

# STATISTICAL COMPENDIUM: MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 1999 MARYLAND

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

Inclusion Criteria (1999)	No. of Dual and Non-dual Eligible Benes (Cell)	No. of Dual Eligible Benes (Cell) <sup>g</sup>
1. Benes who were eligible for Medicaid during at least one month <sup>a</sup>	686,834 (A)	85,887 (E)
2. Benes who had Medicaid pharmacy benefits during at least one month <sup>b</sup>	638,821 (B)	70,725 (F)
3. Benes who had fee-for-service pharmacy benefit coverage during at least one month <sup>c, d, e</sup>	347,024 (C)	67,251 (G)
4. Benes who were all-year nursing facility residents <sup>f</sup>	15,510 (D)	14,024 (H)

Source: Data for this table are from the MAX 1999 file for Maryland, released by CMS in 11/2003. 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 Maryland in 1999 was \$189,418,677, of which \$55,137,702 was excluded from our analysis because those claims were made for beneficiaries who were outside the study population or took place during months that were excluded from the analysis.
- e. The 18 states where no PHP provided a pharmacy benefit in 1999 were AL, AR, CO, FL, GA, IA, IL, KY, MA, MI, MT, NE, NY, NC, OR, PA, UT, and WI. This list was constructed based on consultation with CMS staff and two CMS documents, which can be found at <http://www.cms.hhs.gov/medicaid/managedcare/mmcms699.asp> and at <http://www.cms.hhs.gov/medicaid/managedcare/mmcms99.asp>.
- f. Cell D represents the study population for Tables 8 through 10D. All-year nursing facility residents are the beneficiaries who resided in nursing facilities throughout their enrollment in 1999. These beneficiaries were identified by comparing the number of months during which the MAX files contained at least one claim from nursing facilities to the number of Medicaid eligible months. If the former is greater than or equal to the latter, the beneficiary was considered an all-year resident. If the former is less than the latter but not equal to zero, the beneficiary was considered a part-year resident. Part-year residents were excluded from the analysis because they are likely to be short-term residents and the level and pattern of their pharmacy benefit use may differ substantially from longer-term residents. The number of part-year residents and their benefit months are presented in footnotes to Tables 8 through 10D. Residents of mental hospitals for the aged, inpatient psychiatric facilities for individuals under age 21, or intermediate care facilities for the mentally retarded were excluded from the analysis.
- g. Pharmacy benefit use and reimbursement among full dual eligible beneficiaries are presented in Tables 11 through 18. To determine Medicaid-Medicare dual eligibility status, two MAX data elements ("Eligible Medicare Crossover Code -- Annual New Values" and "Eligible Restricted Benefits Flag") were used in combination. Beneficiaries represented in Cell G, the dual study population, include all dual eligible beneficiaries who had a fee-for-service pharmacy benefit at least during one month in 1999. All benefit months of such dual eligible beneficiaries, of which 1.6 percent were restricted benefit months without a pharmacy benefit in Maryland, 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<sup>a,b</sup>  
 MARYLAND, 1999

Beneficiary Characteristics	No. of Benefes							No. of Bene Mos						
	All	Aged	Disabled	Adults	Children	Other/ Unknown		All	Aged	Disabled	Adults	Children	Other/ Unknown	
<b>All</b>	<b>347,024</b>	<b>40,041</b>	<b>52,203</b>	<b>81,668</b>	<b>173,112</b>	<b>0</b>		<b>1,441,532</b>	<b>386,333</b>	<b>426,933</b>	<b>244,677</b>	<b>383,589</b>	<b>0</b>	
<b>Age</b>														
5 and younger	65,288	0	1,024	8,100	56,164	0		138,020	0	4,220	17,148	116,652	0	
6-14	80,993	1	1,535	14,428	65,029	0		175,972	12	7,491	30,592	137,877	0	
15-20	41,533	0	1,450	15,087	24,996	0		118,937	0	8,178	45,308	65,451	0	
21-44	84,960	6	19,269	41,305	24,380	0		354,944	61	153,791	143,910	57,182	0	
45-64	25,363	57	20,322	2,516	2,468	0		173,325	465	159,647	7,022	6,191	0	
65-74	17,720	11,203	6,322	140	55	0		173,743	104,640	68,449	486	168	0	
75-84	17,638	15,646	1,909	72	11	0		177,750	156,207	21,332	171	40	0	
85 and older	13,520	13,127	372	20	1	0		128,818	124,941	3,825	40	12	0	
Unknown	9	1	0	0	8	0		23	7	0	0	16	0	
<b>Gender</b>														
Female	217,361	29,862	26,612	62,615	98,272	0		941,302	292,053	226,884	202,692	219,673	0	
Male	129,663	10,179	25,591	19,053	74,840	0		500,230	94,280	200,049	41,985	163,916	0	
Unknown	0	0	0	0	0	0		0	0	0	0	0	0	
<b>Race</b>														
White	116,258	20,916	23,261	24,808	47,273	0		583,543	199,018	200,197	84,687	99,641	0	
African American	192,824	13,455	25,198	48,992	105,179	0		708,271	132,956	198,992	134,944	241,379	0	
Other/unknown	37,942	5,670	3,744	7,868	20,660	0		149,718	54,359	27,744	25,046	42,569	0	
<b>Use of Nursing Facilities</b>														
All year	15,510	13,310	2,191	6	3	0		155,144	131,706	23,388	29	21	0	
Part year	7,508	5,850	1,577	67	14	0		67,492	53,478	13,608	328	78	0	
None	324,006	20,881	48,435	81,595	173,095	0		1,218,896	201,149	389,937	244,320	383,490	0	
<b>Maintenance Assistance Status</b>														
Cash	99,586	16,490	35,488	15,742	31,866	0		613,148	176,744	322,362	39,552	74,490	0	
Medically needy	53,743	21,895	13,877	7,082	10,899	0		324,626	195,174	76,224	20,693	32,535	0	
Poverty-related	122,691	1,634	1,380	23,349	96,328	0		318,661	14,173	12,059	107,478	184,951	0	
Other/unknown	71,004	22	1,458	35,495	34,029	0		185,097	242	16,288	76,954	91,613	0	
<b>Dual Medicare Status<sup>c</sup></b>														
Full dual, all year	65,144	35,848	28,582	324	390	0		659,785	353,866	302,827	1,873	1,219	0	
Full dual, part year	2,107	1,108	985	11	3	0		20,807	11,150	9,504	124	29	0	
Non-dual, all year	279,773	3,085	22,636	81,333	172,719	0		760,940	21,317	114,602	242,680	382,341	0	
<b>Managed Care Status</b>														
FFS all year	151,538	37,917	36,519	36,749	40,353	0		947,813	376,350	362,359	91,511	117,593	0	
FFS part year, with Rx claims	45,901	1,373	9,960	14,443	20,125	0		146,858	7,360	42,335	50,374	46,789	0	
FFS part year, no Rx claims	149,585	751	5,724	30,476	112,634	0		346,861	2,623	22,239	102,792	219,207	0	

