

STATISTICAL COMPENDIUM: MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 1999 RHODE ISLAND

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TABLE 1
OVERVIEW OF BENEFICIARY SELECTION CRITERIA FOR STUDY POPULATION
RHODE ISLAND, 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	169,491 (A)	31,518 (E)
2. Benes who had Medicaid pharmacy benefits during at least one month ^b	160,283 (B)	23,474 (F)
3. Benes who had fee-for-service pharmacy benefit coverage during at least one month ^{c, d, e}	81,945 (C)	23,280 (G)
4. Benes who were all-year nursing facility residents ^f	5,026 (D)	4,519 (H)

Source: Data for this table are from the MAX 1999 file for Rhode Island, released by CMS in 12/2003. 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 Rhode Island in 1999 was \$77,608,814, of which \$11,873,171 was excluded from our analysis because those claims were made for beneficiaries who were outside the study population or took place during months that were excluded from the analysis.
- e. The 18 states where no PHP provided a pharmacy benefit in 1999 were AL, AR, CO, FL, GA, IA, IL, KY, MA, MI, MT, NE, NY, NC, OR, PA, UT, and WI. This list was constructed based on consultation with CMS staff and two CMS documents, which can be found at <http://www.cms.hhs.gov/medicaid/managedcare/mmcms699.asp> and at <http://www.cms.hhs.gov/medicaid/managedcare/mmcms99.asp>.
- f. Cell D represents the study population for Tables 8 through 10D. All-year nursing facility residents are the beneficiaries who resided in nursing facilities throughout their enrollment in 1999. These beneficiaries were identified by comparing the number of months during which the MAX files contained at least one claim from nursing facilities to the number of Medicaid eligible months. If the former is greater than or equal to the latter, the beneficiary was considered an all-year resident. If the former is less than the latter but not equal to zero, the beneficiary was considered a part-year resident. Part-year residents were excluded from the analysis because they are likely to be short-term residents and the level and pattern of their pharmacy benefit use may differ substantially from longer-term residents. The number of part-year residents and their benefit months are presented in footnotes to Tables 8 through 10D. Residents of mental hospitals for the aged, inpatient psychiatric facilities for individuals under age 21, or intermediate care facilities for the mentally retarded were excluded from the analysis.
- g. Pharmacy benefit use and reimbursement among full dual eligible beneficiaries are presented in Tables 11 through 18. To determine Medicaid-Medicare dual eligibility status, two MAX data elements ("Eligible Medicare Crossover Code -- Annual New Values" and "Eligible Restricted Benefits Flag") were used in combination. Beneficiaries represented in Cell G, the dual study population, include all dual eligible beneficiaries who had a fee-for-service pharmacy benefit at least during one month in 1999. All benefit months of such dual eligible beneficiaries, of which 0.5 percent were restricted benefit months without a pharmacy benefit in Rhode Island, 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}
 RHODE ISLAND, 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	81,945	11,917	30,358	15,972	23,698	0	569,020	125,507	330,221	27,359	85,933	0	569,020	125,507	330,221	27,359	85,933	0	
Age																			
5 and younger	9,494	0	1,018	4	8,472	0	33,654	0	9,707	17	23,930	0	33,654	0	9,707	17	23,930	0	
6-14	13,453	0	2,667	3	10,783	0	68,430	0	28,764	6	39,660	0	68,430	0	28,764	6	39,660	0	
15-20	7,622	0	1,664	1,592	4,366	0	42,696	0	17,866	3,003	21,827	0	42,696	0	17,866	3,003	21,827	0	
21-44	23,693	0	10,866	12,760	67	0	139,519	0	117,648	21,384	487	0	139,519	0	117,648	21,384	487	0	
45-64	12,311	10	10,728	1,570	3	0	120,080	117	117,105	2,840	18	0	120,080	117	117,105	2,840	18	0	
65-74	5,947	3,426	2,479	39	3	0	64,986	36,487	28,411	82	6	0	64,986	36,487	28,411	82	6	0	
75-84	5,228	4,459	764	2	3	0	56,466	47,648	8,794	21	3	0	56,466	47,648	8,794	21	3	0	
85 and older	4,197	4,022	172	2	1	0	43,189	41,255	1,926	6	2	0	43,189	41,255	1,926	6	2	0	
Unknown	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Gender																			
Female	48,094	9,047	16,476	11,272	11,299	0	336,233	96,339	180,735	19,595	39,564	0	336,233	96,339	180,735	19,595	39,564	0	
Male	33,851	2,870	13,882	4,700	12,399	0	232,787	29,168	149,486	7,764	46,369	0	232,787	29,168	149,486	7,764	46,369	0	
Unknown	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Race																			
White	46,156	8,469	19,858	7,614	10,215	0	368,044	89,686	219,385	13,270	45,703	0	368,044	89,686	219,385	13,270	45,703	0	
African American	6,982	408	2,938	1,318	2,318	0	50,265	4,429	31,949	2,515	11,372	0	50,265	4,429	31,949	2,515	11,372	0	
Other/unknown	28,807	3,040	7,562	7,040	11,165	0	150,711	31,392	78,887	11,574	28,858	0	150,711	31,392	78,887	11,574	28,858	0	
Use of Nursing Facilities																			
All year	5,026	3,381	1,645	0	0	0	57,348	37,897	19,451	0	0	0	57,348	37,897	19,451	0	0	0	
Part year	2,531	1,878	649	3	1	0	23,483	16,652	6,809	10	12	0	23,483	16,652	6,809	10	12	0	
None	74,388	6,658	28,064	15,969	23,697	0	488,189	70,958	303,961	27,349	85,921	0	488,189	70,958	303,961	27,349	85,921	0	
Maintenance Assistance Status																			
Cash	41,805	5,310	25,524	4,429	6,542	0	363,202	59,106	281,659	8,240	14,197	0	363,202	59,106	281,659	8,240	14,197	0	
Medically needy	425	179	234	12	0	0	4,221	1,839	2,363	19	0	0	4,221	1,839	2,363	19	0	0	
Poverty-related	6,584	33	29	1,064	5,458	0	12,182	340	292	1,697	9,853	0	12,182	340	292	1,697	9,853	0	
Other/unknown	33,131	6,395	4,571	10,467	11,698	0	189,415	64,222	45,907	17,403	61,883	0	189,415	64,222	45,907	17,403	61,883	0	
Dual Medicare Status^c																			
Full dual, all year	22,991	10,945	11,581	455	10	0	248,182	115,747	131,432	959	44	0	248,182	115,747	131,432	959	44	0	
Full dual, part year	289	188	86	12	3	0	3,025	2,019	916	69	21	0	3,025	2,019	916	69	21	0	
Non-dual, all year	58,665	784	18,691	15,505	23,665	0	317,813	7,741	197,873	26,331	85,868	0	317,813	7,741	197,873	26,331	85,868	0	
Managed Care Status																			
FFS all year	50,504	11,911	29,221	2,260	7,112	0	510,354	125,468	323,815	6,252	54,819	0	510,354	125,468	323,815	6,252	54,819	0	
FFS part year, with Rx claims	5,454	4	809	2,503	2,138	0	16,842	30	4,953	4,778	7,081	0	16,842	30	4,953	4,778	7,081	0	
FFS part year, no Rx claims	25,987	2	328	11,209	14,448	0	41,824	9	1,453	16,329	24,033	0	41,824	9	1,453	16,329	24,033	0	

