1
Managed Care Status																		
FFS all year	1,435,278	95,468	263,292	307,098	769,419	1	13,479,455	927,743	2,834,700	2,445,295	7,271,716	1	13,479,455	927,743	2,834,700	2,445,295	7,271,716	1
FFS part year, with Rx claims	65,626	67	843	20,107	44,609	0	447,629	423	6,167	130,704	310,335	0	447,629	423	6,167	130,704	310,335	0
FFS part year, no Rx claims	53,937	18	265	10,804	42,850	0	254,904	138	1,588	45,569	207,609	0	254,904	138	1,588	45,569	207,609	0

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

Table 2

All Medicaid Beneficiaries

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

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

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

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

TABLE 3
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC^{a, b}
 ILLINOIS, 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	60.9 %	10.3	\$449	\$44	\$3,945	11.4 %	\$27	1,554,841
Age								
5 and younger	57.7	2.8	66	23	1,589	4.1	8	377,053
6-14	48.8	2.8	112	40	976	11.4	6	388,138
15-20	53.8	3.6	157	43	2,369	6.6	7	170,720
21-44	65.8	10.3	554	54	4,695	11.8	20	368,036
45-64	78.3	34.8	1,666	48	11,328	14.7	105	122,348
65-74	81.4	38.1	1,545	41	9,979	15.5	124	49,935
75-84	85.7	42.4	1,587	38	12,953	12.3	121	42,765
85 and older	90.7	42.4	1,384	33	16,354	8.5	124	35,818
Unknown	50.0	1.7	28	16	2,340	1.2	6	28
Basis of Eligibility								
Aged	84.3	38.5	1,388	36	12,579	11.0	111	95,553
Disabled	77.9	30.9	1,643	53	12,295	13.4	86	264,400
Adults	62.8	5.6	189	34	1,947	9.7	11	338,009
Children	52.3	2.7	78	29	1,194	6.5	6	856,878
Unknown	0.0	0.0	0	0	0	0.0	0	1
Gender								
Female	64.0	11.5	454	39	3,803	11.9	31	932,212
Male	56.3	8.5	441	52	4,159	10.6	21	622,629
Unknown	0.0	0.0	0	0	0	0.0	0	0
Race								
White	67.8	15.5	689	45	5,327	12.9	34	603,843
African American	56.3	7.5	322	43	3,434	9.4	24	640,848
Other/unknown	56.9	6.0	242	40	2,312	10.5	19	310,150
Use of Nursing Facilities								
Entire year	91.2	55.1	2,301	42	29,414	7.8	151	60,201
Part year	92.8	46.2	2,146	47	28,338	7.6	128	19,578
None	59.2	8.0	350	44	2,582	13.6	21	1,475,062
Maintenance Assistance Status								
Cash	65.0	11.6	516	45	3,508	14.7	34	566,079
Medically needy	70.1	22.5	1,013	45	9,525	10.6	57	320,579
Poverty related	53.5	2.9	87	30	1,171	7.4	7	548,107
Other/unknown	50.8	5.6	272	48	3,777	7.2	12	120,076

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

Table 3

All Medicaid Beneficiaries

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

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

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

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

TABLE 4
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a,b}
 ILLINOIS, 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				1.0 %
All	1.1	\$49	11.4 %	39.1 %	43.9 %	5.1 %	6.9 %	4.0 %	1.0 %	\$433	1,554,841	14,181,988
Age												
5 and younger	0.3	8	4.1	42.3	54.8	2.2	0.6	0.1	0.0	185	377,053	3,241,427
6-14	0.3	12	11.4	51.2	45.1	2.3	1.3	0.1	0.0	101	388,138	3,753,057
15-20	0.4	18	6.6	46.2	48.5	3.2	1.7	0.3	0.0	264	170,720	1,531,074
21-44	1.2	65	11.8	34.2	46.6	7.7	7.8	3.0	0.7	552	368,036	3,130,917
45-64	3.5	166	14.7	21.7	21.8	11.2	24.2	16.3	4.8	1,130	122,348	1,226,906
65-74	3.7	148	15.5	18.6	18.8	11.5	27.0	19.2	5.0	955	49,935	521,743
75-84	4.2	156	12.3	14.3	15.0	10.9	29.8	23.7	6.2	1,277	42,765	433,833
85 and older	4.4	145	8.5	9.3	12.5	11.3	35.1	26.5	5.3	1,709	35,818	342,855
Unknown	0.3	4	1.2	50.0	50.0	0.0	0.0	0.0	0.0	372	28	176
Basis of Eligibility												
Aged	4.0	143	11.0	15.7	15.8	11.2	29.8	22.1	5.3	1,295	95,553	928,304
Disabled	2.9	153	13.4	22.1	27.8	10.8	21.7	13.8	3.8	1,144	264,400	2,842,455
Adults	0.7	24	9.7	37.2	51.2	6.3	4.2	0.9	0.1	251	338,009	2,621,568
Children	0.3	9	6.5	47.7	49.1	2.2	0.9	0.1	0.0	131	856,878	7,789,660
Unknown	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	0	1	1
Gender												
Female	1.3	50	11.9	36.0	45.1	5.6	7.6	4.5	1.2	421	932,212	8,426,622
Male	0.9	48	10.6	43.7	42.2	4.4	5.9	3.1	0.7	450	622,629	5,755,366
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	1.7	75	12.9	32.2	42.5	6.4	10.1	6.8	2.0	581	603,843	5,538,829
African American	0.8	34	9.4	43.7	43.7	4.4	5.3	2.4	0.5	367	640,848	5,991,724
Other/unknown	0.7	28	10.5	43.1	47.0	4.0	4.2	1.6	0.2	271	310,150	2,651,435
Use of Nursing Facilities												
Entire year	5.3	221	7.8	8.8	7.8	8.7	32.5	32.7	9.3	2,827	60,201	626,459
Part year	4.9	228	7.6	7.2	13.3	11.1	32.5	27.5	8.3	3,012	19,578	184,206
None	0.9	39	13.6	40.8	45.8	4.9	5.5	2.5	0.6	285	1,475,062	13,371,323
Maintenance Assistance Status												
Cash	1.2	54	14.7	35.0	45.7	6.2	8.2	4.0	0.9	364	566,079	5,454,535
Medically needy	2.6	115	10.6	29.9	31.3	8.2	15.9	11.4	3.1	1,083	320,579	2,819,400
Poverty related	0.3	10	7.4	46.5	50.0	2.3	1.0	0.2	0.0	133	548,107	4,822,587
Other/unknown	0.6	30	7.2	49.2	41.2	4.2	3.8	1.2	0.4	418	120,076	1,085,466

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

Table 4

All Medicaid Beneficiaries

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

TABLE 5
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC^{a, b, c}
 ILLINOIS, 1999