Source: Data for this table are from the MAX 1999 file for Maryland, released by CMS in 11/2003. 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<sup>a, b</sup>  
 MARYLAND, 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 \$ <sup>c</sup>	No. of Benes
All	31.6 %	8.7	\$387	\$45	\$4,823	8.0 %	\$7	347,024
<b>Age</b>								
5 and younger	12.8	0.4	14	39	1,515	0.9	2	65,288
6-14	12.0	0.8	40	50	1,269	3.1	3	80,993
15-20	19.3	1.2	67	54	2,798	2.4	3	41,533
21-44	33.0	5.4	367	68	4,452	8.2	3	84,960
45-64	61.9	22.9	1,153	50	12,091	9.5	20	25,363
65-74	75.2	32.6	1,302	40	9,397	13.9	32	17,720
75-84	82.4	39.7	1,447	36	13,595	10.6	27	17,638
85 and older	87.2	41.5	1,360	33	19,559	7.0	15	13,520
Unknown	22.2	6.1	208	34	4,308	4.8	12	9
<b>Basis of Eligibility</b>								
Aged	81.2	38.2	1,367	36	15,058	9.1	23	40,041
Disabled	67.5	25.1	1,369	55	13,211	10.4	28	52,203
Adults	20.9	0.8	36	46	1,857	1.9	0	81,668
Children	14.2	0.7	30	45	1,325	2.2	1	173,112
Unknown	0.0	0.0	0	0	0	0.0	0	0
<b>Gender</b>								
Female	33.6	9.5	387	41	4,653	8.3	8	217,361
Male	28.1	7.4	388	52	5,108	7.6	6	129,663
Unknown	0.0	0.0	0	0	0	0.0	0	0
<b>Race</b>								
White	43.7	14.7	626	43	7,261	8.6	9	116,258
African American	25.2	5.7	271	47	3,691	7.3	7	192,824
Other/unknown	26.5	5.3	244	46	3,103	7.9	5	37,942
<b>Use of Nursing Facilities</b>								
Entire year	95.5	60.8	2,124	35	31,707	6.7	30	15,510
Part year	92.7	51.0	1,947	38	24,423	8.0	30	7,508
None	27.1	5.2	268	51	3,082	8.7	5	324,006
<b>Maintenance Assistance Status</b>								
Cash	48.6	14.8	750	51	5,670	13.2	15	99,586
Medically needy	58.0	25.3	951	38	15,272	6.2	14	53,743
Poverty related	17.6	0.7	30	46	1,418	2.1	1	122,691
Other/unknown	11.7	1.4	68	49	1,610	4.2	3	71,004

Source: Data for this table are from the MAX 1999 file for Maryland, released by CMS in 11/2003. 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<sup>a,b</sup>  
 MARYLAND, 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				1.8 %
All	2.1	\$93	8.0 %	68.4 %	12.5 %	4.6 %	7.7 %	4.9 %	1.8 %	\$1,161	347,024	1,441,532
<b>Age</b>												
5 and younger	0.2	7	0.9	87.2	9.4	2.0	1.1	0.2	0.1	717	65,288	138,020
6-14	0.4	18	3.1	88.0	6.6	1.9	1.9	0.9	0.6	584	80,993	175,972
15-20	0.4	24	2.4	80.7	13.1	2.7	2.2	0.8	0.5	977	41,533	118,937
21-44	1.3	88	8.2	67.0	17.5	4.9	6.2	3.0	1.4	1,066	84,960	354,944
45-64	3.4	169	9.5	38.1	16.4	9.2	18.3	12.5	5.5	1,769	25,363	173,325
65-74	3.3	133	13.9	24.8	17.3	12.1	25.5	15.9	4.5	958	17,720	173,743
75-84	3.9	144	10.6	17.6	15.0	11.5	28.4	21.0	6.5	1,349	17,638	177,750
85 and older	4.4	143	7.0	12.8	13.1	11.0	31.0	25.6	6.7	2,053	13,520	128,818
Unknown	2.4	81	4.8	77.8	11.1	0.0	0.0	11.1	0.0	1,686	9	23
<b>Basis of Eligibility</b>												
Aged	4.0	142	9.1	18.8	14.7	11.3	27.7	21.1	6.5	1,561	40,041	386,333
Disabled	3.1	167	10.4	32.5	18.8	10.0	20.5	13.0	5.3	1,615	52,203	426,933
Adults	0.3	12	1.9	79.1	14.9	2.8	2.2	0.7	0.3	620	81,668	244,677
Children	0.3	13	2.2	85.8	9.0	2.3	1.9	0.6	0.4	598	173,112	383,589
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<b>Gender</b>												
Female	2.2	89	8.3	66.4	13.5	4.9	8.2	5.2	1.8	1,074	217,361	941,302
Male	1.9	101	7.6	71.9	10.8	4.3	7.0	4.3	1.8	1,324	129,663	500,230
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<b>Race</b>												
White	2.9	125	8.6	56.3	14.3	5.9	11.6	8.6	3.4	1,447	116,258	583,543
African American	1.6	74	7.3	74.8	11.5	3.8	5.7	3.1	1.0	1,005	192,824	708,271
Other/unknown	1.4	62	7.9	73.5	12.5	4.7	6.0	2.5	0.8	787	37,942	149,718
<b>Use of Nursing Facilities</b>												
Entire year	6.1	212	6.7	4.5	7.4	8.2	31.2	35.0	13.8	3,170	15,510	155,144
Part year	5.7	217	8.0	7.3	9.7	9.4	30.5	30.3	12.9	2,717	7,508	67,492
None	1.4	71	8.7	72.9	12.8	4.4	6.1	2.8	1.0	819	324,006	1,218,896
<b>Maintenance Assistance Status</b>												
Cash	2.4	122	13.2	51.4	16.9	7.9	14.0	7.4	2.4	921	99,586	613,148
Medically needy	4.2	157	6.2	42.0	12.6	6.8	17.0	15.5	6.2	2,528	53,743	324,626
Poverty related	0.3	12	2.1	82.4	12.5	2.6	1.8	0.5	0.3	546	122,691	318,661
Other/unknown	0.5	26	4.2	88.3	6.4	1.9	2.3	0.8	0.3	617	71,004	185,097

Source: Data for this table are from the MAX 1999 file for Maryland, released by CMS in 11/2003. 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.



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 Maryland, 4.6 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all combined. For information about this classification method, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](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<sup>a, b, c, d</sup>  
 MARYLAND, 1999

Therapeutic Category	No. of Rx per Bene Mo among Users			\$ per Bene Mo among Users			\$ per Rx			Users						
	Total	Patented	Off-Patent	Total	Patented	Off-Patent	Total	Patented	Off-Patent	Total	No.	As % of All Benes	No. of Bene Mos			
														Generic	Brand-Name	Generic
Anti-infective Agents	0.4	0.3	0.0	0.2	\$35	\$33	\$0	\$2	\$85	\$131	\$51	\$11	178,840	52,278	15.1 %	428,007
Biologics	0.1	0.1	0.0	0.0	66	29	15	22	479	340	2,222	479	755	361,456	0.2	5,454
Antineoplastic Agents	0.5	0.1	0.3	0.1	73	35	33	5	142	242	131	41	15,984	2,272,905	1.0	31,312
Endocrine/Metabolic Drugs	0.8	0.4	0.2	0.3	23	18	3	2	29	50	18	9	214,659	6,240,063	8.7	273,068
Cardiovascular Agents	1.5	0.5	0.4	0.6	48	26	14	8	33	53	41	13	642,498	21,043,816	13.0	437,275
Respiratory Agents	0.7	0.3	0.0	0.3	21	16	1	4	31	51	27	13	194,897	6,021,615	9.9	290,030
Gastrointestinal Agents	0.7	0.3	0.1	0.4	40	31	4	5	54	96	64	14	211,772	11,426,592	8.2	283,927
Genitourinary Agents	0.4	0.2	0.0	0.2	13	10	0	2	31	48	28	12	40,640	1,251,046	3.1	97,844
CNS Drugs	1.3	0.6	0.2	0.5	82	60	16	6	63	100	94	12	510,237	32,225,897	13.3	393,774
Stimulants/Anti-obesity/Anorexia	1.3	0.3	0.1	0.8	34	12	3	19	27	36	34	23	22,279	604,084	1.3	17,661
Miscellaneous Psychological/Neurological Agents	0.5	0.4	0.0	0.1	48	45	1	1	96	108	108	16	11,362	1,095,575	0.7	22,999
Analgesics and Anesthetics	0.6	0.2	0.1	0.4	22	13	5	4	35	88	63	10	209,767	7,428,516	10.5	331,766
Neuromuscular Agents	1.1	0.4	0.2	0.5	46	30	8	7	41	76	33	15	243,004	9,907,896	6.9	216,515
Nutritional Products	0.6	0.0	0.2	0.3	9	0	6	3	16	26	24	11	105,233	1,733,055	6.1	184,215
Hematological Agents	0.7	0.1	0.3	0.3	46	34	7	5	62	271	22	16	95,469	5,897,826	3.8	128,828
Topical Products	0.5	0.2	0.1	0.2	16	10	4	2	32	47	39	11	176,033	5,588,390	10.6	341,843
Miscellaneous Products	0.4	0.1	0.0	0.2	59	45	9	5	157	383	226	24	9,454	1,482,777	0.7	25,001
Unknown Therapeutic Category	0.5	0.0	0.0	0.0	16	0	0	0	34	0	0	0	135,442	4,581,024	8.8	295,077
<b>TOTAL NO. OF RX AND RX \$</b>	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	3,018,325	134,280,975	n.a.	n.a.