Source: Data for this table are from the MAX 1999 file for Rhode Island, released by CMS in 12/2003. 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}
 RHODE ISLAND, 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 Benefes
All	51.3 %	16.3	\$802	\$49	\$19,097	4.2 %	\$14	81,945
Age								
5 and younger	21.7	1.3	48	38	2,747	1.8	1	9,494
6-14	28.1	2.9	129	44	3,261	3.9	1	13,453
15-20	30.9	3.2	177	55	3,550	5.0	2	7,622
21-44	45.4	12.5	799	64	13,645	5.9	8	23,693
45-64	77.5	33.0	1,723	52	31,711	5.4	35	12,311
65-74	84.7	33.2	1,480	45	46,888	3.2	41	5,947
75-84	88.3	37.3	1,473	40	53,891	2.7	35	5,228
85 and older	92.5	38.8	1,324	34	46,127	2.9	22	4,197
Unknown	0.0	0.0	0	0	0	0.0	0	0
Basis of Eligibility								
Aged	87.4	34.8	1,337	38	46,151	2.9	30	11,917
Disabled	79.8	29.0	1,593	55	31,338	5.1	26	30,358
Adults	17.8	0.7	26	39	1,893	1.3	1	15,972
Children	19.2	1.2	44	36	1,405	3.1	0	23,698
Unknown	0.0	0.0	0	0	0	0.0	0	0
Gender								
Female	54.9	19.3	887	46	21,243	4.2	18	48,094
Male	46.2	11.9	682	57	16,048	4.2	9	33,851
Unknown	0.0	0.0	0	0	0	0.0	0	0
Race								
White	61.2	22.4	1,086	48	26,684	4.1	18	46,156
African American	48.7	11.7	652	56	12,462	5.2	15	6,982
Other/unknown	36.0	7.5	384	51	8,548	4.5	9	28,807
Use of Nursing Facilities								
Entire year	92.0	50.2	2,017	40	86,317	2.3	36	5,026
Part year	94.4	42.0	1,705	41	62,300	2.7	34	2,531
None	47.1	13.1	689	53	13,085	5.3	12	74,388
Maintenance Assistance Status								
Cash	64.6	21.4	1,115	52	23,816	4.7	20	41,805
Medically needy	88.0	35.2	1,955	56	41,839	4.7	29	425
Poverty related	11.2	0.4	13	36	1,033	1.3	0	6,584
Other/unknown	41.9	12.7	550	43	16,440	3.3	10	33,131

Source: Data for this table are from the MAX 1999 file for Rhode Island, released by CMS in 12/2003. 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}
 RHODE ISLAND, 1999

Beneficiary Characteristics	Mean No. of Rx	Mean Rx \$	Rx \$ as % of All Services	No. of Rx, % with:						Mean \$, All Services	Benes	Bene Mos
				None	More than 0, but 1 or Less	More than 1, but 2 or Less	More than 2, but 5 or Less	More than 5, but 10 or Less	More than 10			
All	2.3	\$116	4.2 %	48.7 %	20.2 %	8.1 %	14.5 %	7.2 %	1.3 %	\$2,750	81,945	569,020
Age												
5 and younger	0.4	14	1.8	78.3	17.8	2.3	1.4	0.3	0.0	775	9,494	33,654
6-14	0.6	25	3.9	71.9	20.4	4.4	3.0	0.3	0.0	641	13,453	68,430
15-20	0.6	32	5.0	69.1	22.6	4.4	3.4	0.5	0.1	634	7,622	42,696
21-44	2.1	136	5.9	54.6	19.7	7.4	12.2	5.2	1.0	2,317	23,693	139,519
45-64	3.4	177	5.4	22.5	20.7	12.3	25.9	15.3	3.4	3,251	12,311	120,080
65-74	3.0	136	3.2	15.3	25.7	14.6	27.0	14.6	2.8	4,291	5,947	64,986
75-84	3.5	136	2.7	11.7	19.5	14.3	33.3	18.3	2.9	4,990	5,228	56,466
85 and older	3.8	129	2.9	7.5	15.8	14.2	39.5	21.3	1.7	4,483	4,197	43,189
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Basis of Eligibility												
Aged	3.3	127	2.9	12.6	21.1	14.2	32.4	17.5	2.3	4,382	11,917	125,507
Disabled	2.7	146	5.1	20.2	29.0	12.3	23.8	12.2	2.5	2,881	30,358	330,221
Adults	0.4	15	1.3	82.2	10.5	3.6	2.8	0.8	0.1	1,105	15,972	27,359
Children	0.3	12	3.1	80.8	15.1	2.6	1.4	0.1	0.0	387	23,698	85,933
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Gender												
Female	2.8	127	4.2	45.1	18.9	8.6	16.7	9.0	1.7	3,039	48,094	336,233
Male	1.7	99	4.2	53.8	22.1	7.4	11.3	4.7	0.7	2,334	33,851	232,787
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	2.8	136	4.1	38.8	20.2	9.3	19.2	10.5	1.9	3,346	46,156	368,044
African American	1.6	91	5.2	51.3	25.5	7.3	10.8	4.4	0.7	1,731	6,982	50,265
Other/unknown	1.4	73	4.5	64.0	19.0	6.3	7.8	2.6	0.3	1,634	28,807	150,711
Use of Nursing Facilities												
Entire year	4.4	177	2.3	8.0	9.2	11.2	39.7	28.0	4.0	7,565	5,026	57,348
Part year	4.5	184	2.7	5.6	13.3	13.4	37.5	26.0	4.2	6,715	2,531	23,483
None	2.0	105	5.3	52.9	21.2	7.7	12.0	5.2	1.0	1,994	74,388	488,189
Maintenance Assistance Status												
Cash	2.5	128	4.7	35.4	25.0	10.6	18.7	8.7	1.6	2,741	41,805	363,202
Medically needy	3.5	197	4.7	12.0	19.3	16.0	31.1	18.4	3.3	4,213	425	4,221
Poverty related	0.2	7	1.3	88.8	8.7	1.6	0.8	0.1	0.0	558	6,584	12,182
Other/unknown	2.2	96	3.3	58.1	16.4	6.1	11.6	6.7	1.1	2,876	33,131	189,415

Source: Data for this table are from the MAX 1999 file for Rhode Island, released by CMS in 12/2003. 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}
 RHODE ISLAND, 1999

Beneficiary Characteristics	All Rx		Patented Brand-Name Drugs		Off-Patent Brand-Name Drugs		Generic Drugs	
	No. of Rx	Rx \$	No. of Rx	\$ per Rx	No. of Rx	Rx \$	No. of Rx	Rx \$
All	2.3	\$116	0.9	\$77	0.3	\$19	1.1	\$15
Age								
5 and younger	0.4	14	0.1	10	0.0	1	0.2	3
6-14	0.6	25	0.2	15	0.1	3	0.3	6
15-20	0.6	32	0.3	23	0.1	4	0.2	4
21-44	2.1	136	0.8	96	0.2	21	1.0	14
45-64	3.4	177	1.3	118	0.4	29	1.5	23
65-74	3.0	136	1.2	87	0.4	23	1.3	19
75-84	3.5	136	1.2	83	0.5	27	1.6	21
85 and older	3.8	129	1.1	77	0.6	25	1.9	22
Unknown	0.0	0	0.0	0	0.0	0	0.0	0
Basis of Eligibility								
Aged	3.3	127	1.1	79	0.5	24	1.6	19
Disabled	2.7	146	1.0	99	0.3	24	1.2	18
Adults	0.4	15	0.1	10	0.0	2	0.2	2
Children	0.3	12	0.1	8	0.0	2	0.2	3
Unknown	0.0	0	0.0	0	0.0	0	0.0	0
Gender								
Female	2.8	127	1.0	83	0.4	22	1.3	17
Male	1.7	99	0.7	67	0.2	16	0.8	13
Unknown	0.0	0	0.0	0	0.0	0	0.0	0
Race								
White	2.8	136	1.0	89	0.4	24	1.3	19
African American	1.6	91	0.6	64	0.2	13	0.7	11
Other/unknown	1.4	73	0.6	51	0.2	11	0.6	9
Use of Nursing Facilities								
Entire year	4.4	177	1.4	112	0.7	33	2.1	26
Part year	4.5	184	1.5	118	0.7	31	2.2	28
None	2.0	105	0.8	71	0.2	17	0.9	14
Maintenance Assistance Status								
Cash	2.5	128	0.9	86	0.3	21	1.1	17
Medically needy	3.5	197	1.4	140	0.5	30	1.6	24
Poverty related	0.2	7	0.1	5	0.0	1	0.1	1
Other/unknown	2.2	96	0.8	62	0.3	17	1.0	14

Source: Data for this table are from the MAX 1999 file for Rhode Island, released by CMS in 12/2003. 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 Rhode Island, 4.1 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all combined. For information about this classification method, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).

CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE 6
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d}
 RHODE ISLAND, 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	Generic	Total No. of Rx	Total Rx \$	No.	As % of All Benes	No. of Bene Mos		
																Brand-Name	Brand-Name
Anti-infective Agents	0.3	0.2	0.0	0.1	\$24	\$23	\$0	\$1	\$79	\$131	\$53	\$11	78,101	23,646	28.9%	252,765	
Biologics	0.2	0.2	0.0	0.0	143	143	0	0	829	835	0	22	151	85	0.1	873	
Antineoplastic Agents	0.5	0.3	0.1	0.1	88	64	19	6	189	245	182	54	3,898	779	1.0	8,351	
Endocrine/Metabolic Drugs	0.6	0.3	0.1	0.3	24	19	2	3	37	63	27	11	94,964	13,623	16.6	148,748	
Cardiovascular Agents	1.2	0.4	0.2	0.5	44	24	13	7	38	62	55	13	238,779	9,003,913	22.9	206,728	
Respiratory Agents	0.7	0.4	0.0	0.3	24	18	1	4	35	51	26	15	120,047	4,162,999	19.9	176,244	
Gastrointestinal Agents	0.6	0.3	0.1	0.3	42	30	6	6	69	113	84	24	84,970	5,899,699	15.5	141,171	
Genitourinary Agents	0.3	0.2	0.0	0.1	12	10	0	2	34	47	37	15	15,684	535,511	5.0	45,106	
CNS Drugs	1.2	0.5	0.2	0.5	79	52	19	8	67	112	111	14	275,637	18,421,346	26.1	233,825	
Stimulants/Anti-obesity/Anorexia	0.6	0.2	0.1	0.3	20	7	3	10	32	34	40	29	10,081	322,552	1.9	16,158	
Miscellaneous Psychological/Neurological Agents	0.6	0.5	0.0	0.1	61	59	0	2	104	130	20	15	3,503	363,021	0.7	5,930	
Analgesics and Anesthetics	0.6	0.1	0.1	0.4	21	12	4	4	35	103	76	10	119,382	4,203,328	22.9	203,921	
Neuromuscular Agents	0.9	0.3	0.1	0.5	43	31	5	8	48	96	42	16	107,679	5,153,863	13.0	118,761	
Nutritional Products	0.5	0.0	0.2	0.3	11	1	5	5	21	27	27	18	22,608	481,449	5.0	42,867	
Hematological Agents	0.6	0.1	0.2	0.3	28	17	5	6	51	227	30	19	26,359	1,331,891	5.2	46,880	
Topical Products	0.4	0.2	0.1	0.2	12	7	3	2	30	45	35	13	76,473	2,289,031	21.0	189,283	
Miscellaneous Products	0.3	0.2	0.0	0.1	35	24	8	3	139	162	219	44	4,025	561,197	1.8	15,931	
Unknown Therapeutic Category	0.4	0.0	0.0	0.0	18	0	0	0	48	0	0	0	51,092	2,468,909	14.9	136,419	
TOTAL NO. OF RX AND RX \$	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	1,333,433	n.a.	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 1999 file for Rhode Island, released by CMS in 12/2003. 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 Rhode Island, 4.1 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}
 RHODE ISLAND, 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	\$9,061,678	9,717 11.9 %	109,563	0.7	\$121	\$83	
ANTIDEPRESSANTS	7,124,552	19,505 23.8	216,337	0.6	57	33	
ULCER DRUGS	4,892,603	12,479 15.2	140,629	0.4	78	35	
ANTICONVULSANT	4,501,182	9,205 11.2	103,669	0.8	57	43	
ANTIVIRAL	3,344,622	2,316 2.8	25,839	0.4	308	129	
ANTIHYPERTENSIVE	2,730,132	10,634 13.0	118,829	0.5	45	23	
ANTIASTHMATIC	2,483,819	14,752 18.0	163,696	0.4	34	15	
ANTHYPERLIPIDEMIC	2,373,433	4,900 6.0	56,069	0.6	70	42	
ANTIDIABETIC	2,298,419	7,827 9.6	87,755	0.6	43	26	
CALCIUM BLOCKERS	2,225,188	6,060 7.4	68,007	0.5	64	33	