Beneficiary Characteristics	All Rx		Patented Brand-Name Drugs		Off-Patent Brand-Name Drugs		Generic Drugs	
	No. of Rx	Rx \$	No. of Rx	Rx \$	No. of Rx	Rx \$	No. of Rx	Rx \$
All	1.1	\$49	0.4	\$31	0.2	\$8	0.6	\$9
		\$ per Rx		\$ per Rx		\$ per Rx		\$ per Rx
Age								
5 and younger	0.3	8	0.1	5	0.0	0	0.2	2
6-14	0.3	12	0.1	7	0.0	1	0.2	3
15-20	0.4	18	0.1	12	0.0	2	0.2	3
21-44	1.2	65	0.4	44	0.2	10	0.6	10
45-64	3.5	166	1.2	103	0.5	30	1.6	27
65-74	3.7	148	1.2	86	0.6	28	1.6	26
75-84	4.2	156	1.3	87	0.8	30	1.9	31
85 and older	4.4	145	1.2	76	0.8	28	2.1	33
Unknown	0.3	4	0.0	1	0.0	0	0.2	3
Basis of Eligibility								
Aged	4.0	143	1.2	79	0.7	27	1.8	29
Disabled	2.9	153	1.0	98	0.4	26	1.3	24
Adults	0.7	24	0.2	15	0.1	4	0.4	5
Children	0.3	9	0.1	5	0.0	1	0.2	2
Unknown	0.0	0	0.0	0	0.0	0	0.0	0
Gender								
Female	1.3	50	0.4	31	0.2	8	0.6	9
Male	0.9	48	0.3	31	0.1	7	0.5	8
Unknown	0.0	0	0.0	0	0.0	0	0.0	0
Race								
White	1.7	75	0.6	46	0.3	12	0.8	13
African American	0.8	34	0.2	22	0.1	6	0.4	6
Other/unknown	0.7	28	0.2	18	0.1	4	0.4	5
Use of Nursing Facilities								
Entire year	5.3	221	1.6	124	1.0	45	2.5	45
Part year	4.9	228	1.6	139	0.8	36	2.3	44
None	0.9	39	0.3	25	0.1	6	0.4	7
Maintenance Assistance								
Status								
Cash	1.2	54	0.4	34	0.2	8	0.6	9
Medically needy	2.6	115	0.8	70	0.4	21	1.2	20
Poverty related	0.3	10	0.1	6	0.0	1	0.2	2
Other/unknown	0.6	30	0.2	20	0.1	4	0.3	5

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

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

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

Table 5

All Medicaid Beneficiaries

c. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In Illinois, 4.8 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}
 ILLINOIS, 1999

Therapeutic Category	No. of Rx per Bene Mo among Users				\$ per Bene Mo among Users				Total Rx \$	Total No. of Rx	No.	As % of All Benes	No. of Bene Mos
	Patented		Off-Patent		Patented		Off-Patent						
	Total	Brand-Name	Generic	Brand-Name	Total	Brand-Name	Generic	Brand-Name					
Anti-infective Agents	0.3	0.1	0.0	0.1	\$12	\$10	\$0	\$2	\$45	1,799,560	655,405	42.2 %	6,902,824
Biologics	0.1	0.1	0.0	0.1	58	46	1	11	474	7,055	5,310	0.3	57,506
Antineoplastic Agents	0.5	0.2	0.1	0.2	114	81	24	8	223	45,731	8,569	0.6	89,889
Endocrine/Metabolic Drugs	0.5	0.3	0.1	0.2	18	13	3	2	34	1,313,052	228,973	14.7	2,415,763
Cardiovascular Agents	1.4	0.4	0.3	0.6	43	21	14	8	31	2,778,218	187,867	12.1	2,015,153
Respiratory Agents	0.4	0.2	0.0	0.2	14	10	0	4	31	1,494,575	312,891	20.1	3,343,302
Gastrointestinal Agents	0.5	0.2	0.1	0.3	36	22	7	7	65	859,975	144,686	9.3	1,564,037
Genitourinary Agents	0.3	0.1	0.0	0.1	8	5	0	3	30	248,257	87,502	5.6	913,451
CNS Drugs	1.0	0.4	0.2	0.4	70	47	15	9	69	2,241,744	203,223	13.1	2,194,122
Stimulants/Anti-obesity/Anorexia	0.6	0.1	0.1	0.4	21	4	4	13	35	174,905	26,775	1.7	293,886
Miscellaneous Psychological/Neurological Agents	0.6	0.5	0.0	0.1	63	60	0	3	108	39,953	6,389	0.4	68,697
Analgesics and Anesthetics	0.4	0.1	0.0	0.3	11	6	2	3	30	1,365,293	342,677	22.0	3,658,894
Neuromuscular Agents	0.8	0.3	0.1	0.4	40	27	5	8	49	983,000	108,232	7.0	1,186,860
Nutritional Products	0.5	0.0	0.2	0.3	11	1	4	6	24	481,686	105,176	6.8	1,045,641
Hematological Agents	0.7	0.1	0.2	0.4	61	45	7	9	91	371,400	52,140	3.4	553,497
Topical Products	0.3	0.1	0.0	0.2	7	3	1	2	25	1,051,452	364,427	23.4	3,899,996
Miscellaneous Products	0.3	0.1	0.0	0.1	36	26	7	3	132	80,519	27,490	1.8	293,985
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	13	0	0	0	38	699,573	192,243	12.4	2,085,476
TOTAL NO. OF RX AND RX \$	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	16,035,948	n.a.	n.a.	n.a.

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

- a. Table 6 includes the beneficiaries represented by Cell C of Table 1. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 1999. A beneficiary who used drugs from two or more categories was counted as a user for each category. Therefore, the sum of users across categories may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
- c. For information about these therapeutic categories, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).
- d. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In Illinois, 4.8 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}
 ILLINOIS, 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	\$88,109,092	103,218	6.6 %	1,147,013	0.7	\$110	\$77
ANTIDEPRESSANTS	48,636,509	153,141	9.8	1,663,201	0.5	58	29
ULCER DRUGS	46,424,808	136,729	8.8	1,493,318	0.4	78	31
ANTICONVULSANT	40,650,426	81,668	5.3	905,964	0.8	59	45
ANTIASTHMATIC	29,719,279	275,554	17.7	2,960,200	0.3	30	10
ANTIVIRAL	27,212,672	24,230	1.6	264,661	0.4	284	103
ANTIHYPERTENSIVE	24,912,994	113,167	7.3	1,234,127	0.6	34	20
ANTIDIABETIC	24,095,319	84,249	5.4	911,822	0.7	39	26
DERMATOLOGICAL	22,358,407	466,977	30.0	5,072,744	0.2	23	4
CALCIUM BLOCKERS	22,275,320	65,300	4.2	715,740	0.7	48	31