Source: Data for this table are from the MAX 1999 file for Maryland, released by CMS in 11/2003. 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](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 Maryland, 4.6 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](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<sup>a, b, c</sup>  
 MARYLAND, 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	\$16,341,811	21,166	6.1 %	221,625	0.7	\$101	\$74
ANTIDEPRESSANTS	8,996,923	26,975	7.8	270,013	0.6	51	33
ULCER DRUGS	8,973,169	25,804	7.4	266,941	0.5	68	34
ANTICONVULSANT	7,504,540	16,679	4.8	172,769	0.9	46	43
ANTIVIRAL	6,492,504	6,463	1.9	59,574	0.4	271	109
CALCIUM BLOCKERS	5,749,793	17,003	4.9	177,406	0.6	50	32
ANTIHYPERTENSIVE	5,628,764	25,461	7.3	262,370	0.6	36	21
ANTIDIABETIC	4,480,250	19,421	5.6	198,898	0.6	36	23
ANTHYPERLIPIDEMIC	4,289,638	9,398	2.7	100,935	0.6	69	42
ANALGESICS - Narcotic	4,039,461	29,874	8.6	291,138	0.4	33	14

Source: Data for this table are from the MAX 1999 file for Maryland, released by CMS in 11/2003. 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](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<sup>a,b,c</sup>  
 MARYLAND, 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 \$
<b>All</b>	<b>1,232,407</b>	<b>\$72,496,853</b>	<b>21,166</b>	<b>6.1 %</b>	<b>221,625</b>	<b>0.7</b>	<b>\$74</b>	<b>26,975</b>	<b>7.8 %</b>	<b>270,013</b>	<b>0.6</b>	<b>\$33</b>					
<b>Female</b>	816,865	44,258,475	12,582	5.8	131,875	0.7	61	18,696	8.6	188,195	0.6	33					
<b>Disabled</b>	329,369	21,246,348	4,952	18.6	53,910	0.8	83	7,234	27.2	76,939	0.6	33					
5 and younger	361	36,554	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
6-14	690	55,110	14	2.8	150	0.7	55	12	2.4	86	0.6	27					
15-20	1,974	154,304	49	8.3	502	0.9	92	53	9.0	507	0.8	45					
21-44	78,483	6,449,073	1,916	24.0	20,450	0.8	94	2,233	28.0	23,069	0.6	37					
45-64	145,668	9,165,212	2,172	20.1	23,709	0.8	85	3,384	31.3	35,621	0.6	35					
65-74	76,893	4,128,178	596	13.4	6,839	0.7	58	1,179	26.5	13,543	0.6	26					
75-84	22,281	1,115,580	171	11.3	1,907	0.5	38	315	20.8	3,527	0.6	23					
85 and older	3,019	142,337	34	11.3	353	0.5	42	58	19.3	586	0.5	23					
<b>Other Eligibles</b>	487,465	23,011,248	7,630	4.0	77,965	0.6	46	11,462	6.0	111,256	0.7	33					
5 and younger	174	9,539	3	0.0	12	0.4	36	2	0.0	16	0.3	8					
6-14	2,991	173,522	156	0.4	1,380	0.8	64	135	0.3	986	0.7	37					
15-20	7,584	395,371	290	1.2	2,598	0.9	61	357	1.4	2,814	0.8	41					
21-44	9,179	603,582	202	0.3	878	0.4	28	890	1.5	3,532	0.5	30					
45-64	3,258	194,536	49	1.3	340	0.6	46	162	4.3	821	0.5	32					
65-74	103,916	5,292,558	1,240	16.5	13,309	0.7	60	1,844	24.6	19,549	0.6	31					
75-84	194,459	9,153,779	2,718	23.6	28,928	0.6	48	3,907	34.0	41,304	0.7	32					
85 and older	165,904	7,188,361	2,972	27.0	30,520	0.6	37	4,165	37.8	42,234	0.7	33					
<b>Male</b>	415,542	28,238,378	8,584	6.6	89,750	0.8	92	8,279	6.4	81,818	0.7	35					
<b>Disabled</b>	261,202	20,740,152	5,624	22.0	61,038	0.9	111	4,652	18.2	48,273	0.6	35					
5 and younger	275	11,593	0	0.0	0	0.0	0	1	0.2	5	0.4	16					
6-14	3,175	231,092	88	8.6	813	1.0	96	58	5.6	540	0.9	42					
15-20	2,564	199,754	108	12.5	984	0.8	93	82	9.5	684	0.6	36					
21-44	111,147	10,721,481	3,019	26.7	33,131	0.9	123	2,209	19.6	23,166	0.6	35					
45-64	113,809	8,052,845	2,088	21.9	22,502	0.9	103	1,929	20.3	19,650	0.7	37					
65-74	25,275	1,263,123	269	14.4	3,003	0.8	56	302	16.2	3,397	0.6	28					
75-84	4,119	218,669	41	10.4	479	0.8	51	57	14.4	677	0.6	24					
85 and older	838	41,595	11	15.3	126	0.5	39	14	19.4	154	0.5	22					
<b>Other Eligibles</b>	154,340	7,498,226	2,960	2.8	28,712	0.7	53	3,627	3.5	33,545	0.7	34					
5 and younger	201	9,127	3	0.0	25	0.8	57	6	0.0	24	0.5	18					
6-14	7,849	482,992	316	0.8	2,748	1.0	91	290	0.7	2,192	0.9	40					
15-20	6,068	428,443	285	1.9	2,511	0.8	85	327	2.1	2,288	0.8	46					
21-44	1,888	135,319	36	0.7	230	0.7	52	103	1.9	459	0.5	32					
45-64	1,331	78,621	13	1.1	91	0.6	16	45	3.6	238	0.7	37					
65-74	48,773	2,360,672	700	18.0	7,215	0.6	50	934	24.0	9,587	0.6	30					
75-84	60,985	2,810,170	1,005	23.7	10,167	0.6	46	1,261	29.8	12,409	0.7	35					
85 and older	27,245	1,192,882	602	28.2	5,725	0.6	37	661	31.0	6,348	0.7	34					
<b>Unknown</b>	31	879	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 Maryland, released by CMS in 1/2003. 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](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<sup>a, b, c</sup>  
 MARYLAND, 1999