Source: Data for this table are from the MAX 1999 file for Rhode Island, released by CMS in 12/2003. 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}
 RHODE ISLAND, 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	607,650	\$41,035,628	9,717	11.9 %	109,563	0.7	\$83	19,505	23.8 %	216,337	0.6	\$33					
Female																	
Disabled																	
5 and younger	411,100	25,784,755	6,068	12.6	68,315	0.6	71	13,667	28.4	151,767	0.6	33					
6-14	271,289	18,472,391	4,009	24.3	46,126	0.7	83	9,351	56.8	106,839	0.6	35					
15-20	3,462	188,477	32	3.5	360	0.5	44	104	11.4	1,179	0.4	20					
21-44	2,699	182,695	69	11.0	792	0.4	45	135	21.5	1,539	0.5	30					
45-64	82,226	6,355,373	1,784	32.9	20,401	0.7	87	3,694	68.2	41,549	0.6	36					
65-74	131,198	8,717,806	1,602	24.5	18,548	0.7	89	4,352	66.6	50,113	0.6	35					
75-84	37,393	2,234,672	343	18.9	3,963	0.7	64	786	43.2	9,178	0.6	30					
85 and older	11,408	648,726	145	23.3	1,688	0.6	58	228	36.7	2,679	0.6	28					
Other Eligibles																	
5 and younger	2,138	113,358	34	22.1	374	0.5	56	50	32.5	578	0.6	30					
6-14	139,811	7,312,364	2,059	6.5	22,189	0.5	45	4,316	13.7	44,928	0.6	28					
15-20	358	12,405	0	0.0	0	0.0	0	1	0.0	12	0.7	39					
21-44	1,619	77,990	25	0.5	271	0.4	49	132	2.5	1,401	0.4	22					
45-64	1,441	94,469	36	1.0	355	0.4	47	164	4.8	1,647	0.4	28					
65-74	1,279	72,456	47	0.5	210	0.4	33	234	2.6	778	0.6	35					
85 and older	292	18,108	6	0.7	23	0.3	20	44	5.2	167	0.5	35					
Male																	
Disabled																	
5 and younger	32,505	1,869,679	312	13.5	3,415	0.6	60	730	31.5	8,273	0.6	28					
6-14	53,432	2,840,444	736	22.0	8,246	0.5	47	1,414	42.4	15,532	0.6	29					
15-20	48,885	2,326,813	897	26.3	9,669	0.5	38	1,597	46.8	17,118	0.6	26					
21-44	196,550	15,250,873	3,649	10.8	41,248	0.8	103	5,838	17.2	64,570	0.6	34					
45-64	153,624	12,956,546	3,052	22.0	35,171	0.8	111	4,491	32.4	51,146	0.6	36					
65-74	1,134	42,861	2	0.3	18	0.8	167	9	1.4	97	0.3	8					
85 and older	7,076	378,105	94	5.4	1,063	0.5	57	279	15.9	3,069	0.5	30					
Other Eligibles																	
5 and younger	4,571	371,984	127	12.3	1,455	0.6	101	198	19.1	2,253	0.5	35					
6-14	64,613	6,515,899	1,744	32.0	20,070	0.8	118	2,108	38.7	24,053	0.6	38					
15-20	63,087	4,882,225	947	22.6	11,015	0.8	110	1,704	40.6	19,485	0.6	35					
21-44	10,555	633,577	103	15.6	1,154	0.8	87	164	24.8	1,864	0.6	28					
45-64	2,404	124,366	31	21.8	351	0.7	45	28	19.7	313	0.7	39					
65-74	184	7,529	4	22.2	45	0.4	6	1	5.6	12	0.8	4					
85 and older	42,926	2,294,327	597	3.0	6,077	0.5	54	1,347	6.7	13,424	0.6	28					
Unknown																	
5 and younger	621	20,820	2	0.0	17	1.0	76	5	0.1	58	0.3	7					
6-14	3,499	169,034	44	0.8	480	0.6	62	221	4.0	2,305	0.5	29					
15-20	1,926	155,848	51	2.0	580	0.8	122	146	5.8	1,436	0.5	30					
21-44	460	39,322	12	0.3	61	0.5	67	54	1.4	183	0.6	37					
45-64	560	37,635	4	0.5	26	0.7	102	29	4.0	163	0.7	46					
65-74	12,475	721,453	137	11.9	1,467	0.6	60	243	21.1	2,631	0.6	25					
75-84	15,503	790,749	209	18.6	2,116	0.5	42	379	33.7	4,010	0.6	27					
85 and older	7,882	359,466	138	22.6	1,330	0.4	32	270	44.2	2,638	0.6	29					
All Medicaid Beneficiaries	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 Rhode Island, released by CMS in 12/2003. 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}
 RHODE ISLAND, 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 \$
All	12,479	15.2 %	140,629	0.4	\$35	9,205	11.2 %	103,669	0.8	\$43	2,316	2.8 %	25,839	0.4	\$129
Female	8,868	18.4	100,485	0.5	35	5,590	11.6	62,728	0.7	40	1,177	2.4	13,140	0.4	101
Disabled	5,515	33.5	63,850	0.4	34	4,422	26.8	50,584	0.8	43	930	5.6	10,602	0.4	121
5 and younger	37	9.5	380	0.5	20	30	7.7	340	0.6	30	5	1.3	54	0.5	62
6-14	39	4.3	455	0.3	28	146	16.0	1,690	0.6	43	9	1.0	108	0.8	171
15-20	65	10.3	749	0.3	26	95	15.1	1,093	0.7	54	3	0.5	32	0.1	4
21-44	1,472	27.2	16,947	0.3	30	2,095	38.7	23,751	0.8	47	575	10.6	6,535	0.4	123
45-64	2,797	42.8	32,362	0.4	35	1,693	25.9	19,496	0.8	40	301	4.6	3,443	0.4	124
65-74	791	43.5	9,296	0.4	36	270	14.8	3,116	0.8	30	26	1.4	298	0.3	111
75-84	250	40.2	2,945	0.5	38	80	12.9	942	0.7	25	8	1.3	96	0.1	6
85 and older	64	41.6	716	0.5	35	13	8.4	156	0.5	14	3	1.9	36	0.1	6
Other Eligibles	3,353	10.6	36,635	0.5	37	1,168	3.7	12,144	0.7	28	247	0.8	2,538	0.1	15
5 and younger	10	0.2	71	0.4	27	1	0.0	12	0.2	7	5	0.1	39	1.3	121
6-14	10	0.2	106	0.2	9	39	0.7	422	0.5	28	5	0.1	50	0.1	26
15-20	44	1.3	446	0.2	12	36	1.0	349	0.5	35	16	0.5	152	0.1	45
21-44	83	0.9	381	0.3	23	73	0.8	217	0.7	26	29	0.3	110	0.4	79
45-64	16	1.9	92	0.3	31	6	0.7	34	0.6	14	2	0.2	4	0.5	264
65-74	696	30.1	7,956	0.4	34	229	9.9	2,580	0.7	29	35	1.5	402	0.1	11
75-84	1,209	36.2	13,666	0.5	38	436	13.1	4,867	0.7	28	61	1.8	697	0.1	7
85 and older	1,285	37.6	13,917	0.6	39	348	10.2	3,663	0.7	27	94	2.8	1,084	0.1	6
Male	3,611	10.7	40,144	0.4	35	3,615	10.7	40,941	0.8	49	1,139	3.4	12,699	0.5	159
Disabled	2,600	18.7	29,756	0.4	34	3,167	22.8	36,543	0.8	50	1,068	7.7	12,054	0.5	163
5 and younger	43	6.8	467	0.4	19	35	5.6	380	0.6	21	8	1.3	82	0.4	45
6-14	66	3.8	774	0.3	22	203	11.6	2,321	0.6	40	18	1.0	189	0.4	107
15-20	42	4.1	484	0.3	28	186	18.0	2,142	0.7	45	11	1.1	130	0.3	45
21-44	910	16.7	10,492	0.4	32	1,630	29.9	18,807	0.8	56	717	13.2	8,110	0.5	163
45-64	1,233	29.4	13,997	0.4	37	983	23.4	11,412	0.8	48	305	7.3	3,435	0.5	174
65-74	245	37.1	2,840	0.5	36	103	15.6	1,176	0.8	39	9	1.4	108	0.4	97
75-84	54	38.0	627	0.5	38	24	16.9	278	0.7	34	0	0.0	0	0.0	0
85 and older	7	38.9	75	0.5	40	3	16.7	27	0.6	10	0	0.0	0	0.0	0
Other Eligibles	1,011	5.1	10,388	0.5	36	448	2.2	4,398	0.7	35	71	0.4	645	0.4	89
5 and younger	15	0.3	138	0.5	20	5	0.1	25	0.6	67	7	0.2	53	1.0	105
6-14	25	0.5	215	0.3	22	41	0.7	434	0.6	29	4	0.1	47	0.7	127
15-20	20	0.8	211	0.2	15	48	1.9	487	0.7	62	4	0.2	44	0.1	3
21-44	29	0.8	95	0.4	31	23	0.6	67	1.0	67	11	0.3	38	0.7	304
45-64	22	3.0	130	0.4	31	8	1.1	63	0.5	17	3	0.4	18	0.3	323
65-74	290	25.2	3,219	0.4	34	122	10.6	1,343	0.7	37	15	1.3	160	0.4	95
75-84	389	34.5	4,158	0.5	39	134	11.9	1,348	0.6	28	19	1.7	197	0.3	63
85 and older	221	36.2	2,222	0.6	39	67	11.0	631	0.6	26	8	1.3	88	0.1	5
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

All Medicaid Beneficiaries

Table 7B

Source: Data for this table are from the MAX 1999 file for Rhode Island, released by CMS in 12/2003. 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 BENEFIT MONTH FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY,
 BY SEX, BOE, AND AGE^{a, b, c}
 RHODE ISLAND, 1999