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

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

TABLE 7A
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR TOP 10 DRUG GROUPS COMBINED
 AND FIRST AND SECOND GROUPS SEPARATELY, BY SEX, BOE, AND AGE^{a,b,c}
 ILLINOIS, 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	6,826,762	\$374,394,826	103,218	6.6 %	1,147,013	0.7	\$77	153,141	9.8 %	1,663,201	0.5	\$29					
Female	4,326,303	221,509,279	58,714	6.3	650,451	0.6	64	107,393	11.5	1,164,593	0.5	29					
Disabled	2,350,754	139,815,976	35,338	25.1	405,014	0.7	83	53,653	38.1	609,896	0.5	32					
5 and younger	6,849	237,898	15	0.8	174	0.4	25	14	0.7	153	0.5	17					
6-14	25,093	1,248,744	278	4.1	3,273	0.4	43	439	6.5	5,099	0.4	20					
15-20	25,655	1,636,032	560	9.5	6,457	0.5	70	710	12.1	8,077	0.4	28					
21-44	584,233	42,442,988	13,657	31.0	156,825	0.7	87	18,329	41.6	208,532	0.5	32					
45-64	1,190,081	69,057,055	15,311	26.2	174,840	0.8	86	27,346	46.7	309,484	0.6	33					
65-74	384,350	18,987,665	3,732	21.7	43,067	0.8	75	5,257	30.5	60,568	0.6	28					
75-84	110,850	5,192,216	1,458	28.8	16,761	0.7	62	1,305	25.8	15,109	0.6	30					
85 and older	23,643	1,013,378	327	25.6	3,617	0.6	46	253	19.8	2,874	0.6	32					
Other Eligibles	1,975,543	81,693,238	23,376	3.0	245,437	0.4	33	53,739	6.8	554,693	0.5	26					
5 and younger	135,319	2,421,497	332	0.2	3,627	0.1	8	200	0.1	2,162	0.2	9					
6-14	155,702	4,911,474	1,564	0.9	17,519	0.4	31	3,167	1.7	35,317	0.4	19					
15-20	88,735	3,783,078	1,926	2.0	20,625	0.3	30	3,942	4.0	42,369	0.3	20					
21-44	375,603	17,694,962	5,283	2.2	53,992	0.2	17	23,651	9.7	238,830	0.3	20					
45-64	79,311	3,897,848	507	3.4	5,170	0.3	23	3,005	20.3	30,104	0.4	25					
65-74	207,755	9,659,903	2,040	12.9	21,549	0.6	51	3,568	22.5	38,086	0.5	29					
75-84	458,235	20,221,275	5,488	21.5	58,115	0.6	46	7,800	30.5	81,957	0.7	36					
85 and older	474,883	19,103,201	6,236	22.1	64,840	0.5	33	8,406	29.8	85,868	0.7	37					
Male	2,500,459	152,885,547	44,504	7.1	496,562	0.8	93	45,748	7.3	498,608	0.5	30					
Disabled	1,594,295	117,459,184	33,716	27.3	384,180	0.9	107	28,088	22.7	315,519	0.5	32					
5 and younger	11,367	427,882	18	0.6	216	0.5	43	29	1.0	347	0.5	17					
6-14	51,582	2,523,744	966	7.8	11,314	0.5	53	1,178	9.5	13,830	0.4	20					
15-20	38,019	2,658,710	1,033	10.8	11,656	0.6	81	900	9.4	10,150	0.5	29					
21-44	592,150	54,750,584	17,276	36.5	197,050	0.9	115	12,210	25.8	137,319	0.5	33					
45-64	706,883	47,372,772	11,828	27.9	134,029	0.9	109	11,597	27.4	129,125	0.6	33					
65-74	160,223	8,089,900	2,019	26.3	23,340	0.9	82	1,828	23.8	20,852	0.6	33					
75-84	29,636	1,436,242	505	37.1	5,779	0.8	70	304	22.4	3,430	0.7	39					
85 and older	4,435	199,350	71	32.9	796	0.8	58	42	19.4	466	0.6	37					
Other Eligibles	906,162	35,426,348	10,788	2.2	112,382	0.5	46	17,660	3.5	183,089	0.5	25					
5 and younger	161,299	3,070,580	461	0.2	4,934	0.2	11	298	0.2	3,253	0.3	9					
6-14	199,258	7,174,394	2,971	1.6	33,225	0.5	46	5,512	3.0	61,214	0.4	19					
15-20	63,809	3,322,589	1,411	2.5	15,211	0.5	62	2,386	4.2	25,587	0.4	27					
21-44	46,162	2,593,367	581	1.8	5,514	0.3	32	2,603	7.9	24,481	0.3	19					
45-64	26,545	1,360,001	161	2.4	1,474	0.3	31	813	12.3	7,656	0.4	24					
65-74	123,813	5,741,330	1,356	14.8	13,725	0.6	57	1,770	19.3	18,271	0.6	31					
75-84	187,107	8,213,689	2,387	22.2	24,214	0.6	48	2,671	24.8	27,065	0.6	36					
85 and older	98,169	3,950,398	1,460	23.9	14,085	0.5	34	1,607	26.4	15,562	0.7	36					
Unknown	8	80	0	0.0	0	0.0	0	1	3.6	4	0.3	2					

All Medicaid Beneficiaries

Table 7A

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

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

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

c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 1999. For information about these drug groups, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_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 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}
 ILLINOIS, 1999

Beneficiary Characteristics	ULCER DRUGS					ANTICONVULSANT					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	136,729	8.8 %	1,493,318	0.4	\$31	81,668	5.3 %	905,964	0.8	\$45	275,554	17.7 %	2,960,200	0.3	\$10
Female	96,376	10.3	1,055,531	0.4	31	45,168	4.8	499,400	0.7	41	164,405	17.6	1,768,481	0.3	11
Disabled	45,815	32.6	524,592	0.4	34	29,988	21.3	342,032	0.8	48	57,120	40.6	652,751	0.5	16
5 and younger	134	7.0	1,513	0.4	23	158	8.2	1,810	0.6	28	888	46.1	10,209	0.3	9
6-14	209	3.1	2,461	0.4	30	803	11.9	9,348	0.8	48	1,756	26.0	20,532	0.3	12
15-20	438	7.4	5,035	0.3	20	793	13.5	9,151	0.8	56	1,255	21.3	14,574	0.3	10
21-44	10,707	24.3	123,196	0.3	29	12,199	27.7	139,244	0.8	55	15,350	34.9	176,370	0.4	13
45-64	23,813	40.7	271,294	0.4	35	12,557	21.4	142,670	0.8	45	27,917	47.7	317,295	0.5	17
65-74	7,781	45.2	89,942	0.4	36	2,644	15.3	30,315	0.8	37	7,725	44.8	88,478	0.5	18
75-84	2,212	43.7	25,317	0.5	38	707	14.0	8,124	0.9	31	1,863	36.8	21,150	0.5	16
85 and older	521	40.9	5,834	0.5	38	127	10.0	1,370	0.9	28	366	28.7	4,143	0.4	12
Other Eligibles	50,561	6.4	530,939	0.4	28	15,180	1.9	157,368	0.6	27	107,283	13.6	1,115,716	0.3	8
5 and younger	1,257	0.7	12,168	0.2	11	409	0.2	4,389	0.5	21	27,758	15.3	287,877	0.2	3
6-14	1,729	0.9	19,493	0.2	10	1,538	0.8	16,980	0.6	31	18,917	10.3	207,220	0.2	6
15-20	3,090	3.1	33,254	0.1	9	1,239	1.3	13,255	0.5	33	9,666	9.8	102,013	0.2	6
21-44	16,323	6.7	169,021	0.2	17	4,667	1.9	46,538	0.4	24	30,457	12.5	306,531	0.3	8
45-64	2,485	16.8	25,484	0.3	27	592	4.0	5,958	0.5	29	3,270	22.1	33,054	0.4	13
65-74	5,364	33.8	58,714	0.4	32	1,507	9.5	15,923	0.7	29	3,778	23.8	40,029	0.5	17
75-84	9,775	38.2	105,343	0.5	39	2,940	11.5	31,089	0.8	27	7,020	27.4	74,144	0.5	18
85 and older	10,538	37.3	107,462	0.6	43	2,288	8.1	23,236	0.8	24	6,417	22.7	64,848	0.5	14
Male	40,353	6.5	437,787	0.4	32	36,500	5.9	406,564	0.8	49	111,149	17.9	1,191,719	0.3	9
Disabled	24,282	19.6	274,089	0.4	34	27,919	22.6	317,145	0.8	54	30,993	25.1	349,766	0.5	15
5 and younger	199	7.1	2,268	0.5	24	276	9.9	3,187	0.7	38	1,549	55.5	17,884	0.3	10
6-14	337	2.7	3,970	0.4	33	1,413	11.4	16,522	0.7	41	3,603	29.0	42,324	0.4	12
15-20	402	4.2	4,634	0.3	29	1,246	13.0	14,259	0.8	55	1,690	17.7	19,479	0.4	12
21-44	7,925	16.8	90,024	0.4	32	13,420	28.4	152,704	0.9	61	7,762	16.4	88,110	0.4	13
45-64	12,020	28.4	134,426	0.4	35	9,741	23.0	109,713	0.9	51	12,643	29.8	140,204	0.5	17
65-74	2,779	36.2	31,715	0.5	38	1,514	19.7	17,304	0.9	39	3,192	41.6	35,617	0.6	18
75-84	537	39.5	6,103	0.6	41	270	19.9	3,012	1.0	37	489	36.0	5,412	0.6	17
85 and older	83	38.4	949	0.6	38	39	18.1	444	0.9	37	65	30.1	736	0.5	11
Other Eligibles	16,071	3.2	163,698	0.4	29	8,581	1.7	89,419	0.6	30	80,156	16.1	841,953	0.3	7
5 and younger	1,558	0.8	15,044	0.2	11	553	0.3	5,823	0.5	18	38,258	20.1	396,545	0.2	4
6-14	1,414	0.8	15,831	0.2	12	2,668	1.4	29,477	0.6	29	24,985	13.4	274,525	0.2	7
15-20	1,071	1.9	11,625	0.2	12	1,203	2.1	13,115	0.6	41	5,297	9.3	56,824	0.3	7
21-44	2,314	7.0	21,759	0.3	25	895	2.7	7,975	0.5	30	2,360	7.2	21,433	0.3	10
45-64	917	13.9	8,827	0.3	28	241	3.6	2,361	0.5	32	839	12.7	8,000	0.4	14
65-74	2,770	30.2	29,445	0.4	35	1,036	11.3	10,726	0.8	30	2,745	29.9	28,432	0.5	19
75-84	3,810	35.4	39,478	0.5	39	1,401	13.0	14,211	0.8	30	3,809	35.4	38,304	0.6	19
85 and older	2,217	36.4	21,689	0.6	41	584	9.6	5,731	0.8	26	1,863	30.6	17,890	0.5	17
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	7.1	14	0.1	1