Beneficiary Characteristics	ULCER DRUGS					ANTICONVULSANT					ANTIVIRAL				
	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
<b>All</b>	<b>25,804</b>	<b>7.4 %</b>	<b>266,941</b>	<b>0.5</b>	<b>\$34</b>	<b>16,679</b>	<b>4.8 %</b>	<b>172,769</b>	<b>0.9</b>	<b>\$43</b>	<b>6,463</b>	<b>1.9 %</b>	<b>59,574</b>	<b>0.4</b>	<b>\$109</b>
<b>Female</b>	18,172	8.4	189,340	0.5	34	9,328	4.3	96,388	0.9	39	3,137	1.4	28,536	0.3	80
<b>Disabled</b>	6,683	25.1	72,359	0.4	32	4,981	18.7	53,556	0.9	47	1,590	6.0	14,868	0.4	126
5 and younger	33	7.1	267	0.6	51	16	3.4	156	0.6	55	9	1.9	59	1.1	212
6-14	21	4.1	235	0.5	47	33	6.5	339	0.8	73	5	1.0	31	0.9	149
15-20	31	5.3	314	0.6	62	64	10.9	614	1.0	57	13	2.2	133	0.4	150
21-44	1,236	15.5	13,064	0.4	32	1,942	24.3	20,420	1.0	56	925	11.6	8,094	0.5	136
45-64	2,922	27.0	30,326	0.5	34	2,176	20.1	23,500	0.9	44	534	4.9	5,362	0.4	128
65-74	1,770	39.7	20,416	0.4	29	602	13.5	6,871	0.7	30	74	1.7	838	0.2	57
75-84	589	38.9	6,840	0.4	29	125	8.3	1,402	0.7	23	22	1.5	259	0.1	6
85 and older	81	27.0	897	0.5	32	23	7.7	254	0.5	15	8	2.7	92	0.1	7
<b>Other Eligibles</b>	11,489	6.0	116,981	0.5	35	4,347	2.3	42,832	0.8	30	1,547	0.8	13,668	0.2	31
5 and younger	32	0.1	121	0.4	17	13	0.0	64	0.5	16	19	0.1	40	1.1	139
6-14	28	0.1	112	0.3	19	82	0.2	678	1.1	57	18	0.0	70	0.4	58
15-20	94	0.4	507	0.5	23	229	0.9	1,961	1.0	47	49	0.2	227	0.3	39
21-44	464	0.8	1,990	0.3	22	299	0.5	1,354	0.6	28	353	0.6	1,576	0.5	153
45-64	164	4.3	813	0.4	29	52	1.4	266	0.5	29	38	1.0	240	0.5	174
65-74	2,380	31.7	25,371	0.4	30	947	12.6	10,057	0.8	31	183	2.4	1,981	0.2	30
75-84	4,325	37.6	46,856	0.5	34	1,589	13.8	16,809	0.8	29	378	3.3	4,173	0.1	8
85 and older	4,002	36.3	41,211	0.6	39	1,136	10.3	11,643	0.8	28	509	4.6	5,361	0.1	5
<b>Male</b>	7,632	5.9	77,601	0.5	34	7,351	5.7	76,381	1.0	49	3,326	2.6	31,038	0.5	135
<b>Disabled</b>	4,107	16.0	42,891	0.5	33	5,158	20.2	55,466	1.0	53	2,878	11.2	26,920	0.5	150
5 and younger	34	6.1	299	0.6	32	12	2.1	86	0.7	18	0	0.0	0	0.0	0
6-14	43	4.2	515	0.6	78	90	8.8	920	1.2	73	7	0.7	84	0.6	162
15-20	25	2.9	223	0.6	64	108	12.5	1,019	0.9	59	0	0.0	0	0.0	0
21-44	1,416	12.5	14,794	0.4	31	2,541	22.5	27,493	1.0	57	1,926	17.1	17,895	0.5	148
45-64	1,869	19.6	18,923	0.5	35	2,065	21.7	22,155	1.1	51	903	9.5	8,462	0.5	159
65-74	557	29.8	6,276	0.4	29	305	16.3	3,363	0.9	35	35	1.9	395	0.3	69
75-84	130	32.9	1,497	0.4	25	34	8.6	394	0.6	25	5	1.3	60	0.1	12
85 and older	33	45.8	364	0.4	30	3	4.2	36	1.2	31	2	2.8	24	0.6	8
<b>Other Eligibles</b>	3,525	3.4	34,710	0.5	35	2,193	2.1	20,915	1.0	36	448	0.4	4,118	0.2	39
5 and younger	39	0.1	143	0.4	15	9	0.0	24	1.0	38	13	0.0	29	1.0	108
6-14	28	0.1	144	0.5	55	216	0.5	1,741	1.1	52	17	0.0	102	1.3	343
15-20	49	0.3	268	0.4	13	228	1.5	1,912	0.8	50	7	0.0	17	0.5	156
21-44	80	1.5	363	0.3	28	61	1.1	310	0.7	45	59	1.1	286	0.6	134
45-64	62	5.0	307	0.5	27	20	1.6	105	0.8	47	21	1.7	153	0.4	124
65-74	1,081	27.8	11,248	0.5	34	647	16.6	6,679	1.0	35	99	2.5	1,056	0.2	49
75-84	1,472	34.8	15,261	0.5	34	708	16.7	7,152	1.0	32	135	3.2	1,499	0.1	4
85 and older	714	33.4	6,976	0.6	39	304	14.2	2,992	0.9	30	97	4.5	976	0.1	5
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

All Medicaid Beneficiaries

Table 7B

Source: Data for this table are from the MAX 1999 file for Maryland, released by CMS in 11/2003. 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](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<sup>a, b, c</sup>  
 MARYLAND, 1999

Beneficiary Characteristics	CALCIUM BLOCKERS					ANTIHYPERTENSIVE					ANTIDIABETIC				
	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 \$
<b>All</b>	<b>17,003</b>	<b>4.9 %</b>	<b>177,406</b>	<b>0.6</b>	<b>\$32</b>	<b>25,461</b>	<b>7.3 %</b>	<b>262,370</b>	<b>0.6</b>	<b>\$22</b>	<b>19,421</b>	<b>5.6 %</b>	<b>198,998</b>	<b>0.6</b>	<b>\$23</b>
<b>Female</b>	12,632	5.8	133,028	0.6	32	17,626	8.1	183,592	0.6	22	14,190	6.5	146,657	0.6	23
<b>Disabled</b>	4,361	16.4	46,956	0.6	33	6,318	23.7	66,961	0.5	21	5,589	21.0	59,048	0.6	26
5 and younger	0	0.0	0	0.0	0	4	0.9	40	0.6	24	1	0.2	12	0.5	73
6-14	3	0.6	34	1.1	57	8	1.6	80	0.5	18	2	0.4	3	0.7	15
15-20	7	1.2	80	0.7	31	15	2.5	168	0.8	40	1	0.2	12	0.8	34
21-44	410	5.1	4,213	0.5	33	680	8.5	6,795	0.5	19	584	7.3	5,939	0.6	27
45-64	1,801	16.7	18,042	0.6	32	2,713	25.1	26,714	0.5	21	2,714	25.1	26,842	0.6	27
65-74	1,526	34.2	17,531	0.6	34	2,044	45.9	23,343	0.5	21	1,805	40.5	20,674	0.6	26
75-84	530	35.0	6,109	0.6	33	742	49.0	8,583	0.5	21	440	29.1	5,090	0.6	22
85 and older	84	28.0	947	0.6	32	112	37.3	1,238	0.5	20	42	14.0	476	0.7	21
<b>Other Eligibles</b>	8,271	4.3	86,072	0.7	31	11,307	5.9	116,624	0.6	22	8,600	4.5	87,602	0.6	20
5 and younger	0	0.0	0	0.0	0	3	0.0	18	0.9	9	0	0.0	0	0.0	0
6-14	3	0.0	18	0.6	8	34	0.1	258	1.1	8	16	0.0	53	0.8	30
15-20	6	0.0	30	0.4	11	33	0.1	315	0.6	7	23	0.1	104	0.6	33
21-44	200	0.3	847	0.4	26	295	0.5	1,218	0.4	13	267	0.4	1,090	0.5	20
45-64	154	4.0	653	0.5	27	220	5.8	1,023	0.4	17	207	5.4	983	0.6	22
65-74	1,930	25.7	20,684	0.6	32	2,639	35.2	28,356	0.6	22	2,463	32.8	25,921	0.6	23
75-84	3,322	28.9	36,283	0.7	32	4,514	39.3	48,917	0.6	22	3,598	31.3	38,579	0.6	21
85 and older	2,656	24.1	27,557	0.7	30	3,569	32.4	36,519	0.7	23	2,026	18.4	20,872	0.7	17
<b>Male</b>	4,371	3.4	44,378	0.6	34	7,835	6.0	78,778	0.6	21	5,231	4.0	52,241	0.6	22
<b>Disabled</b>	2,316	9.1	23,659	0.6	36	4,018	15.7	41,075	0.6	20	2,704	10.6	27,251	0.6	24
5 and younger	0	0.0	0	0.0	0	6	1.1	31	0.3	7	0	0.0	0	0.0	0
6-14	6	0.6	62	0.8	44	45	4.4	446	0.6	12	1	0.1	12	0.5	14
15-20	7	0.8	75	0.6	32	30	3.5	263	0.6	11	4	0.5	22	2.0	77
21-44	587	5.2	5,988	0.6	40	1,047	9.3	10,926	0.5	18	631	5.6	6,418	0.6	26
45-64	1,200	12.6	11,648	0.6	36	2,002	21.0	19,415	0.6	21	1,424	15.0	13,628	0.6	24
65-74	417	22.3	4,769	0.6	32	704	37.7	7,888	0.5	21	539	28.9	6,018	0.6	23
75-84	85	21.5	955	0.5	31	146	37.0	1,689	0.5	22	96	24.3	1,073	0.5	22
85 and older	14	19.4	162	0.5	26	38	52.8	417	0.6	25	9	12.5	80	0.6	15
<b>Other Eligibles</b>	2,055	2.0	20,719	0.7	31	3,817	3.7	37,703	0.6	22	2,527	2.4	24,990	0.6	20
5 and younger	1	0.0	5	0.2	9	10	0.0	59	0.5	6	4	0.0	8	0.9	58
6-14	2	0.0	15	0.7	15	125	0.3	867	1.0	8	14	0.0	62	1.1	41
15-20	7	0.0	41	0.5	26	62	0.4	450	0.7	11	15	0.1	42	1.0	36
21-44	42	0.8	210	0.4	23	91	1.7	486	0.4	15	57	1.1	257	0.5	21
45-64	42	3.4	218	0.6	35	76	6.1	358	0.6	22	64	5.2	346	0.5	20
65-74	721	18.5	7,584	0.7	32	1,296	33.3	13,500	0.6	22	919	23.6	9,570	0.6	21
75-84	859	20.3	8,943	0.7	32	1,498	35.4	15,592	0.6	23	1,101	26.0	11,368	0.6	20
85 and older	381	17.8	3,703	0.7	30	659	30.9	6,391	0.7	25	353	16.5	3,337	0.6	14
<b>Unknown</b>	0	0.0	0	0.0	0	1	11.1	7	0.7	4	1	11.1	7	0.4	11