Beneficiary Characteristics	ANTIHYPERTENSIVE				ANTIASTHMATIC				ANTIHYPERLIPIDEMIC						
	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	10,634	13.0 %	118,829	0.5	\$23	14,752	18.0 %	163,696	0.4	\$15	4,900	6.0 %	56,069	0.6	\$42
Female	6,992	14.5	78,595	0.5	23	10,117	21.0	113,120	0.4	15	3,499	7.3	40,250	0.6	44
Disabled	3,493	21.2	40,249	0.5	23	6,970	42.3	80,287	0.5	16	2,336	14.2	27,218	0.6	44
5 and younger	5	1.3	57	0.5	16	98	25.3	1,061	0.3	9	0	0.0	0	0.0	0
6-14	90	9.9	1,007	0.6	17	208	22.9	2,397	0.3	11	1	0.1	12	0.1	5
15-20	15	2.4	180	0.4	14	130	20.7	1,446	0.3	9	1	0.2	12	0.3	20
21-44	382	7.0	4,327	0.4	19	1,977	36.5	22,615	0.4	13	231	4.3	2,666	0.5	37
45-64	1,825	27.9	20,952	0.5	23	3,309	50.6	38,280	0.5	18	1,414	21.6	16,457	0.6	43
65-74	818	45.0	9,552	0.5	25	918	50.5	10,653	0.5	18	554	30.5	6,476	0.7	48
75-84	297	47.7	3,478	0.5	26	264	42.4	3,104	0.4	13	126	20.3	1,501	0.7	48
85 and older	61	39.6	696	0.5	23	66	42.9	731	0.5	20	9	5.8	94	0.6	37
Other Eligibles	3,499	11.1	38,346	0.6	23	3,147	10.0	32,833	0.4	15	1,163	3.7	13,032	0.6	44
5 and younger	4	0.1	45	0.9	10	116	2.9	913	0.2	5	0	0.0	0	0.0	0
6-14	52	1.0	587	0.5	14	145	2.8	1,299	0.2	7	1	0.0	12	0.9	82
15-20	5	0.1	60	0.3	12	117	3.4	1,127	0.2	6	0	0.0	0	0.0	0
21-44	27	0.3	100	0.7	34	122	1.4	433	0.6	17	13	0.1	34	0.5	29
45-64	27	3.2	88	0.5	25	19	2.2	64	0.4	10	14	1.6	49	0.6	34
65-74	919	39.7	10,411	0.5	23	697	30.1	7,787	0.5	18	527	22.8	6,046	0.6	43
75-84	1,315	39.4	14,686	0.6	24	980	29.4	10,862	0.5	17	478	14.3	5,418	0.6	45
85 and older	1,150	33.7	12,369	0.6	23	951	27.9	10,348	0.4	14	130	3.8	1,473	0.6	40
Male	3,642	10.8	40,234	0.5	22	4,635	13.7	50,576	0.4	15	1,401	4.1	15,819	0.6	39
Disabled	2,274	16.4	25,882	0.5	23	3,120	22.5	35,650	0.4	15	1,060	7.6	12,247	0.6	39
5 and younger	27	4.3	290	0.5	11	183	29.0	2,014	0.3	8	1	0.2	5	0.6	22
6-14	244	13.9	2,746	0.6	16	401	22.8	4,623	0.3	11	2	0.1	24	0.1	5
15-20	49	4.7	559	0.5	13	141	13.6	1,681	0.4	12	1	0.1	12	0.1	4
21-44	469	8.6	5,378	0.4	21	835	15.3	9,641	0.4	14	272	5.0	3,137	0.6	34
45-64	1,156	27.6	13,094	0.5	24	1,209	28.8	13,694	0.5	17	647	15.4	7,466	0.6	40
65-74	262	39.7	3,070	0.5	26	269	40.8	3,109	0.6	19	122	18.5	1,432	0.6	46
75-84	63	44.4	706	0.6	28	72	50.7	786	0.6	23	15	10.6	171	0.5	31
85 and older	4	22.2	39	0.4	22	10	55.6	102	0.6	17	0	0.0	0	0.0	0
Other Eligibles	1,368	6.9	14,352	0.5	22	1,515	7.6	14,926	0.4	14	341	1.7	3,572	0.6	39
5 and younger	14	0.3	163	0.4	7	180	4.0	1,577	0.2	5	0	0.0	0	0.0	0
6-14	175	3.2	1,875	0.6	17	223	4.0	2,023	0.3	8	0	0.0	0	0.0	0
15-20	27	1.1	259	0.5	9	77	3.0	828	0.3	6	0	0.0	0	0.0	0
21-44	26	0.7	90	0.4	17	34	0.9	88	0.6	20	14	0.4	51	0.5	48
45-64	35	4.8	170	0.5	20	27	3.7	152	0.3	10	24	3.3	118	0.5	37
65-74	422	36.6	4,777	0.4	23	345	29.9	3,759	0.5	18	162	14.1	1,842	0.6	39
75-84	471	41.8	4,980	0.6	23	412	36.6	4,287	0.5	17	120	10.7	1,327	0.6	40
85 and older	198	32.4	2,038	0.6	22	217	35.5	2,212	0.5	16	21	3.4	234	0.5	30
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

All Medicaid Beneficiaries

Source: Data for this table are from the MAX 1999 file for Rhode Island, released by CMS in 12/2003. 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}
 RHODE ISLAND, 1999

Beneficiary Characteristics	ANTIDIABETIC				CALCIUM BLOCKERS				Mean Rx \$	Mean No. of Rx	Users as % of All Benes	No. of Users	No. of Bene Mos among Users	Mean Rx \$	Mean No. of Rx	Users as % of All Benes	No. of Users	No. of Bene Mos among Users	Mean Rx \$	Mean No. of Rx	No. of Benes	No. of Bene Mos
	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean Rx \$	Mean No. of Rx	Users as % of All Benes	No. of Users	No. of Bene Mos among Users														
All	7,827	9.6 %	87,755	0.6	\$26	6,060	7.4 %	68,007	0.5	\$33	81,945	569,020										
Female	5,663	11.8	63,873	0.6	27	4,521	9.4	50,911	0.5	33	48,094	336,233										
Disabled	3,318	20.1	38,276	0.6	30	2,142	13.0	24,710	0.5	33	16,476	180,735										
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	388	3,732										
6-14	6	0.7	56	0.5	19	3	0.3	36	0.3	22	910	9,938										
15-20	23	3.7	256	0.5	23	1	0.2	10	0.2	5	629	6,718										
21-44	454	8.4	5,208	0.6	28	204	3.8	2,288	0.4	26	5,419	58,687										
45-64	1,886	28.9	21,700	0.6	31	1,144	17.5	13,164	0.4	33	6,535	71,845										
65-74	738	40.6	8,649	0.6	31	561	30.8	6,540	0.5	36	1,819	20,874										
75-84	191	30.7	2,199	0.6	23	196	31.5	2,297	0.6	37	622	7,190										
85 and older	20	13.0	208	0.5	15	33	21.4	375	0.5	29	154	1,751										
Other Eligibles	2,345	7.4	25,597	0.6	22	2,379	7.5	26,201	0.6	32	31,618	155,498										
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	4,026	11,299										
6-14	4	0.1	26	1.1	33	0	0.0	0	0.0	0	5,258	18,789										
15-20	6	0.2	58	0.4	12	1	0.0	12	0.1	4	3,431	12,020										
21-44	21	0.2	35	1.0	48	14	0.2	39	0.7	38	8,986	15,423										
45-64	21	2.5	59	0.6	26	12	1.4	54	0.5	28	850	1,598										
65-74	766	33.1	8,643	0.6	26	600	25.9	6,793	0.5	32	2,315	24,855										
75-84	941	28.2	10,497	0.6	23	909	27.2	10,145	0.6	32	3,338	36,102										
85 and older	586	17.2	6,279	0.6	16	843	24.7	9,158	0.7	31	3,414	35,412										
Male	2,164	6.4	23,882	0.6	25	1,539	4.5	17,096	0.5	33	33,851	232,787										
Disabled	1,424	10.3	16,257	0.6	27	955	6.9	10,966	0.5	34	13,882	149,486										
5 and younger	1	0.2	12	0.6	13	1	0.2	12	0.2	9	630	5,975										
6-14	12	0.7	133	0.5	18	7	0.4	84	0.2	9	1,757	18,826										
15-20	11	1.1	127	1.0	33	2	0.2	24	0.2	18	1,035	11,148										
21-44	349	6.4	4,001	0.6	28	187	3.4	2,151	0.4	33	5,447	58,961										
45-64	829	19.8	9,420	0.6	27	564	13.5	6,429	0.5	35	4,193	45,260										
65-74	183	27.7	2,103	0.5	22	159	24.1	1,876	0.5	37	660	7,537										
75-84	36	25.4	425	0.6	21	32	22.5	363	0.5	32	142	1,604										
85 and older	3	16.7	36	0.3	7	3	16.7	27	0.6	43	18	175										
Other Eligibles	740	3.7	7,625	0.6	20	584	2.9	6,130	0.6	31	19,969	83,301										
5 and younger	2	0.0	4	1.3	114	0	0.0	0	0.0	0	4,450	12,648										
6-14	1	0.0	2	0.5	22	1	0.0	11	0.2	16	5,528	20,877										
15-20	3	0.1	15	1.4	55	1	0.0	2	0.5	18	2,527	12,810										
21-44	19	0.5	49	1.1	55	7	0.2	41	0.3	24	3,841	6,448										
45-64	37	5.0	173	0.7	27	17	2.3	64	0.7	44	733	1,377										
65-74	273	23.7	3,072	0.5	23	193	16.7	2,114	0.5	33	1,153	11,720										
75-84	271	24.1	2,928	0.6	18	239	21.2	2,593	0.6	33	1,126	11,570										
85 and older	134	21.9	1,382	0.5	13	126	20.6	1,305	0.7	25	611	5,851										
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0										