Table 7B
 All Medicaid Beneficiaries

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

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

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

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

Beneficiary Characteristics	ANTIVIRAL				ANTIHYPERTENSIVE				ANTIDIABETIC						
	No. of Users	Users as % of All Mos among Benes	No. of Bene Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Mos among Benes	No. of Bene Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Mos among Benes	No. of Bene Users	Mean No. of Rx	Mean Rx \$
All	24,230	1.6 %	264,661	0.4	\$103	113,167	7.3 %	1,234,127	0.6	\$20	84,249	5.4 %	911,822	0.7	\$26
Female	13,094	1.4	142,881	0.3	70	73,315	7.9	801,199	0.6	20	60,328	6.5	656,200	0.7	27
Disabled	5,595	4.0	64,019	0.4	111	38,402	27.3	437,524	0.6	21	34,734	24.7	393,904	0.7	29
5 and younger	34	1.8	353	0.5	43	51	2.6	596	0.6	10	8	0.4	96	1.0	72
6-14	98	1.5	1,149	0.5	94	234	3.5	2,721	0.6	15	49	0.7	566	0.6	27
15-20	98	1.7	1,139	0.2	40	143	2.4	1,693	0.5	17	95	1.6	1,093	0.7	26
21-44	2,965	6.7	33,829	0.4	122	5,140	11.7	58,856	0.5	17	4,541	10.3	51,880	0.6	28
45-64	2,035	3.5	23,364	0.4	115	21,293	36.4	240,650	0.6	21	20,178	34.5	226,757	0.7	31
65-74	277	1.6	3,164	0.2	34	8,648	50.2	99,893	0.6	22	7,847	45.5	90,506	0.7	29
75-84	74	1.5	858	0.1	8	2,367	46.8	27,221	0.6	23	1,741	34.4	19,988	0.7	25
85 and older	14	1.1	163	0.1	6	526	41.3	5,894	0.6	20	275	21.6	3,018	0.7	18
Other Eligibles	7,499	0.9	78,862	0.2	36	34,913	4.4	363,675	0.6	19	25,594	3.2	262,296	0.7	23
5 and younger	772	0.4	8,378	0.2	40	210	0.1	2,266	0.4	7	48	0.0	520	0.5	15
6-14	768	0.4	8,563	0.2	43	1,151	0.6	12,684	0.6	8	354	0.2	3,878	0.8	29
15-20	866	0.9	9,172	0.2	20	411	0.4	4,401	0.4	9	530	0.5	5,495	0.6	24
21-44	3,683	1.5	37,533	0.2	47	5,828	2.4	58,281	0.4	12	5,203	2.1	50,295	0.5	21
45-64	240	1.6	2,470	0.3	85	2,447	16.5	23,974	0.5	19	2,074	14.0	19,979	0.6	27
65-74	222	1.4	2,488	0.2	23	5,786	36.5	62,641	0.6	21	4,802	30.3	51,142	0.7	25
75-84	382	1.5	4,238	0.1	8	9,865	38.6	105,882	0.7	22	7,513	29.4	79,913	0.7	24
85 and older	566	2.0	6,020	0.1	8	9,215	32.6	93,546	0.7	22	5,070	18.0	51,074	0.7	19
Male	11,136	1.8	121,780	0.5	142	39,852	6.4	432,928	0.6	20	23,921	3.8	255,622	0.7	26
Disabled	8,781	7.1	96,705	0.5	169	23,650	19.1	264,672	0.6	21	15,171	12.3	168,420	0.7	27
5 and younger	38	1.4	432	0.3	55	83	3.0	970	0.6	8	3	0.1	36	0.6	23
6-14	82	0.7	969	0.4	84	833	6.7	9,652	0.6	10	49	0.4	584	0.7	30
15-20	73	0.8	822	0.3	73	268	2.8	3,045	0.5	14	90	0.9	1,034	0.8	30
21-44	5,573	11.8	61,103	0.5	167	5,363	11.3	60,061	0.5	18	3,277	6.9	36,813	0.6	25
45-64	2,863	6.8	31,701	0.6	186	13,231	31.2	146,765	0.6	22	9,089	21.4	99,799	0.7	28
65-74	139	1.8	1,523	0.3	81	3,233	42.1	36,882	0.6	25	2,333	30.4	26,405	0.7	27
75-84	12	0.9	143	0.2	8	550	40.4	6,270	0.7	24	298	21.9	3,376	0.7	22
85 and older	1	0.5	12	0.1	2	89	41.2	1,027	0.7	29	32	14.8	373	0.7	22
Other Eligibles	2,355	0.5	25,075	0.2	35	16,202	3.2	168,256	0.6	19	8,750	1.8	87,202	0.7	23
5 and younger	744	0.4	8,098	0.2	16	457	0.2	4,938	0.5	7	114	0.1	1,244	0.5	18
6-14	595	0.3	6,524	0.2	29	3,112	1.7	34,465	0.6	8	310	0.2	3,327	0.8	27
15-20	219	0.4	2,448	0.2	26	470	0.8	5,128	0.5	12	246	0.4	2,592	0.8	32
21-44	314	1.0	2,882	0.3	111	1,120	3.4	10,058	0.5	17	980	3.0	8,626	0.6	24
45-64	86	1.3	839	0.4	105	1,060	16.0	9,841	0.6	21	937	14.2	8,736	0.6	26
65-74	124	1.4	1,359	0.2	39	3,467	37.8	36,858	0.6	23	2,289	25.0	24,056	0.7	23
75-84	170	1.6	1,830	0.1	14	4,428	41.1	46,297	0.6	24	2,802	26.0	28,484	0.7	23
85 and older	103	1.7	1,095	0.1	7	2,088	34.2	20,671	0.7	24	1,072	17.6	10,137	0.7	19
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Table 7C
 All Medicaid Beneficiaries