Table 7C  
 All Medicaid Beneficiaries

Source: Data for this table are from the MAX 1999 file for Maryland, released by CMS in 11/2003. 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](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<sup>a, b, c</sup>  
 MARYLAND, 1999

Beneficiary Characteristics	ANTIHYPERTENSIVE				ANALGESICS - Narcotic				No. of Bene Mos		
	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean Rx \$			
<b>All</b>	<b>9,398</b>	<b>2.7 %</b>	<b>100,935</b>	<b>0.6</b>	<b>29,874</b>	<b>8.6 %</b>	<b>291,138</b>	<b>0.4</b>	<b>\$14</b>	<b>347,024</b>	<b>1,441,532</b>
<b>Female</b>	7,025	3.2	76,201	0.6	21,488	9.9	210,887	0.4	13	217,355	941,287
<b>Disabled</b>	3,296	12.4	36,218	0.6	8,806	33.1	93,807	0.4	15	26,612	226,884
5 and younger	0	0.0	0	0.0	9	1.9	91	0.2	1	464	2,008
6-14	1	0.2	12	0.1	9	1.8	90	0.2	6	507	2,493
15-20	1	0.2	8	0.4	35	5.9	312	0.2	4	589	3,210
21-44	241	3.0	2,686	0.6	2,224	27.9	22,820	0.4	22	7,978	63,056
45-64	1,416	13.1	14,621	0.6	3,936	36.4	40,984	0.4	16	10,804	87,223
65-74	1,266	28.4	14,574	0.6	1,867	41.9	21,230	0.3	11	4,456	48,756
75-84	343	22.7	3,981	0.6	642	42.4	7,382	0.3	7	1,514	17,087
85 and older	28	9.3	336	0.6	84	28.0	898	0.2	3	300	3,051
<b>Other Eligibles</b>	3,729	2.0	39,983	0.6	12,680	6.6	117,066	0.4	11	190,743	714,403
5 and younger	1	0.0	8	0.1	17	0.1	50	0.4	2	31,900	66,641
6-14	0	0.0	0	0.0	56	0.1	240	0.3	2	40,042	84,276
15-20	0	0.0	0	0.0	247	1.0	1,155	0.2	2	24,694	73,050
21-44	64	0.1	281	0.5	1,823	3.0	7,512	0.4	11	60,293	187,915
45-64	78	2.1	371	0.5	237	6.2	1,030	0.5	10	3,803	10,240
65-74	1,443	19.2	15,595	0.6	2,250	30.0	24,069	0.4	10	7,503	70,051
75-84	1,649	14.3	18,290	0.6	4,060	35.3	43,365	0.4	12	11,495	116,429
85 and older	494	4.5	5,438	0.6	3,990	36.2	39,645	0.5	12	11,013	105,801
<b>Male</b>	2,373	1.8	24,734	0.6	8,386	6.5	80,251	0.4	16	129,660	500,222
<b>Disabled</b>	1,475	5.8	15,570	0.6	5,155	20.1	51,865	0.4	18	25,591	200,049
5 and younger	0	0.0	0	0.0	5	0.9	58	0.4	6	560	2,212
6-14	0	0.0	0	0.0	13	1.3	136	0.2	8	1,028	4,998
15-20	3	0.3	30	0.3	24	2.8	226	0.3	6	861	4,968
21-44	378	3.3	4,130	0.6	2,299	20.4	23,263	0.4	18	11,291	90,735
45-64	717	7.5	7,120	0.6	2,193	23.0	21,293	0.5	20	9,518	72,424
65-74	317	17.0	3,614	0.6	513	27.5	5,653	0.3	9	1,866	19,693
75-84	49	12.4	544	0.7	89	22.5	1,030	0.3	11	395	4,245
85 and older	11	15.3	132	0.4	19	26.4	206	0.3	5	72	774
<b>Other Eligibles</b>	898	0.9	9,164	0.6	3,231	3.1	28,386	0.4	12	104,069	300,173
5 and younger	0	0.0	0	0.0	19	0.1	75	0.3	2	32,364	67,159
6-14	0	0.0	0	0.0	64	0.2	249	0.3	10	39,416	84,205
15-20	1	0.0	3	0.3	130	0.8	541	0.3	4	15,389	37,709
21-44	26	0.5	123	0.5	265	4.9	1,069	0.5	23	5,398	13,238
45-64	40	3.2	195	0.5	81	6.5	395	0.6	19	1,238	3,438
65-74	431	11.1	4,541	0.6	914	23.5	9,334	0.4	13	3,895	35,243
75-84	330	7.8	3,573	0.6	1,163	27.5	11,389	0.4	12	4,234	39,989
85 and older	70	3.3	729	0.6	595	27.9	5,334	0.4	10	2,135	19,192
<b>Unknown</b>	0	0.0	0	0.0	2	22.2	14	1.6	55	9	23

Table 7D

All Medicaid Beneficiaries

Source: Data for this table are from the MAX 1999 file for Maryland, released by CMS in 11/2003. 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](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<sup>a, b</sup>  
 MARYLAND, 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
<b>All</b>	<b>\$212</b>	<b>6.1</b>	<b>15,510</b>	<b>155,144</b>
<b>Age</b>				
0-64	312	7.5	1,695	17,826
65-74	251	6.8	2,091	21,458
75-84	212	6.2	4,961	49,626
85 and older	173	5.4	6,763	66,234
Unknown	0	0.0	0	0
<b>Gender</b>				
Female	202	6.0	11,309	113,916
Male	240	6.3	4,201	41,228
Unknown	0	0.0	0	0
<b>Race</b>				
White	209	6.2	10,290	102,071
African American	219	5.8	4,547	46,800
Other/unknown	224	6.1	673	6,273
<b>Basis of Eligibility</b>				
Aged	198	5.9	13,310	131,706
Disabled	291	7.2	2,191	23,388
Adults	272	6.1	6	29
Children	172	4.9	3	21
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 1999 file for Maryland, released by CMS in 11/2003. 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 7,508 beneficiaries who were in nursing facilities for part of their enrollment and their 67,492 benefit months were excluded from the analysis. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