Table 7D

All Medicaid Beneficiaries

Source: Data for this table are from the MAX 1999 file for Rhode Island, released by CMS in 12/2003. 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}
 RHODE ISLAND, 1999

Beneficiary Characteristics	Rx \$ per Bene Mo	No. of Rx per Bene Mo	No. of All-Year NF Residents	Bene Mos among All-Year NF Residents
All	\$177	4.4	5,026	57,348
Age				
0-64	189	3.7	1,344	15,931
65-74	225	5.1	539	6,189
75-84	190	5.0	1,263	14,229
85 and older	144	4.4	1,880	20,999
Unknown	0	0.0	0	0
Gender				
Female	178	4.6	3,505	40,065
Male	174	3.9	1,521	17,283
Unknown	0	0.0	0	0
Race				
White	178	4.4	4,441	51,048
African American	196	4.5	103	1,179
Other/unknown	158	4	482	5,121
Basis of Eligibility				
Aged	168	4.7	3,381	37,897
Disabled	195	3.9	1,645	19,451
Adults	0	0.0	0	0
Children	0	0.0	0	0
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 1999 file for Rhode Island, released by CMS in 12/2003. 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 2,531 beneficiaries who were in nursing facilities for part of their enrollment and their 23,483 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}
 RHODE ISLAND, 1999

Therapeutic Category	No. of Rx per Bene Mo among Users			\$ per Bene Mo among Users			Total # of Rx	Total Rx \$	No.	As % of All-Year NF Residents	No. of Bene Mos						
	Total	Patented Brand-Name	Off-Patent Brand-Name	Total	Patented Brand-Name	Off-Patent Brand-Name											
Anti-infective Agents	0.3	0.1	0.0	0.1	\$13	\$11	\$0	\$1	\$44	\$75	\$40	\$10	10,154	\$447,512	3,047	60.6 %	35,192
Biologicals	0.1	0.1	0.0	0.0	4	4	0	0	46	46	0	0	7	323	7	0.1	84
Antineoplastic Agents	0.4	0.2	0.1	0.1	72	43	25	4	181	214	202	54	501	90,877	113	2.2	1,266
Endocrine/Metabolic Drugs	1.0	0.3	0.1	0.6	19	14	1	4	20	44	21	7	18,278	364,360	1,676	33.3	19,186
Cardiovascular Agents	1.8	0.4	0.4	1.0	39	17	14	9	22	43	33	9	57,052	1,268,375	2,852	56.7	32,330
Respiratory Agents	0.8	0.4	0.1	0.3	30	22	1	7	39	51	22	25	12,039	474,022	1,377	27.4	15,840
Gastrointestinal Agents	0.9	0.3	0.1	0.4	51	35	6	10	59	104	69	23	19,548	1,150,891	1,975	39.3	22,528
Genitourinary Agents	0.5	0.2	0.0	0.3	16	12	0	4	32	52	45	14	4,050	129,934	700	13.9	8,031
CNS Drugs	1.3	0.6	0.2	0.6	83	58	19	6	62	102	105	10	51,023	3,146,831	3,298	65.6	37,930
Stimulants/Anti-obesity/Anorexia	0.4	0.0	0.1	0.2	8	0	6	3	23	0	41	12	34	790	8	0.2	96
Miscellaneous Psychological/Neurological Agents	0.7	0.7	0.0	0.0	75	75	0	0	108	114	0	10	1,286	138,712	165	3.3	1,845
Analgesics and Anesthetics	0.6	0.2	0.1	0.4	23	17	3	3	39	90	57	9	10,828	417,598	1,589	31.6	18,058
Neuromuscular Agents	1.2	0.5	0.2	0.5	68	47	10	11	55	103	44	20	21,758	1,198,595	1,530	30.4	17,693
Nutritional Products	0.7	0.0	0.2	0.4	11	0	5	6	17	11	25	13	7,321	122,034	966	19.2	11,018
Hematological Agents	0.8	0.1	0.3	0.4	24	12	7	5	31	152	25	12	9,014	275,938	1,006	20.0	11,530
Topical Products	0.6	0.2	0.1	0.2	17	10	5	3	29	43	36	11	19,723	572,677	2,937	58.4	34,109
Miscellaneous Products	0.1	0.1	0.0	0.1	8	6	0	1	51	81	0	20	377	19,267	221	4.4	2,518
Unknown Therapeutic Category	0.4	0.0	0.0	0.0	15	0	0	0	34	0	0	0	9,215	317,010	1,793	35.7	20,729
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.	252,208	10,135,746	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 1999 file for Rhode Island, released by CMS in 12/2003. 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 2,531 beneficiaries who were in nursing facilities for part of their enrollment and their 23,483 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 Rhode Island, 4.1 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}
 RHODE ISLAND, 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	\$1,487,587	2,016	40.1 %	23,289	0.7	\$93	\$64
ANTIDEPRESSANTS	1,232,496	2,714	54.0	31,201	0.8	52	40
ANTICONVULSANT	1,024,454	1,488	29.6	17,303	0.9	63	59
ULCER DRUGS	946,513	1,701	33.8	19,479	0.7	70	49
ANTIHYPERTENSIVE	409,422	1,357	27.0	15,371	0.8	33	27
DERMATOLOGICAL	398,078	3,751	74.6	43,990	0.3	34	9
ANTIANSIETY AGENTS	397,270	1,410	28.1	16,298	0.5	47	24
CALCIUM BLOCKERS	326,663	836	16.6	9,512	0.8	41	34
ANTIASTHMATIC	287,074	1,321	26.3	14,936	0.5	38	19
ANTIIDIABETIC	235,408	976	19.4	11,001	0.7	30	21

Source: Data for this table are from the MAX 1999 file for Rhode Island, released by CMS in 12/2003. 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 2,531 beneficiaries who were in nursing facilities for part of their enrollment and their 23,483 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} RHODE ISLAND, 1999