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

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

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

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

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

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

Beneficiary Characteristics	DERMATOLOGICAL				CALCIUM BLOCKERS				Mean Rx \$	Mean No. of Rx	Users as % of All Benes	No. of Users	No. of Mos among Users	No. of Bene Users	Mean Rx \$	Mean No. of Rx	Users as % of All Benes	No. of Users	No. of Mos among Users	No. of Bene Users	No. of Bene Mos
	No. of Users	Users as % of All Benes	No. of Bene Users	Mean No. of Rx	Mean Rx \$	Mean No. of Rx	Users as % of All Benes	No. of Users													
All	466,977	30.0 %	5,072,744	0.2	\$4	65,300	4.2 %	715,740	0.7	\$31	1,554,841	14,181,988									
Female	295,630	31.7	3,208,176	0.2	5	47,034	5.0	516,789	0.7	31	932,197	8,426,520									
Disabled	71,716	51.0	831,454	0.2	6	24,755	17.6	282,948	0.7	34	140,705	1,531,219									
5 and younger	787	40.9	9,078	0.1	3	2	0.1	24	0.5	25	1,925	20,983									
6-14	2,201	32.6	25,924	0.2	3	22	0.3	253	0.5	32	6,747	76,250									
15-20	2,046	34.7	23,903	0.1	3	53	0.9	621	0.5	36	5,892	64,733									
21-44	19,730	44.8	230,093	0.2	5	2,864	6.5	32,736	0.5	28	44,027	480,177									
45-64	30,774	52.6	355,715	0.2	6	13,771	23.5	156,197	0.7	34	58,547	622,869									
65-74	10,938	63.5	127,420	0.3	7	5,962	34.6	69,063	0.7	35	17,233	194,979									
75-84	3,901	77.1	44,551	0.3	7	1,696	33.5	19,625	0.7	35	5,059	57,282									
85 and older	1,339	105.0	14,770	0.3	9	385	30.2	4,429	0.7	30	1,275	13,946									
Other Eligibles	223,911	28.3	2,376,700	0.2	4	22,279	2.8	233,841	0.6	28	791,492	6,895,301									
5 and younger	52,266	28.8	543,679	0.1	2	26	0.0	267	0.3	11	181,787	1,557,567									
6-14	40,038	21.9	443,885	0.1	2	55	0.0	636	0.3	16	183,146	1,754,706									
15-20	18,492	18.8	199,158	0.1	3	360	0.4	3,646	0.2	6	98,317	842,889									
21-44	43,595	17.9	448,222	0.2	3	3,782	1.6	38,180	0.4	19	243,775	1,932,230									
45-64	3,578	24.2	37,520	0.2	4	1,524	10.3	15,029	0.6	29	14,806	121,700									
65-74	8,041	50.7	89,070	0.3	7	3,810	24.0	41,517	0.7	30	15,851	155,639									
75-84	22,951	89.7	249,708	0.3	8	6,717	26.3	72,654	0.7	31	25,581	259,050									
85 and older	34,950	123.8	365,458	0.3	8	6,005	21.3	61,912	0.8	30	28,229	271,520									
Male	171,347	27.5	1,864,568	0.2	4	18,266	2.9	198,951	0.6	32	622,616	5,755,292									
Disabled	48,825	39.5	561,890	0.2	6	11,957	9.7	134,056	0.6	33	123,695	1,311,236									
5 and younger	1,096	39.3	12,810	0.1	3	4	0.1	42	0.3	9	2,792	30,732									
6-14	3,503	28.2	41,191	0.1	3	24	0.2	283	0.5	27	12,430	140,586									
15-20	2,310	24.2	26,975	0.2	4	66	0.7	745	0.4	28	9,548	103,949									
21-44	15,506	32.8	179,331	0.2	7	2,544	5.4	28,545	0.6	32	47,292	499,347									
45-64	19,229	45.4	219,573	0.3	7	7,116	16.8	79,226	0.6	33	42,380	434,173									
65-74	5,606	73.0	64,231	0.3	8	1,899	24.7	21,748	0.7	34	7,677	84,942									
75-84	1,319	97.0	14,919	0.3	8	259	19.0	2,958	0.7	34	1,360	15,097									
85 and older	256	118.5	2,860	0.3	9	45	20.8	509	0.7	23	216	2,410									
Other Eligibles	122,520	24.6	1,302,654	0.2	3	6,309	1.3	64,895	0.7	29	498,921	4,444,056									
5 and younger	51,170	26.9	532,751	0.1	2	44	0.0	482	0.3	13	190,549	1,632,145									
6-14	34,039	18.3	378,783	0.1	2	86	0.0	942	0.3	16	185,815	1,781,515									
15-20	8,775	15.4	96,107	0.1	4	82	0.1	841	0.4	20	56,963	519,503									
21-44	3,621	11.0	34,859	0.2	4	534	1.6	4,961	0.5	25	32,942	219,163									
45-64	1,040	15.7	10,567	0.2	5	492	7.4	4,555	0.6	29	6,615	48,164									
65-74	5,679	61.9	61,116	0.3	8	1,770	19.3	18,901	0.7	30	9,174	86,183									
75-84	10,563	98.1	111,164	0.3	8	2,252	20.9	23,712	0.7	31	10,765	102,404									
85 and older	7,633	125.2	77,307	0.3	8	1,049	17.2	10,501	0.7	28	6,098	54,979									
Unknown	5	17.9	46	0.1	1	0	0.0	0	0.0	0	28	176									

Table 7D

All Medicaid Beneficiaries

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

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

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

TABLE 8
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BENEFICIARY CHARACTERISTIC^{a, b}
 ILLINOIS, 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	\$221	5.3	60,201	626,459
Age				
0-64	305	5.0	13,833	156,287
65-74	250	6.0	8,068	85,522
75-84	209	5.7	16,067	163,727
85 and older	160	5.0	22,233	220,923
Unknown	0	0.0	0	0
Gender				
Female	208	5.4	39,918	415,200
Male	247	5.0	20,283	211,259
Unknown	0	0.0	0	0
Race				
White	216	5.4	47,893	495,867
African American	239	4.8	10,667	113,301
Other/unknown	250	5.1	1,641	17,291
Basis of Eligibility				
Aged	185	5.3	39,570	393,874
Disabled	283	5.2	20,611	232,467
Adults	78	2.5	9	37
Children	61	1.3	11	81
Unknown	0	0.0	0	0

