

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

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TABLE 11

CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a,b}
 DUAL ELIGIBLE BENEFICIARIES, ALABAMA, 1999

Beneficiary Characteristics	No. of Benes						No. of Bene Mos					
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown
All	109,483	51,640	57,477	361	5	0	1,202,203	557,200	642,065	2,893	45	0
Age												
5 and younger	25	0	25	0	0	0	119	0	119	0	0	0
6-14	21	0	19	0	2	0	201	0	177	0	24	0
15-20	241	0	239	1	1	0	2,618	0	2,600	9	9	0
21-44	17,597	0	17,331	264	2	0	194,886	0	192,768	2,106	12	0
45-64	19,547	5	19,465	77	0	0	215,420	22	214,768	630	0	0
65-74	25,455	12,223	13,220	12	0	0	283,357	132,698	150,583	76	0	0
75-84	24,682	19,086	5,593	3	0	0	272,367	208,814	63,523	30	0	0
85 and older	21,915	20,326	1,585	4	0	0	233,235	215,666	17,527	42	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	76,821	41,288	35,259	271	3	0	847,804	449,041	396,557	2,182	24	0
Male	32,662	10,352	22,218	90	2	0	354,399	108,159	245,508	711	21	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	55,877	28,338	27,348	190	1	0	607,679	300,070	306,053	1,544	12	0
African American	42,453	17,778	24,505	167	3	0	471,845	195,770	274,741	1,313	21	0
Other/unknown	11,153	5,524	5,624	4	1	0	122,679	61,360	61,271	36	12	0
Use of Nursing Facilities												
All year	13,139	10,785	2,354	0	0	0	149,454	122,055	27,399	0	0	0
Part year	10,163	8,703	1,459	1	0	0	92,055	77,830	14,213	12	0	0
None	86,181	32,152	53,664	360	5	0	960,694	357,315	600,453	2,881	45	0
Maintenance Assistance Status												
Cash	83,366	32,963	50,190	213	0	0	921,362	358,187	561,348	1,827	0	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0
Poverty-related	2,503	1,261	1,094	144	4	0	25,779	13,445	11,283	1,018	33	0
Other/unknown	23,614	17,416	6,193	4	1	0	255,062	185,568	69,434	48	12	0
Dual Medicare Status^c												
Full dual, all year	105,243	49,110	55,782	346	5	0	1,156,749	529,882	624,084	2,738	45	0
Full dual, part year	4,240	2,530	1,695	15	0	0	45,454	27,318	17,981	155	0	0
Managed Care Status												
FFS all year	107,357	50,956	56,048	348	5	0	1,190,772	553,496	634,378	2,853	45	0
FFS part year, with Rx claims	1,789	584	1,201	4	0	0	9,784	3,178	6,588	18	0	0
FFS part year, no Rx claims	337	100	228	9	0	0	1,647	526	1,099	22	0	0

Source: Data for this table are from the MAX 1999 file for Alabama, released by CMS in 1/2004. This table was produced on 06/25/2004.

a. Table 11 includes the beneficiaries represented by Cells G of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

Table 11

Dual Eligible Beneficiaries

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. 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 12
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BENEFICIARY CHARACTERISTIC^{a,b}
 DUAL ELIGIBLE BENEFICIARIES, ALABAMA, 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 Benef
All	88.1 %	40.0	\$1,368	\$34	\$8,764	15.6 %	\$41	109,483
Age								
5 and younger	76.0	8.4	401	48	4,760	8.4	8	25
6-14	76.2	38.2	3,142	82	8,909	35.3	35	21
15-20	72.2	16.9	1,304	77	4,142	31.5	24	241
21-44	79.0	24.7	1,225	50	4,944	24.8	17	17,597
45-64	86.6	42.8	1,596	37	6,748	23.7	45	19,547
65-74	87.5	41.5	1,346	32	5,989	22.5	50	25,455
75-84	91.5	44.4	1,392	31	10,081	13.8	45	24,682
85 and older	93.6	43.2	1,277	30	15,425	8.3	39	21,915
Unknown	0.0	0.0	0	0	0	0.0	0	0
Basis of Eligibility								
Aged	89.7	40.7	1,259	31	11,414	11.0	40	51,640
Disabled	86.7	39.5	1,469	37	6,427	22.9	41	57,477
Adults	78.4	19.2	720	37	1,876	38.4	11	361
Children	100.0	30.2	1,756	58	3,743	46.9	10	5
Unknown	0.0	0.0	0	0	0	0.0	0	0
Gender								
Female	91.3	44.3	1,453	33	9,227	15.7	47	76,821
Male	80.4	29.8	1,169	39	7,675	15.2	25	32,662
Unknown	0.0	0.0	0	0	0	0.0	0	0
Race								
White	89.1	45.9	1,597	35	11,548	13.8	39	55,877
African American	86.8	32.6	1,089	33	6,481	16.8	44	42,453
Other/unknown	87.8	38.6	1,279	33	3,506	36.5	36	11,153
Use of Nursing Facilities								
Entire year	98.8	64.5	2,092	32	33,222	6.3	78	13,139
Part year	91.3	37.9	1,283	34	16,621	7.7	41	10,163
None	86.0	36.5	1,267	35	4,109	30.8	35	86,181
Maintenance Assistance Status								
Cash	88.1	37.4	1,286	34	4,353	29.5	36	83,366
Medically needy	0.0	0.0	0	0	0	0.0	0	0
Poverty related	50.9	15.7	521	33	2,565	20.3	15	2,503
Other/unknown	91.8	51.5	1,746	34	24,993	7.0	58	23,614