Beneficiary Characteristics	All Top 10 Drug Groups					ANTIPSYCHOTICS					ANTIDEPRESSANTS				
	No. of Rx	Rx \$	No. of Users	Residents	Mean No. of Rx	No. of All-Year NF Residents	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Residents	No. of All-Year NF Residents	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
All	125,570	\$6,744,965	2,016	40.1 %	0.7	23,289	2,714	54.0 %	\$64	2,714	54.0 %	31,201	0.8	\$40	
Female	88,336	4,625,729	1,444	41.2	0.6	16,737	2,038	58.1	63	2,038	58.1	23,494	0.8	38	
Disabled	22,220	1,452,286	384	48.1	0.9	4,547	405	50.7	89	405	50.7	4,807	0.8	57	
64 or younger	15,758	1,072,030	255	43.0	0.9	3,038	285	48.1	93	285	48.1	3,378	0.9	63	
65-74	3,399	193,541	69	65.1	0.8	790	62	58.5	64	62	58.5	735	0.7	47	
75-84	2,116	132,787	44	67.7	0.8	527	39	60.0	101	39	60.0	466	0.7	38	
85 and older	947	53,928	16	45.7	0.7	192	19	54.3	92	19	54.3	228	0.7	37	
Other Eligibles	66,116	3,173,443	1,060	39.2	0.6	12,190	1,633	60.3	53	1,633	60.3	18,687	0.7	33	
64 or younger	0	0	0	0.0	0.0	0	0	0.0	0	0	0.0	0	0.0	0	
65-74	7,893	434,379	120	54.1	0.7	1,382	153	68.9	89	153	68.9	1,806	0.8	41	
75-84	24,919	1,240,544	394	43.8	0.6	4,584	594	66.1	57	594	66.1	6,774	0.7	35	
85 and older	33,304	1,498,520	546	34.4	0.5	6,224	886	55.9	42	886	55.9	10,107	0.7	30	
Male	37,234	2,119,236	572	37.6	0.8	6,552	676	44.4	67	676	44.4	7,707	0.8	45	
Disabled	21,192	1,346,470	327	38.7	0.9	3,881	306	36.2	77	306	36.2	3,610	0.9	61	
64 or younger	18,570	1,193,242	286	38.1	0.9	3,407	274	36.5	76	274	36.5	3,244	0.9	62	
65-74	1,656	103,301	27	46.6	0.8	306	23	39.7	87	23	39.7	258	0.8	59	
75-84	840	44,274	12	40.0	1.0	144	9	30.0	86	9	30.0	108	0.9	40	
85 and older	126	5,653	2	28.6	0.5	24	0	0.0	8	0	0.0	0	0.0	0	
Other Eligibles	16,042	772,766	245	36.3	0.6	2,671	370	54.8	53	370	54.8	4,097	0.7	32	
64 or younger	0	0	0	0.0	0.0	0	0	0.0	0	0	0.0	0	0.0	0	
65-74	3,817	212,352	60	39.2	0.7	681	76	49.7	77	76	49.7	866	0.7	34	
75-84	7,024	330,547	105	39.0	0.6	1,130	148	55.0	52	148	55.0	1,647	0.7	30	
85 and older	5,201	229,867	80	31.6	0.5	860	146	57.7	35	146	57.7	1,584	0.7	32	
Unknown	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 Rhode Island, released by CMS in 12/2003. 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 2,531 beneficiaries who were in nursing facilities for part of their enrollment and their 23,483 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}
 RHODE ISLAND, 1999

Beneficiary Characteristics	ANTICONVULSANT						ULCER DRUGS						ANTIHYPERTENSIVE					
	Users as %			Mean			Users as %			Mean			Users as %			Mean		
	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	1,488	29.6 %	0.9	17,303	0.9	\$59	1,701	33.8 %	0.7	\$49	1,357	27.0 %	0.8	\$27	15,371	0.8	\$27	
Female	907	25.9	0.9	10,518	0.9	52	1,262	36.0	0.7	48	1,012	28.9	0.8	25	11,502	0.8	25	
Disabled	416	52.1	1.0	4,942	1.0	72	216	27.0	0.6	52	147	18.4	0.8	27	1,708	0.8	27	
64 or younger	347	58.5	1.0	4,124	1.0	79	130	21.9	0.6	51	76	12.8	0.7	26	886	0.7	26	
65-74	42	39.6	1.0	494	1.0	45	37	34.9	0.7	61	40	37.7	0.8	27	450	0.8	27	
75-84	23	35.4	0.9	276	0.9	35	31	47.7	0.6	51	18	27.7	0.8	29	216	0.8	29	
85 and older	4	11.4	0.6	48	0.6	13	18	51.4	0.7	41	13	37.1	0.8	29	156	0.8	29	
Other Eligibles	491	18.1	0.8	5,576	0.8	34	1,046	38.7	0.7	47	865	32.0	0.8	25	9,794	0.8	25	
64 or younger	0	0.0	0.0	0	0.0	0	0	0.0	0.0	0	0	0.0	0.0	0	0	0.0	0	
65-74	91	41.0	0.8	1,064	0.8	38	101	45.5	0.7	55	85	38.3	0.7	22	960	0.7	22	
75-84	217	24.1	0.8	2,494	0.8	35	331	36.8	0.7	49	313	34.8	0.8	28	3,575	0.8	28	
85 and older	183	11.5	0.7	2,018	0.7	32	614	38.7	0.7	44	467	29.5	0.8	24	5,259	0.8	24	
Male	581	38.2	1.1	6,785	1.1	70	439	28.9	0.7	51	345	22.7	0.8	31	3,869	0.8	31	
Disabled	432	51.1	1.1	5,165	1.1	80	175	20.7	0.7	58	120	14.2	0.8	34	1,393	0.8	34	
64 or younger	391	52.1	1.1	4,682	1.1	83	140	18.6	0.7	57	96	12.8	0.8	29	1,115	0.8	29	
65-74	30	51.7	0.9	360	0.9	51	18	31.0	0.8	71	15	25.9	0.8	53	170	0.8	53	
75-84	9	30.0	0.8	108	0.8	38	11	36.7	0.8	56	9	30.0	1.0	53	108	1.0	53	
85 and older	2	28.6	0.9	15	0.9	10	6	85.7	0.5	44	0	0.0	0.0	0	0	0.0	0	
Other Eligibles	149	22.1	0.8	1,620	0.8	41	264	39.1	0.7	47	225	33.3	0.8	29	2,476	0.8	29	
64 or younger	0	0.0	0.0	0	0.0	0	0	0.0	0.0	0	0	0.0	0.0	0	0	0.0	0	
65-74	53	34.6	0.9	613	0.9	45	61	39.9	0.6	38	42	27.5	0.9	35	484	0.9	35	
75-84	58	21.6	0.8	611	0.8	43	108	40.1	0.7	54	108	40.1	0.8	29	1,159	0.8	29	
85 and older	38	15.0	0.7	396	0.7	31	95	37.5	0.7	44	75	29.6	0.8	24	833	0.8	24	
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 Rhode Island, released by CMS in 12/2003. 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 2,531 beneficiaries who were in nursing facilities for part of their enrollment and their 23,483 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}
 RHODE ISLAND, 1999

Beneficiary Characteristics	DERMATOLOGICAL						ANTI-ANXIETY AGENTS						CALCIUM BLOCKERS						
	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 \$
All	3,751	74.6 %	0.3	\$9	1,410	28.1 %	16,298	0.5	\$24	836	16.6 %	9,512	0.8	\$34					
Female	2,489	71.0	0.2	9	992	28.3	11,466	0.5	23	672	19.2	7,656	0.8	34					
Disabled	699	87.5	0.3	9	242	30.3	2,854	0.5	18	70	8.8	820	0.8	43					
64 or younger	554	93.4	0.3	9	187	31.5	2,212	0.5	18	27	4.6	324	0.8	37					
65-74	64	60.4	0.3	7	32	30.2	366	0.4	18	19	17.9	208	0.9	53					
75-84	53	81.5	0.3	14	15	23.1	180	0.7	21	18	27.7	216	0.9	43					
85 and older	28	80.0	0.2	6	8	22.9	96	0.4	21	6	17.1	72	0.9	44					
Other Eligibles	1,790	66.1	0.2	9	750	27.7	8,612	0.5	24	602	22.2	6,836	0.8	33					
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	195	87.8	0.3	8	67	30.2	790	0.5	26	49	22.1	559	0.9	39					
75-84	574	63.8	0.2	10	268	29.8	3,074	0.6	26	217	24.1	2,457	0.8	36					
85 and older	1,021	64.4	0.2	8	415	26.2	4,748	0.5	23	336	21.2	3,820	0.8	31					
Male	1,262	83.0	0.3	10	418	27.5	4,832	0.5	28	164	10.8	1,856	0.8	34					
Disabled	779	92.1	0.3	10	255	30.1	3,031	0.5	31	47	5.6	560	0.8	38					
64 or younger	695	92.5	0.3	10	228	30.4	2,716	0.5	33	35	4.7	416	0.8	35					
65-74	53	91.4	0.4	12	17	29.3	204	0.5	16	7	12.1	84	1.0	50					
75-84	21	70.0	0.3	11	8	26.7	96	0.3	15	4	13.3	48	0.9	42					
85 and older	10	142.9	0.1	3	2	28.6	15	0.9	48	1	14.3	12	0.9	46					
Other Eligibles	483	71.6	0.3	10	163	24.1	1,801	0.5	22	117	17.3	1,296	0.8	33					
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	118	77.1	0.3	10	40	26.1	441	0.5	28	23	15.0	250	0.9	42					
75-84	194	72.1	0.3	11	66	24.5	730	0.5	20	46	17.1	507	0.9	34					
85 and older	171	67.6	0.2	9	57	22.5	630	0.4	20	48	19.0	539	0.8	28					
Unknown	0	0.0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					