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

a. Table 8 includes the beneficiaries represented by Cell D of Table 1, those who resided in nursing facilities throughout their 1999 Medicaid enrollment. A total of 19,578 beneficiaries who were in nursing facilities for part of their enrollment and their 184,206 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}
 ILLINOIS, 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		
			Generic			Generic			Generic			Generic					
Anti-infective Agents	0.3	0.2	0.0	0.1	\$19	\$16	\$0	\$3	\$58	\$83	\$71	\$21	125,079	\$7,229,384	34,758	57.7 %	371,662
Biologicals	0.1	0.0	0.0	0.1	2	0	0	2	19	8	0	20	2,179	41,521	2,123	3.5	23,492
Antineoplastic Agents	0.6	0.1	0.3	0.1	82	36	39	7	148	314	132	49	11,586	1,710,355	2,031	3.4	20,772
Endocrine/Metabolic Drugs	1.0	0.4	0.2	0.4	26	17	3	5	26	47	18	11	212,236	5,421,607	19,864	33.0	211,348
Cardiovascular Agents	1.8	0.4	0.5	0.9	43	16	14	13	24	40	30	14	692,829	16,795,945	36,997	61.5	386,935
Respiratory Agents	0.8	0.3	0.0	0.5	23	14	0	9	30	46	29	19	147,191	4,372,331	17,484	29.0	187,837
Gastrointestinal Agents	0.9	0.3	0.1	0.5	49	27	8	14	53	98	73	26	249,663	13,197,211	25,362	42.1	268,659
Genitourinary Agents	0.5	0.1	0.0	0.4	15	7	0	8	28	56	30	19	79,205	2,192,751	13,460	22.4	144,790
CNS Drugs	1.7	0.7	0.4	0.6	125	79	31	14	75	112	87	23	642,892	47,997,263	35,654	59.2	384,493
Stimulants/Anti-obesity/Anorexia	0.7	0.0	0.0	0.6	13	1	2	10	20	86	39	17	3,703	73,588	538	0.9	5,687
Miscellaneous Psychological/Neurological Agents	0.7	0.7	0.0	0.0	81	79	0	1	116	121	27	33	20,590	2,384,989	2,800	4.7	29,549
Analgesics and Anesthetics	0.8	0.2	0.1	0.5	26	16	4	6	33	75	61	11	182,805	5,967,410	21,411	35.6	227,158
Neuromuscular Agents	1.3	0.4	0.3	0.7	57	33	10	15	44	89	39	21	270,852	11,913,780	18,854	31.3	207,477
Nutritional Products	0.8	0.0	0.3	0.4	16	1	7	8	21	29	22	19	144,891	2,984,246	18,409	30.6	191,361
Hematological Agents	1.0	0.1	0.3	0.6	31	16	6	8	32	173	21	14	149,855	4,804,142	14,943	24.8	155,834
Topical Products	0.6	0.2	0.1	0.3	18	11	4	3	29	45	39	12	213,731	6,211,840	32,095	53.3	349,600
Miscellaneous Products	0.3	0.0	0.0	0.2	7	2	1	4	24	60	128	15	11,463	270,346	3,823	6.4	39,201
Unknown Therapeutic Category	0.5	0.0	0.0	0.0	16	0	0	0	32	0	0	0	153,788	4,955,198	28,143	46.7	304,215
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.	3,314,538	138,523,907	n.a.	n.a.	n.a.

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

a. Table 9 includes the beneficiaries represented by Cell D of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 1999. A total of 19,578 beneficiaries who were in nursing facilities for part of their enrollment and their 184,206 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 Illinois, 4.8 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}
 ILLINOIS, 1999

Top 10 Drug Groups in Nursing Facilities	Users				Among Users		
	Total Medicaid Rx \$	No. of Users	As % of All-Year NF Residents	No. of Bene Mos	No. of Rx per Bene Mo	\$ per Rx	Rx \$ per Bene Mo
ANTIPSYCHOTICS	\$33,377,530	30,587	50.8 %	341,355	1.0	\$103	\$98
ULCER DRUGS	11,067,987	22,261	37.0	236,706	0.7	69	47
ANTIDEPRESSANTS	10,634,915	22,407	37.2	241,801	0.8	58	44
ANTICONVULSANT	9,122,429	15,850	26.3	176,319	1.0	51	52
DERMATOLOGICAL	7,275,742	81,784	135.9	892,412	0.3	25	8
ANTIHYPERTENSIVE	4,801,340	18,288	30.4	192,223	0.8	31	25
CALCIUM BLOCKERS	3,871,875	11,161	18.5	118,645	0.8	40	33
ANTIDIABETIC	3,657,086	14,508	24.1	152,928	0.8	29	24
ANTIANSIETY AGENTS	3,350,421	15,198	25.2	164,388	0.6	34	20
ANTIASTHMATIC	3,262,780	16,611	27.6	174,865	0.6	31	19

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

a. Table 10 includes the beneficiaries represented by Cell D of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 1999. A total of 19,578 beneficiaries who were in nursing facilities for part of their enrollment and their 184,206 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} ILLINOIS, 1999

Beneficiary Characteristics	All Top 10 Drug Groups					ANTIPSYCHOTICS					ULCER DRUGS					
	No. of Rx	Rx \$	No. of Users	Residents	Mean No. of Rx	No. of Users	Residents	Mean No. of Rx	Mean Rx \$	No. of Users	Residents	Mean No. of Rx	Mean Rx \$	No. of Users	Residents	Mean No. of Rx
All	1,713,413	\$90,422,105	30,587	50.8 %	1.0	341,355	1.0	\$98	\$98	22,261	37.0 %	236,706	\$47			
Female	1,098,178	53,102,459	17,906	44.9	0.9	199,466	0.9	81	81	15,453	38.7	164,871	47			
Disabled	376,164	23,255,236	8,103	82.2	1.1	93,916	1.1	122	122	3,465	35.1	38,970	47			
64 or younger	216,426	15,109,316	5,015	90.4	1.3	58,080	1.3	144	144	1,661	29.9	18,581	47			
65-74	98,042	5,223,850	1,869	79.2	1.0	21,859	1.0	96	96	985	41.8	11,256	48			
75-84	48,416	2,341,859	982	68.9	0.8	11,329	0.8	73	73	595	41.7	6,688	48			
85 and older	13,280	580,211	237	44.7	0.7	2,648	0.7	53	53	224	42.3	2,445	45			
Other Eligibles	722,014	29,847,223	9,803	32.6	0.6	105,550	0.6	45	45	11,988	39.9	125,901	47			
64 or younger	120	6,077	4	30.8	0.7	26	0.7	61	61	2	15.4	10	19			
65-74	68,186	3,167,045	1,149	54.6	0.7	12,266	0.7	62	62	902	42.8	9,449	46			
75-84	273,044	11,734,943	3,861	39.3	0.6	41,985	0.6	52	52	4,099	41.7	43,666	47			
85 and older	380,664	14,939,158	4,789	26.4	0.5	51,273	0.5	35	35	6,985	38.6	72,776	47			
Male	615,235	37,319,646	12,681	62.5	1.1	141,889	1.1	121	121	6,808	33.6	71,835	47			
Disabled	377,288	27,141,676	9,040	84.1	1.3	104,634	1.3	146	146	2,934	27.3	32,915	47			
64 or younger	294,235	22,699,263	7,356	89.0	1.3	85,022	1.3	160	160	1,997	24.2	22,369	47			
65-74	64,213	3,505,399	1,276	70.6	1.0	14,906	1.0	95	95	699	38.7	7,893	47			
75-84	16,015	809,202	351	62.3	0.8	4,060	0.8	74	74	206	36.6	2,285	48			
85 and older	2,825	127,812	57	50.4	0.9	646	0.9	68	68	32	28.3	368	42			
Other Eligibles	237,947	10,177,970	3,641	38.2	0.6	37,255	0.6	51	51	3,874	40.6	38,920	47			
64 or younger	8	262	1	14.3	0.2	9	0.2	16	16	1	14.3	11	2			
65-74	54,191	2,480,288	859	47.8	0.7	8,844	0.7	67	67	745	41.5	7,432	50			
75-84	111,679	4,847,175	1,717	40.4	0.6	17,857	0.6	52	52	1,773	41.7	18,019	47			
85 and older	72,069	2,850,245	1,064	30.6	0.5	10,545	0.5	36	36	1,355	38.9	13,458	45			
Unknown	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 Illinois, released by CMS in 10/2003. This table was produced on 06/25/2004.

a. Table 10A includes the beneficiaries represented by Cell D of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 1999. A total of 19,578 beneficiaries who were in nursing facilities for part of their enrollment and their 184,206 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}
 ILLINOIS, 1999