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

TABLE 9  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,  
 BY BRAND STATUS AND THERAPEUTIC CATEGORY<sup>a, b, c, d, e</sup>  
 MARYLAND, 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	0.4	0.3	0.0	0.1	\$24	\$22	\$1	\$2	\$55	\$78	\$34	\$12	45,587	\$2,494,533	9,967	64.3 %	105,056
Biologicals	0.1	0.0	0.0	0.1	2	0	0	1	15	17	0	15	203	3,141	189	1.2	1,974
Antineoplastic Agents	0.6	0.1	0.4	0.1	71	18	48	4	123	220	122	44	5,870	723,822	1,068	6.9	10,264
Endocrine/Metabolic Drugs	1.1	0.4	0.3	0.4	24	17	4	4	22	43	12	9	60,042	1,322,863	5,413	34.9	55,393
Cardiovascular Agents	1.9	0.5	0.6	0.9	48	20	17	11	25	40	31	13	199,379	5,072,283	10,291	66.4	105,011
Respiratory Agents	0.8	0.3	0.0	0.5	20	12	1	7	25	45	22	14	47,099	1,169,254	5,624	36.3	59,446
Gastrointestinal Agents	1.1	0.4	0.1	0.6	50	36	6	8	45	87	56	14	87,945	3,996,465	7,677	49.5	79,884
Genitourinary Agents	0.5	0.2	0.0	0.3	14	10	0	4	27	48	25	12	16,312	433,795	2,882	18.6	30,772
CNS Drugs	1.5	0.8	0.1	0.6	75	59	10	6	50	75	70	11	152,791	7,715,621	9,971	64.3	103,239
Stimulants/Anti-obesity/Anorexia	0.9	0.0	0.0	0.8	10	1	1	9	12	57	16	11	1,655	20,026	187	1.2	1,943
Miscellaneous Psychological/Neurological Agents	0.7	0.7	0.0	0.0	69	69	0	0	100	103	110	14	4,633	461,218	662	4.3	6,672
Analgesics and Anesthetics	0.9	0.2	0.1	0.5	24	15	4	5	28	67	37	9	53,969	1,529,766	6,186	39.9	63,133
Neuromuscular Agents	1.3	0.3	0.4	0.5	44	20	14	10	35	61	35	19	70,607	2,470,692	5,277	34.0	56,438
Nutritional Products	0.7	0.0	0.3	0.4	10	0	6	4	14	18	20	10	42,008	587,905	5,500	35.5	56,717
Hematological Agents	1.0	0.1	0.5	0.4	43	30	8	4	41	199	18	11	43,487	1,802,175	4,144	26.7	42,381
Topical Products	0.6	0.3	0.1	0.2	19	11	5	2	30	45	38	10	64,192	1,927,330	9,565	61.7	101,914
Miscellaneous Products	0.2	0.0	0.0	0.2	7	1	1	5	30	106	182	21	2,500	73,978	981	6.3	10,118
Unknown Therapeutic Category	0.6	0.0	0.0	0.0	14	0	0	0	26	0	0	0	44,249	1,133,016	7,531	48.6	80,365
<b>TOTAL NO. OF RX AND RX \$</b>	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	942,528	32,937,883	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 1999 file for Maryland, released by CMS in 11/2003. 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 7,508 beneficiaries who were in nursing facilities for part of their enrollment and their 67,492 benefit months were excluded from the analysis.

b. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 1999. A beneficiary who used drugs from two or more categories was counted as a user for each category. Therefore, the sum of users across categories may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

d. For information about these therapeutic categories, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](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](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).

In Maryland, 4.6 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<sup>a, b, c, d</sup>  
 MARYLAND, 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	\$3,524,881	6,422	41.4 %	68,624	0.7	\$76	\$51
ANTIDEPRESSANTS	3,276,108	8,031	51.8	83,861	0.8	48	39
ULCER DRUGS	3,134,408	6,644	42.8	69,275	0.7	63	45
ANTICONVULSANT	1,714,003	4,099	26.4	44,000	1.1	36	39
ANTIHYPERTENSIVE	1,459,171	5,317	34.3	54,678	0.9	31	27
DERMATOLOGICAL	1,390,356	13,215	85.2	143,661	0.3	33	10
CALCIUM BLOCKERS	1,290,549	3,652	23.5	38,113	0.9	38	34
ANTIANGINAL AGENTS	1,048,189	3,143	20.3	32,133	0.8	40	33
ANTIIDIABETIC	1,042,773	4,692	30.3	48,917	0.8	28	21
ANALGESICS - Narcotic	1,021,165	5,803	37.4	58,440	0.6	27	17

Source: Data for this table are from the MAX 1999 file for Maryland, released by CMS in 11/2003. 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 7,508 beneficiaries who were in nursing facilities for part of their enrollment and their 67,492 benefit months were excluded from the analysis.

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

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

d. The top 10 drug groups were determined based on total 1999 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](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<sup>a, b, c, d</sup> MARYLAND, 1999

Beneficiary Characteristics	All Top 10 Drug Groups				ANTIPSYCHOTICS				ANTIDEPRESSANTS			
	No. of Rx	Rx \$	No. of Users	Mean No. of Rx	Residents	No. of Users	Mean No. of Rx	Mean Rx \$	Residents	No. of Users	Mean No. of Rx	Mean Rx \$
<b>All</b>	<b>436,424</b>	<b>\$18,901,603</b>	<b>6,422</b>	<b>41.4 %</b>	<b>68,624</b>	<b>0.7</b>	<b>\$51</b>	<b>8,031</b>	<b>51.8 %</b>	<b>83,861</b>	<b>0.8</b>	<b>\$39</b>
<b>Female</b>	313,104	13,414,279	4,640	41.0	49,965	0.7	50	5,973	52.8	62,639	0.8	39
<b>Disabled</b>	40,975	1,851,613	497	45.9	5,664	0.8	68	659	60.8	7,305	0.9	44
64 or younger	29,524	1,334,485	342	44.2	3,878	0.8	67	493	63.7	5,450	0.9	45
65-74	9,065	415,936	121	54.3	1,418	0.9	69	130	58.3	1,501	0.9	46
75-84	1,593	69,391	27	48.2	293	0.8	65	24	42.9	240	0.8	31
85 and older	793	31,801	7	23.3	75	0.7	68	12	40.0	114	0.6	31
<b>Other Eligibles</b>	272,129	11,562,666	4,143	40.5	44,301	0.7	47	5,314	52.0	55,334	0.8	38
64 or younger	493	23,198	10	62.5	100	0.6	46	7	43.8	84	0.7	41
65-74	33,745	1,537,427	509	53.5	5,530	0.7	64	562	59.1	5,899	0.8	41
75-84	104,890	4,567,493	1,602	45.5	17,345	0.7	53	1,995	56.7	20,978	0.8	39
85 and older	133,001	5,434,548	2,022	35.2	21,326	0.6	39	2,750	47.9	28,373	0.8	37
<b>Male</b>	123,320	5,487,324	1,782	42.4	18,659	0.7	56	2,058	49.0	21,222	0.8	40
<b>Disabled</b>	40,617	1,898,484	518	46.8	5,762	0.8	70	546	49.3	6,019	0.9	42
64 or younger	33,540	1,587,013	419	46.4	4,615	0.8	73	474	52.5	5,199	0.9	42
65-74	6,243	274,890	83	47.4	957	0.8	57	54	30.9	617	0.9	45
75-84	783	35,251	15	60.0	178	1.0	66	16	64.0	190	0.9	36
85 and older	51	1,330	1	20.0	12	0.1	2	2	40.0	13	0.5	8
<b>Other Eligibles</b>	82,703	3,588,840	1,264	40.9	12,897	0.7	50	1,512	48.9	15,203	0.8	39
64 or younger	36	817	1	50.0	12	2.1	12	0	0.0	0	0.0	0
65-74	24,111	1,073,964	357	48.1	3,720	0.7	58	392	52.8	4,119	0.8	36
75-84	37,637	1,639,586	535	39.3	5,568	0.7	51	700	51.4	6,963	0.8	41
85 and older	20,919	874,473	371	37.6	3,597	0.7	43	420	42.5	4,121	0.8	37
<b>Unknown</b>	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 Maryland, released by CMS in 11/2003. 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 7,508 beneficiaries who were in nursing facilities for part of their enrollment and their 67,492 benefit months were excluded from the analysis.