Source: Data for this table are from the MAX 1999 file for Rhode Island, released by CMS in 12/2003. 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 2,531 beneficiaries who were in nursing facilities for part of their enrollment and their 23,483 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).
- Benefit 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}
 RHODE ISLAND, 1999

Beneficiary Characteristics	ANTI-ASTHMATIC					ANTI-DIABETIC					Bene Mos among All-Year NF Residents	
	Users as %		No. of Bene		Mean	Users as %		No. of Bene		Mean		All-Year NF Residents
	No. of Users	Residents	NF Residents	Users		Mos among Users	Rx	Rx-\$	No. of Users			
All	1,321	26.3 %	14,936	0.5	\$19	976	19.4 %	11,001	0.7	\$21	5,026	57,348
Female	966	27.6	11,001	0.5	18	768	21.9	8,709	0.7	22	3,505	40,065
Disabled	149	18.6	1,751	0.6	25	122	15.3	1,390	0.7	28	799	9,483
64 or younger	83	14.0	970	0.6	30	59	9.9	653	0.7	23	593	7,050
65-74	32	30.2	375	0.6	18	43	40.6	497	0.8	38	106	1,234
75-84	18	27.7	214	0.5	16	11	16.9	132	0.7	17	65	779
85 and older	16	45.7	192	0.5	25	9	25.7	108	0.6	17	35	420
Other Eligibles	817	30.2	9,250	0.5	17	646	23.9	7,319	0.7	20	2,706	30,582
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	93	41.9	1,074	0.6	21	93	41.9	1,064	0.8	26	222	2,589
75-84	284	31.6	3,168	0.5	20	284	31.6	3,262	0.7	23	899	10,202
85 and older	440	27.8	5,008	0.4	14	269	17.0	2,993	0.7	15	1,585	17,791
Male	355	23.3	3,935	0.6	22	208	13.7	2,292	0.7	21	1,521	17,283
Disabled	105	12.4	1,202	0.6	26	59	7.0	682	0.8	24	846	9,968
64 or younger	82	10.9	950	0.6	27	42	5.6	478	0.8	26	751	8,881
65-74	6	10.3	72	1.0	30	8	13.8	96	0.7	28	58	668
75-84	12	40.0	129	0.7	23	7	23.3	84	0.7	11	30	355
85 and older	5	71.4	51	0.4	14	2	28.6	24	0.4	9	7	64
Other Eligibles	250	37.0	2,733	0.6	21	149	22.1	1,610	0.7	20	675	7,315
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	47	30.7	472	0.6	23	30	19.6	338	0.8	34	153	1,698
75-84	106	39.4	1,173	0.6	24	65	24.2	708	0.7	18	269	2,893
85 and older	97	38.3	1,088	0.5	17	54	21.3	564	0.7	13	253	2,724
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 Rhode Island, released by CMS in 12/2003. 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 2,531 beneficiaries who were in nursing facilities for part of their enrollment and their 23,483 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}
RHODE ISLAND, 1999

Beneficiary Characteristics	No. of Benes					No. of Bene Mos						
	All	Aged	Disabled	Adults	Children	Unknown	All	Aged	Disabled	Adults	Children	Unknown
All	160,283	11,919	30,755	40,115	77,494	0	1,593,529	125,557	341,165	369,920	756,887	0
Age												
5 and younger	30,902	0	1,116	7	29,779	0	289,545	0	11,665	60	277,820	0
6-14	39,445	0	2,760	6	36,679	0	404,027	0	31,512	47	372,468	0
15-20	15,854	0	1,681	3,218	10,955	0	152,752	0	18,484	28,260	106,008	0
21-44	44,485	0	11,006	33,408	71	0	432,911	0	121,751	310,608	552	0
45-64	14,209	10	10,777	3,419	3	0	149,248	117	118,618	30,485	28	0
65-74	5,961	3,428	2,479	51	3	0	65,371	36,533	28,415	417	6	0
75-84	5,229	4,459	764	3	3	0	56,478	47,652	8,794	29	3	0
85 and older	4,198	4,022	172	3	1	0	43,197	41,255	1,926	14	2	0
Unknown	0	0	0	0	0	0		0	0	0	0	0
Gender												
Female	96,150	9,048	16,714	32,299	38,089	0	965,081	96,363	187,075	307,995	373,648	0
Male	64,133	2,871	14,041	7,816	39,405	0	628,448	29,194	154,090	61,925	383,239	0
Unknown	0	0	0	0	0	0		0	0	0	0	0
Race												
White	82,798	8,470	20,040	20,411	33,877	0	843,914	89,701	224,642	192,054	337,517	0
African American	15,966	408	2,979	4,076	8,503	0	166,404	4,431	33,086	39,850	89,037	0
Other/unknown	61,519	3,041	7,736	15,628	35,114	0	583,211	31,425	83,437	138,016	330,333	0
Use of Nursing Facilities												
All year	5,026	3,381	1,645	0	0	0	57,348	37,897	19,451	0	0	0
Part year	2,531	1,878	649	3	1	0	23,530	16,652	6,834	32	12	0
None	152,726	6,660	28,461	40,112	77,493	0	1,512,651	71,008	314,880	369,888	756,875	0
Maintenance Assistance Status												
Cash	89,343	5,312	25,918	19,184	38,929	0	948,222	59,149	292,252	194,702	402,119	0
Medically needy	451	179	234	37	1	0	4,671	1,843	2,417	400	11	0
Poverty related	15,444	33	29	1,436	13,946	0	133,768	343	292	8,369	124,764	0
Other/unknown	55,045	6,395	4,574	19,458	24,618	0	506,868	64,222	46,204	166,449	229,993	0
Dual Status^c												
Full dual, all year	23,185	10,947	11,586	642	10	0	253,734	115,792	131,896	6,002	44	0
Full dual, part year	289	188	86	12	3	0	3,096	2,022	922	131	21	0
Non-dual, all year	136,809	784	19,083	39,461	77,481	0	1,336,699	7,743	208,347	363,787	756,822	0
Managed Care Status												
FFS all year	50,504	11,911	29,221	2,260	7,112	0	510,354	125,468	323,815	6,252	54,819	0
FFS part year, with Rx claims	5,454	4	809	2,503	2,138	0	51,601	48	9,299	22,269	19,985	0
FFS part year, no Rx claims	25,987	2	328	11,209	14,448	0	207,651	17	3,497	89,538	114,599	0
MC all year, with Rx claims	1,277	0	26	726	525	0	12,422	0	299	6,919	5,204	0
MC all year, no Rx claims	77,061	2	371	23,417	53,271	0	811,501	24	4,255	244,942	562,280	0

Source: Data for this table are from the MAX 1999 file for Rhode Island, released by CMS in 12/2003. 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
 RHODE ISLAND, 1999

	Benes and					
	Bene Mos in Cell B of Table 1		Included in Cell C of Table 1		Excluded from Cell C of Table 1	
	No. of Benes	No. of Bene Mos	No. of Benes	No. of Bene Mos	No. of Benes	No. of Bene Mos
All	160,283	1,593,529	81,945	569,020	78,338	1,024,509
FFS all year	50,504	510,354	50,504	510,354	0	0
FFS part year, with Rx claims	5,454	51,601	5,454	16,842	0	34,759
FFS part year, with no Rx claims	25,987	207,651	25,987	41,824	0	165,827
MC all year, with Rx claims	1,277	12,422	0	0	1,277	12,422
MC all year, with no Rx claims	77,061	811,501	0	0	77,061	811,501

Source: Data for this table are from the MAX 1999 file for Rhode Island, released by CMS in 12/2003. 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.