Beneficiary Characteristics	ANTIDEPRESSANTS						ANTICONVULSANT						DERMATOLOGICAL					
	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	22,407	37.2 %	0.8	15,850	26.3 %	1.0	81,784	135.9 %	0.3	892,412	0.3	8	8	8	8	8	8	8
Female	15,645	39.2	0.8	8,598	21.5	1.0	56,745	142.2	0.3	620,669	0.3	8	8	8	8	8	8	8
Disabled	3,953	40.1	0.8	4,526	45.9	1.0	12,384	125.6	0.3	141,714	0.3	8	8	8	8	8	8	8
64 or younger	2,248	40.5	0.8	2,983	53.8	1.1	5,828	105.1	0.3	66,736	0.3	8	8	8	8	8	8	8
65-74	1,051	44.6	0.8	1,036	43.9	1.0	3,531	149.7	0.3	40,901	0.3	8	8	8	8	8	8	8
75-84	527	37.0	0.8	429	30.1	1.0	2,118	148.5	0.3	24,138	0.3	8	8	8	8	8	8	8
85 and older	127	24.0	0.7	78	14.7	1.0	907	171.1	0.4	9,939	0.4	10	10	10	10	10	10	10
Other Eligibles	11,692	38.9	0.8	4,072	13.5	0.9	44,361	147.6	0.3	478,955	0.3	8	8	8	8	8	8	8
64 or younger	1	7.7	9.0	5	38.5	1.6	4	30.8	0.8	16	0.8	10	10	10	10	10	10	10
65-74	1,144	54.3	0.7	667	31.7	0.9	2,953	140.2	0.3	31,849	0.3	9	9	9	9	9	9	9
75-84	4,402	44.8	0.8	1,756	17.9	0.9	14,464	147.2	0.3	158,309	0.3	8	8	8	8	8	8	8
85 and older	6,145	33.9	0.7	1,644	9.1	0.8	26,940	148.8	0.3	288,781	0.3	8	8	8	8	8	8	8
Male	6,762	33.3	0.7	7,252	35.8	1.1	25,039	123.4	0.3	271,743	0.3	8	8	8	8	8	8	8
Disabled	3,248	30.2	0.8	5,447	50.7	1.1	10,398	96.7	0.3	118,811	0.3	9	9	9	9	9	9	9
64 or younger	2,441	29.5	0.8	4,494	54.4	1.1	6,963	84.2	0.3	79,798	0.3	9	9	9	9	9	9	9
65-74	611	33.8	0.7	763	42.2	1.0	2,468	136.6	0.3	28,193	0.3	8	8	8	8	8	8	8
75-84	169	30.0	0.7	166	29.5	1.0	785	139.4	0.3	8,775	0.3	8	8	8	8	8	8	8
85 and older	27	23.9	0.6	24	21.2	1.0	182	161.1	0.3	2,045	0.3	8	8	8	8	8	8	8
Other Eligibles	3,514	36.9	0.7	1,805	18.9	0.9	14,641	153.6	0.3	152,932	0.3	8	8	8	8	8	8	8
64 or younger	2	28.6	0.3	1	14.3	0.2	0	0.0	0.0	0	0.0	0	0	0	0	0	0	0
65-74	806	44.9	0.7	534	29.7	1.0	2,630	146.4	0.3	27,764	0.3	9	9	9	9	9	9	9
75-84	1,610	37.9	0.7	882	20.7	0.9	6,654	156.5	0.3	69,821	0.3	9	9	9	9	9	9	9
85 and older	1,096	31.5	0.7	388	11.1	0.9	5,357	153.9	0.3	55,347	0.3	8	8	8	8	8	8	8
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 Illinois, released by CMS in 10/2003. This table was produced on 06/25/2004.

a. Table 10B includes the beneficiaries represented by Cell D of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 1999. A total of 19,578 beneficiaries who were in nursing facilities for part of their enrollment and their 184,206 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}
 ILLINOIS, 1999

Beneficiary Characteristics	ANTIHYPERTENSIVE					CALCIUM BLOCKERS					ANTIDIABETIC				
	Users as %					Users as %					Users as %				
	No. of Users	No. of Bene NF Residents	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	No. of Bene NF Residents	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	No. of Bene NF Residents	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
All	18,288	30.4 %	192,223	0.8	\$25	11,161	18.5 %	118,645	0.8	\$33	14,508	24.1 %	152,928	0.8	\$24
Female	12,426	31.1	130,827	0.8	24	8,100	20.3	86,051	0.8	32	10,058	25.2	106,578	0.8	24
Disabled	2,499	25.3	27,865	0.8	26	1,661	16.8	18,756	0.8	35	2,818	28.6	31,819	0.9	28
64 or younger	1,086	19.6	12,035	0.8	26	690	12.4	7,707	0.8	35	1,347	24.3	15,133	0.9	29
65-74	764	32.4	8,682	0.8	25	527	22.3	6,037	0.9	37	927	39.3	10,714	0.9	28
75-84	474	33.2	5,307	0.8	26	328	23.0	3,740	0.8	34	427	29.9	4,784	0.8	25
85 and older	175	33.0	1,841	0.7	22	116	21.9	1,272	0.7	29	117	22.1	1,188	0.7	19
Other Eligibles	9,927	33.0	102,962	0.8	24	6,439	21.4	67,295	0.8	32	7,240	24.1	74,759	0.8	22
64 or younger	5	38.5	16	1.4	74	1	7.7	5	2.6	127	1	7.7	2	1.5	37
65-74	810	38.5	8,278	0.8	25	500	23.7	5,208	0.8	33	839	39.8	8,654	0.8	27
75-84	3,430	34.9	36,188	0.8	25	2,288	23.3	24,082	0.8	32	3,022	30.8	31,728	0.8	24
85 and older	5,682	31.4	58,480	0.8	23	3,650	20.2	38,000	0.8	31	3,378	18.7	34,375	0.7	20
Male	5,862	28.9	61,396	0.8	27	3,061	15.1	32,594	0.8	34	4,450	21.9	46,350	0.8	24
Disabled	2,328	21.7	26,145	0.8	28	1,318	12.3	15,019	0.8	36	1,975	18.4	21,927	0.9	27
64 or younger	1,520	18.4	16,978	0.8	28	874	10.6	9,962	0.8	36	1,323	16.0	14,617	0.9	28
65-74	607	33.6	6,914	0.8	27	347	19.2	3,956	0.8	36	534	29.6	6,006	0.8	27
75-84	163	29.0	1,814	0.8	28	76	13.5	864	0.8	35	101	17.9	1,111	0.7	19
85 and older	38	33.6	439	0.7	29	21	18.6	237	0.8	28	17	15.0	193	0.7	18
Other Eligibles	3,534	37.1	35,251	0.8	26	1,743	18.3	17,575	0.8	32	2,475	26.0	24,423	0.8	21
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	732	40.8	7,360	0.8	26	364	20.3	3,687	0.8	34	604	33.6	6,133	0.8	22
75-84	1,648	38.8	16,546	0.8	26	810	19.1	8,204	0.8	32	1,225	28.8	12,134	0.8	22
85 and older	1,154	33.2	11,345	0.8	26	569	16.4	5,684	0.8	29	646	18.6	6,156	0.8	20
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

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

a. Table 10C includes the beneficiaries represented by Cell D of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 1999. A total of 19,578 beneficiaries who were in nursing facilities for part of their enrollment and their 184,206 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}
 ILLINOIS, 1999