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

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

d. The top 10 drug groups were determined based on total 1999 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](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<sup>a, b, c, d</sup>  
 MARYLAND, 1999

Beneficiary Characteristics	ULCER DRUGS						ANTICONVULSANT						ANTIHYPERTENSIVE						
	Users as %			Users as %			Users as %			Users as %			Users as %			Users as %			
	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Mean No. of Rx	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Mean No. of Rx	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Mean No. of Rx	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
<b>All</b>	<b>6,644</b>	<b>42.8 %</b>	<b>0.7</b>	<b>\$45</b>	<b>4,099</b>	<b>26.4 %</b>	<b>44,000</b>	<b>1.1</b>	<b>\$39</b>	<b>5,317</b>	<b>34.3 %</b>	<b>54,678</b>	<b>0.9</b>	<b>\$27</b>					
<b>Female</b>	4,807	42.5	0.7	45	2,537	22.4	27,298	1.0	36	3,740	33.1	38,524	0.8	26					
<b>Disabled</b>	492	45.4	0.8	48	549	50.7	6,092	1.2	44	366	33.8	3,982	0.9	27					
64 or younger	363	46.9	0.7	49	408	52.7	4,485	1.2	45	253	32.7	2,689	0.8	28					
65-74	98	43.9	0.8	45	111	49.8	1,287	1.2	43	85	38.1	991	0.9	26					
75-84	17	30.4	0.9	55	22	39.3	234	1.1	53	18	32.1	201	0.9	24					
85 and older	14	46.7	0.8	46	8	26.7	86	1.0	26	10	33.3	101	0.8	22					
<b>Other Eligibles</b>	4,315	42.2	0.7	45	1,988	19.4	21,206	1.0	34	3,374	33.0	34,542	0.8	26					
64 or younger	10	62.5	0.6	57	8	50.0	60	1.3	53	4	25.0	48	0.8	30					
65-74	452	47.5	0.7	48	394	41.4	4,265	1.0	36	392	41.2	4,050	0.9	28					
75-84	1,584	45.0	0.7	44	876	24.9	9,424	1.0	34	1,247	35.4	12,914	0.8	26					
85 and older	2,269	39.5	0.7	44	710	12.4	7,457	1.0	32	1,731	30.2	17,530	0.8	26					
<b>Male</b>	1,837	43.7	0.7	46	1,562	37.2	16,702	1.2	43	1,577	37.5	16,154	0.9	28					
<b>Disabled</b>	517	46.7	0.7	46	644	58.1	7,173	1.2	49	402	36.3	4,285	0.9	29					
64 or younger	428	47.4	0.7	46	533	59.0	5,917	1.2	49	327	36.2	3,437	0.9	29					
65-74	79	45.1	0.7	44	104	59.4	1,172	1.2	51	66	37.7	743	0.9	28					
75-84	9	36.0	0.7	28	6	24.0	72	1.1	37	9	36.0	105	0.7	25					
85 and older	1	20.0	2.0	17	1	20.0	12	1.4	32	0	0.0	0	0.0	0					
<b>Other Eligibles</b>	1,320	42.7	0.7	46	918	29.7	9,529	1.1	39	1,175	38.0	11,869	0.9	28					
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	351	47.3	0.7	49	325	43.8	3,479	1.2	43	324	43.7	3,372	0.8	28					
75-84	589	43.3	0.7	46	397	29.2	4,101	1.1	39	523	38.4	5,372	0.9	27					
85 and older	380	38.5	0.7	46	196	19.8	1,949	1.0	33	328	33.2	3,125	0.9	29					
<b>Unknown</b>	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 Maryland, released by CMS in 11/2003. 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 7,508 beneficiaries who were in nursing facilities for part of their enrollment and their 67,492 benefit months were excluded from the analysis.

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

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

d. The top 10 drug groups were determined based on total 1999 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](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<sup>a, b, c, d</sup>  
 MARYLAND, 1999

Beneficiary Characteristics	DERMATOLOGICAL					CALCIUM BLOCKERS					ANTIANGINAL AGENTS				
	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 \$
<b>All</b>	<b>13,215</b>	<b>85.2 %</b>	<b>143,661</b>	<b>0.3</b>	<b>\$10</b>	<b>3,652</b>	<b>23.5 %</b>	<b>38,113</b>	<b>0.9</b>	<b>\$34</b>	<b>3,143</b>	<b>20.3 %</b>	<b>32,133</b>	<b>0.8</b>	<b>\$33</b>
<b>Female</b>	9,429	83.4	102,848	0.3	9	2,731	24.1	28,598	0.9	33	2,391	21.1	24,644	0.8	33
<b>Disabled</b>	1,116	103.0	12,607	0.3	10	248	22.9	2,735	0.9	37	138	12.7	1,518	0.9	36
64 or younger	825	106.6	9,234	0.3	10	161	20.8	1,743	0.9	37	90	11.6	974	0.9	36
65-74	224	100.4	2,609	0.3	9	64	28.7	758	0.9	37	34	15.2	405	0.8	38
75-84	39	69.6	443	0.3	7	16	28.6	161	0.9	33	6	10.7	57	1.0	45
85 and older	28	93.3	321	0.3	8	7	23.3	73	1.1	45	8	26.7	82	0.9	26
<b>Other Eligibles</b>	8,313	81.3	90,241	0.3	9	2,483	24.3	25,863	0.9	33	2,253	22.0	23,126	0.8	33
64 or younger	12	75.0	140	0.5	10	2	12.5	24	0.9	20	1	6.3	4	1.0	48
65-74	799	84.0	8,717	0.3	9	278	29.2	2,953	0.9	36	206	21.7	2,097	0.8	31
75-84	2,840	80.7	30,988	0.3	10	905	25.7	9,504	0.9	33	735	20.9	7,679	0.8	34
85 and older	4,662	81.2	50,396	0.3	9	1,298	22.6	13,382	0.9	32	1,311	22.8	13,346	0.8	33
<b>Male</b>	3,786	90.1	40,813	0.3	11	921	21.9	9,515	0.9	36	752	17.9	7,489	0.8	31
<b>Disabled</b>	1,176	106.1	13,143	0.3	13	246	22.2	2,639	0.9	37	122	11.0	1,319	0.8	30
64 or younger	963	106.6	10,734	0.3	14	205	22.7	2,162	0.9	38	83	9.2	889	0.7	31
65-74	194	110.9	2,194	0.3	11	38	21.7	443	0.9	35	33	18.9	359	0.8	30
75-84	17	68.0	191	0.2	6	3	12.0	34	0.6	18	4	16.0	47	1.0	32
85 and older	2	40.0	24	0.2	4	0	0.0	0	0.0	0	2	40.0	24	0.8	29
<b>Other Eligibles</b>	2,610	84.4	27,670	0.3	10	675	21.8	6,876	0.9	35	630	20.4	6,170	0.8	32
64 or younger	0	0.0	0	0.0	0	1	50.0	12	0.9	56	0	0.0	0	0.0	0
65-74	587	79.1	6,341	0.3	10	186	25.1	2,014	0.9	37	139	18.7	1,446	0.8	30
75-84	1,190	87.4	12,766	0.3	11	310	22.8	3,121	0.9	35	291	21.4	2,817	0.8	32
85 and older	833	84.3	8,563	0.3	8	178	18.0	1,729	0.9	33	200	20.2	1,907	0.8	32
<b>Unknown</b>	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 Maryland, released by CMS in 11/2003. 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 7,508 beneficiaries who were in nursing facilities for part of their enrollment and their 67,492 benefit months were excluded from the analysis.
- b. A user is a beneficiary who had at least one prescription filled in a given drug group during 1999. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- c. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
- d. The top 10 drug groups were determined based on total 1999 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](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<sup>a, b, c, d</sup>  
 MARYLAND, 1999

Beneficiary Characteristics	ANTIDIABETIC					ANALGESICS - Narcotic					Bene Mos among All-Year NF Residents			
	Users as %		Mean		No. of Bene Mos among Users	Users as %		Mean		No. of Bene Mos among Users		All-Year NF Residents		
	No. of Users	Residents	Rx	Rx-\$		Residents	Rx	Rx-\$	Residents					
<b>All</b>	<b>4,692</b>	<b>30.3 %</b>	<b>0.8</b>	<b>\$21</b>	<b>48,917</b>	<b>0.8</b>	<b>\$21</b>	<b>5,803</b>	<b>37.4 %</b>	<b>58,440</b>	<b>0.6</b>	<b>\$18</b>	<b>15,510</b>	<b>155,144</b>
<b>Female</b>	3,401	30.1	0.8	21	35,604	0.8	21	4,421	39.1	45,023	0.6	17	11,309	113,916
<b>Disabled</b>	430	39.7	0.8	25	4,674	0.8	25	459	42.4	4,877	0.8	24	1,083	11,711
64 or younger	293	37.9	0.8	25	3,104	0.8	25	350	45.2	3,748	0.8	26	774	8,252
65-74	109	48.9	0.8	24	1,276	0.8	24	79	35.4	827	0.6	24	223	2,560
75-84	21	37.5	0.7	18	210	0.7	18	20	35.7	200	0.6	9	56	594
85 and older	7	23.3	1.3	37	84	1.3	37	10	33.3	102	0.4	4	30	305
<b>Other Eligibles</b>	2,971	29.1	0.8	21	30,930	0.8	21	3,962	38.7	40,146	0.6	17	10,226	102,205
64 or younger	6	37.5	0.9	34	72	0.9	34	6	37.5	72	0.7	11	16	127
65-74	472	49.6	0.8	22	4,778	0.8	22	422	44.4	4,394	0.7	20	951	9,667
75-84	1,324	37.6	0.8	23	13,932	0.8	23	1,367	38.8	14,177	0.7	17	3,519	35,612
85 and older	1,169	20.4	0.7	17	12,148	0.7	17	2,167	37.8	21,503	0.6	15	5,740	56,799
<b>Male</b>	1,291	30.7	0.8	21	13,313	0.8	21	1,382	32.9	13,417	0.7	18	4,201	41,228
<b>Disabled</b>	368	33.2	0.8	24	3,903	0.8	24	401	36.2	4,099	0.9	26	1,108	11,677
64 or younger	281	31.1	0.8	25	2,948	0.8	25	356	39.4	3,626	0.9	27	903	9,423
65-74	77	44.0	0.8	20	841	0.8	20	40	22.9	428	0.7	21	175	1,916
75-84	10	40.0	0.8	40	114	0.8	40	4	16.0	44	0.6	10	25	297
85 and older	0	0.0	0.0	0	0	0.0	0	1	20.0	1	2.0	11	5	41
<b>Other Eligibles</b>	923	29.8	0.8	20	9,410	0.8	20	981	31.7	9,318	0.6	14	3,093	29,551
64 or younger	0	0.0	0.0	0	0	0.0	0	0	0.0	0	0.0	0	2	24
65-74	310	41.8	0.8	22	3,276	0.8	22	255	34.4	2,542	0.6	15	742	7,315
75-84	436	32.0	0.8	21	4,466	0.8	21	434	31.9	4,156	0.6	16	1,361	13,123
85 and older	177	17.9	0.7	14	1,668	0.7	14	292	29.6	2,620	0.4	11	988	9,089
<b>Unknown</b>	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 Maryland, released by CMS in 11/2003. 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 7,508 beneficiaries who were in nursing facilities for part of their enrollment and their 67,492 benefit months were excluded from the analysis.

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

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

d. The top 10 drug groups were determined based on total 1999 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](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<sup>a, b</sup>  
MARYLAND, 1999

Beneficiary Characteristics	No. of Beneficiaries					No. of Beneficiaries with Pharmacy Benefit Coverage					
	All	Aged	Disabled	Adults	Children	All	Aged	Disabled	Adults	Children	Unknown
<b>All</b>	<b>638,821</b>	<b>44,362</b>	<b>108,648</b>	<b>114,654</b>	<b>371,157</b>	<b>5,744,090</b>	<b>446,687</b>	<b>1,161,175</b>	<b>829,620</b>	<b>3,306,608</b>	<b>0</b>
<b>Age</b>											
5 and younger	147,984	1	3,499	8,102	136,382	1,277,668	4	37,084	19,903	1,220,677	0
6-14	178,166	2	9,371	14,431	154,362	1,658,053	24	106,637	34,667	1,516,725	0
15-20	74,413	1	6,162	15,541	52,709	639,782	12	67,992	80,190	491,588	0
21-44	136,023	8	39,639	71,221	25,155	1,142,003	87	420,702	650,652	70,562	0
45-64	47,141	63	39,498	5,112	2,468	461,810	561	411,174	43,335	6,740	0
65-74	21,756	13,563	7,985	153	55	229,719	139,148	89,755	643	173	0
75-84	19,384	17,210	2,089	74	11	200,657	176,854	23,580	182	41	0
85 and older	13,940	13,513	405	20	2	134,310	129,990	4,251	48	21	0
Unknown	14	1	0	0	13	88	7	0	0	81	0
<b>Gender</b>											
Female	379,003	32,832	55,180	93,639	197,352	3,384,484	334,065	597,907	753,405	1,699,107	0
Male	259,818	11,530	53,468	21,015	173,805	2,359,606	112,622	563,268	76,215	1,607,501	0
Unknown	0	0	0	0	0	0	0	0	0	0	0
<b>Race</b>											
White	209,323	22,080	44,750	32,803	109,690	1,905,489	215,311	477,431	244,637	968,110	0
African American	364,612	14,611	56,616	72,278	221,107	3,283,676	149,937	608,483	523,457	2,001,799	0
Other/unknown	64,886	7,671	7,282	9,573	40,360	554,925	81,439	75,261	61,526	336,699	0
<b>Use of Nursing Facilities</b>											
All year	15,510	13,310	2,191	6	3	155,149	131,706	23,390	32	21	0
Part year	7,552	5,850	1,587	101	14	70,863	53,959	15,734	1,065	105	0
None	615,759	25,202	104,870	114,547	371,140	5,518,078	261,022	1,122,051	828,523	3,306,482	0
<b>Maintenance Assistance Status</b>											
Cash	222,477	19,686	87,481	32,708	82,602	2,363,653	221,659	990,201	303,964	847,829	0
Medically needy	71,676	23,019	18,266	11,019	19,372	616,310	210,504	140,898	86,573	178,335	0
Poverty related	235,731	1,635	1,380	24,852	207,864	2,103,604	14,281	12,756	222,738	1,853,829	0
Other/unknown	108,937	22	1,521	46,075	61,319	660,523	243	17,320	216,345	426,615	0
<b>Dual Status<sup>c</sup></b>											
Full dual, all year	68,617	36,915	30,868	437	397	717,943	372,273	340,655	3,638	1,377	0
Full dual, part year	2,108	1,109	985	11	3	21,641	11,344	10,141	124	32	0
Non-dual, all year	568,096	6,338	76,795	114,206	370,757	5,004,506	63,070	810,379	825,858	3,305,199	0
<b>Managed Care Status</b>											
FFS all year	151,538	37,917	36,519	36,749	40,353	947,813	376,350	362,359	91,511	117,593	0
FFS part year, with Rx claims	45,901	1,373	9,960	14,443	20,125	429,325	14,570	100,796	131,068	182,891	0
FFS part year, no Rx claims	149,585	751	5,724	30,476	112,634	1,308,922	6,704	54,480	261,497	986,241	0
MC all year, with Rx claims	43,595	785	23,101	5,472	14,237	498,829	9,138	269,218	59,888	160,585	0
MC all year, no Rx claims	248,202	3,536	33,344	27,514	183,808	2,559,201	39,925	374,322	285,656	1,859,298	0

Source: Data for this table are from the MAX 1999 file for Maryland, released by CMS in 11/2003. 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  
 MARYLAND, 1999

	Bene Mos in Cell B of Table 1		Bene Mos in Cell C of Table 1		Bene Mos in Cell C of Table 1	
	No. of Bene Mos	No. of Bene Mos	No. of Bene Mos	No. of Bene Mos	No. of Bene Mos	No. of Bene Mos
<b>All</b>	<b>638,821</b>	<b>5,744,090</b>	<b>347,024</b>	<b>1,441,532</b>	<b>291,797</b>	<b>4,302,558</b>
FFS all year	151,538	947,813	151,538	947,813	0	0
FFS part year, with Rx claims	45,901	429,325	45,901	146,858	0	282,467
FFS part year, with no Rx claims	149,585	1,308,922	149,585	346,861	0	962,061
MC all year, with Rx claims	43,595	498,829	0	0	43,595	498,829
MC all year, with no Rx claims	248,202	2,559,201	0	0	248,202	2,559,201

Source: Data for this table are from the MAX 1999 file for Maryland, released by CMS in 11/2003. 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.