Beneficiary Characteristics	ANTIANXIETY AGENTS					ANTI-ASTHMATIC					Bene Mos among All-Year NF Residents	
	Users as %		No. of Bene		Mean No. of Rx	Users as %		No. of Bene		Mean No. of Rx		
	No. of Users	Residents	NF Residents	All-Year NF Residents		No. of Users	Residents	NF Residents	All-Year NF Residents			
All	15,198	25.2 %	164,388	0.6	\$20	16,611	27.6 %	174,965	0.6	\$19	60,201	626,459
Female	10,109	25.3	109,299	0.6	20	10,671	26.7	113,273	0.6	18	39,918	415,200
Disabled	3,095	31.4	35,354	0.6	25	2,749	27.9	31,105	0.7	20	9,862	111,340
64 or younger	1,877	33.8	21,369	0.6	25	1,353	24.4	15,196	0.6	19	5,547	62,804
65-74	736	31.2	8,489	0.7	23	820	34.8	9,429	0.8	24	2,359	26,901
75-84	373	26.2	4,296	0.6	25	444	31.1	4,994	0.6	18	1,426	15,997
85 and older	109	20.6	1,200	0.5	17	132	24.9	1,486	0.4	14	530	5,638
Other Eligibles	7,014	23.3	73,945	0.6	18	7,922	26.4	82,168	0.6	17	30,056	303,860
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	13	83
65-74	664	31.5	7,041	0.6	20	718	34.1	7,509	0.6	21	2,106	21,161
75-84	2,543	25.9	27,172	0.6	19	2,878	29.3	30,109	0.6	20	9,827	101,005
85 and older	3,807	21.0	39,732	0.6	17	4,326	23.9	44,550	0.5	14	18,110	181,611
Male	5,089	25.1	55,089	0.6	21	5,940	29.3	61,592	0.7	20	20,283	211,259
Disabled	2,919	27.2	33,368	0.6	23	2,461	22.9	27,385	0.6	20	10,749	121,127
64 or younger	2,308	27.9	26,334	0.6	23	1,672	20.2	18,658	0.6	19	8,266	93,365
65-74	474	26.2	5,445	0.6	22	573	31.7	6,357	0.7	21	1,807	20,346
75-84	120	21.3	1,390	0.6	26	185	32.9	2,022	0.6	18	563	6,164
85 and older	17	15.0	199	0.2	8	31	27.4	348	0.6	12	113	1,252
Other Eligibles	2,170	22.8	21,721	0.5	18	3,479	36.5	34,207	0.7	21	9,534	90,132
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	7	35
65-74	439	24.4	4,456	0.6	20	745	41.5	7,401	0.8	26	1,796	17,114
75-84	1,003	23.6	10,068	0.5	18	1,616	38.0	15,903	0.7	21	4,251	40,561
85 and older	728	20.9	7,197	0.5	16	1,118	32.1	10,903	0.6	17	3,480	32,422
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 Illinois, released by CMS in 10/2003. This table was produced on 06/25/2004.

a. Table 10D includes the beneficiaries represented by Cell D of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 1999. A total of 19,578 beneficiaries who were in nursing facilities for part of their enrollment and their 184,206 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}
ILLINOIS, 1999

Beneficiary Characteristics	No. of Benes					No. of Bene Mos						
	All	Aged	Disabled	Adults	Children	Unknown	All	Aged	Disabled	Adults	Children	Unknown
All	1,663,521	95,556	264,486	366,194	937,284	1	15,959,351	928,733	2,848,547	3,066,414	9,115,656	1
Age												
5 and younger	404,489	0	4,726	78	399,685	0	3,750,066	0	52,742	524	3,696,800	0
6-14	429,802	0	19,208	103	410,491	0	4,415,080	0	218,632	532	4,195,916	0
15-20	182,971	0	15,451	41,794	125,726	0	1,717,422	0	169,137	334,936	1,213,349	0
21-44	393,392	2	91,344	300,710	1,335	1	3,523,395	4	981,300	2,532,864	9,226	1
45-64	124,308	49	100,936	23,299	24	0	1,254,030	131	1,057,874	195,842	183	0
65-74	49,941	24,840	24,911	190	0	0	522,042	240,410	280,055	1,577	0	0
75-84	42,766	36,337	6,419	9	1	0	434,129	361,601	72,445	71	12	0
85 and older	35,820	34,328	1,491	1	0	0	342,956	326,587	16,362	7	0	0
Unknown	32	0	0	10	22	0	231	0	0	61	170	0
Gender												
Female	999,670	69,630	140,755	324,701	464,583	1	9,527,755	686,044	1,535,103	2,777,872	4,528,735	1
Male	663,851	25,926	123,731	41,493	472,701	0	6,431,596	242,689	1,313,444	288,542	4,586,921	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	610,955	63,605	116,153	139,937	291,260	0	5,647,698	603,809	1,228,930	1,103,444	2,711,515	0
African American	725,029	14,249	121,633	148,324	440,822	1	7,335,749	139,651	1,332,566	1,400,523	4,463,008	1
Other/unknown	327,537	17,702	26,700	77,933	205,202	0	2,975,904	185,273	287,051	562,447	1,941,133	0
Use of Nursing Facilities												
All year	60,203	39,571	20,612	9	11	0	626,577	393,961	232,498	37	81	0
Part year	19,579	10,892	8,379	99	209	0	184,293	93,230	87,946	905	2,212	0
None	1,583,739	45,093	235,495	366,086	937,064	1	15,148,481	441,542	2,528,103	3,065,472	9,113,363	1
Maintenance Assistance Status												
Cash	654,139	22,199	152,236	141,817	337,887	0	6,767,000	250,409	1,709,546	1,354,923	3,452,122	0
Medically needy	322,632	68,982	100,768	148,073	4,809	0	2,880,347	639,772	1,020,494	1,199,998	20,083	0
Poverty related	563,976	3,073	6,192	63,363	491,348	0	5,184,235	31,501	66,740	395,210	4,690,784	0
Other/unknown	122,774	1,302	5,290	12,941	103,240	1	1,127,769	7,051	51,767	116,283	952,667	1
Dual Status^c												
Full dual, all year	151,291	75,899	72,820	2,490	82	0	1,533,047	728,369	783,600	20,290	788	0
Full dual, part year	17,831	6,206	11,045	580	0	0	194,693	66,582	121,916	6,195	0	0
Non-dual, all year	1,494,399	13,451	180,621	363,124	937,202	1	14,231,611	133,782	1,943,031	3,039,929	9,114,868	1
Managed Care Status												
FFS all year	1,435,278	95,468	263,292	307,098	769,419	1	13,479,455	927,743	2,834,700	2,445,295	7,271,716	1
FFS part year, with Rx claims	65,626	67	843	20,107	44,609	0	745,133	771	9,897	225,476	508,989	0
FFS part year, no Rx claims	53,937	18	265	10,804	42,850	0	585,845	211	2,973	112,194	470,467	0
MC all year, with Rx claims	2,139	3	18	973	1,145	0	23,786	8	214	10,530	13,034	0
MC all year, no Rx claims	106,541	0	68	27,212	79,261	0	1,125,132	0	763	272,919	851,450	0

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

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

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

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

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

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

	Benes and			
	Bene Mos in Cell B of Table 1 No. of Benes	Bene Mos in Cell C of Table 1 No. of Benes	Bene Mos in Cell D of Table 1 No. of Benes	Bene Mos in Cell E of Table 1 No. of Benes
All	1,663,521	15,959,351	1,554,841	14,181,988
FFS all year	1,435,278	13,479,455	1,435,278	13,479,455
FFS part year, with Rx claims	65,626	745,133	65,626	447,629
FFS part year, with no Rx claims	53,937	585,845	53,937	254,904
MC all year, with Rx claims	2,139	23,786	0	0
MC all year, with no Rx claims	106,541	1,125,132	0	0
			108,680	1,777,363

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

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