Source: Data for this table are from the MAX 1999 file for Alabama, released by CMS in 1/2004. This table was produced on 06/25/2004.

Table 12

Dual Eligible Beneficiaries

a. Table 12 includes beneficiaries represented by Cell G 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 13
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a,b}
 DUAL ELIGIBLE BENEFICIARIES, ALABAMA, 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	3.6	\$125	15.6 %	11.9 %	19.7 %	13.0 %	31.7 %	19.8 %	3.8 %	\$798	109,483	1,202,203
Age												
5 and younger	1.8	84	8.4	24.0	44.0	12.0	16.0	4.0	0.0	1,000	25	119
6-14	4.0	328	35.3	23.8	9.5	9.5	33.3	23.8	0.0	931	21	201
15-20	1.6	120	31.5	27.8	37.3	14.1	14.5	5.8	0.4	381	241	2,618
21-44	2.2	111	24.8	21.0	33.0	12.9	22.2	9.2	1.7	446	17,597	194,886
45-64	3.9	145	23.7	13.4	18.3	12.4	29.9	20.6	5.5	612	19,547	215,420
65-74	3.7	121	22.5	12.5	18.5	12.9	31.5	20.4	4.2	538	25,455	283,357
75-84	4.0	126	13.8	8.5	15.9	13.0	35.4	23.1	4.1	914	24,682	272,367
85 and older	4.1	120	8.3	6.4	15.8	13.8	37.3	23.4	3.4	1,449	21,915	233,235
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	3.8	117	11.0	10.3	17.3	13.6	34.4	20.9	3.4	1,058	51,640	557,200
Disabled	3.5	132	22.9	13.3	21.8	12.4	29.3	18.9	4.2	575	57,477	642,065
Adults	2.4	90	38.4	21.6	31.3	16.3	22.7	6.6	1.4	234	361	2,893
Children	3.4	195	46.9	0.0	40.0	20.0	20.0	20.0	0.0	416	5	45
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Gender												
Female	4.0	132	15.7	8.7	17.2	13.0	34.2	22.4	4.5	836	76,821	847,804
Male	2.7	108	15.2	19.6	25.7	13.0	25.9	13.6	2.2	707	32,662	354,399
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	4.2	147	13.8	10.9	15.9	11.4	31.9	24.4	5.4	1,062	55,877	607,679
African American	2.9	98	16.8	13.2	24.4	15.0	31.4	14.2	1.9	583	42,453	471,845
Other/unknown	3.5	116	36.5	12.2	20.8	13.4	32.2	18.0	3.4	319	11,153	122,679
Use of Nursing Facilities												
Entire year	5.7	184	6.3	1.2	7.4	9.3	35.6	36.9	9.4	2,921	13,139	149,454
Part year	4.2	142	7.7	8.7	15.0	13.5	36.1	23.2	3.4	1,835	10,163	92,055
None	3.3	114	30.8	14.0	22.1	13.5	30.6	16.8	3.0	369	86,181	960,694
Maintenance Assistance Status												
Cash	3.4	116	29.5	11.9	21.9	13.7	31.8	17.6	3.1	394	83,366	921,362
Medically needy	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Poverty related	1.5	51	20.3	49.1	21.3	8.8	12.9	6.4	1.4	249	2,503	25,779
Other/unknown	4.8	162	7.0	8.2	11.7	11.0	33.5	29.0	6.7	2,314	23,614	255,062

Source: Data for this table are from the MAX 1999 file for Alabama, released by CMS in 1/2004. This table was produced on 06/25/2004.

Table 13

Dual Eligible Beneficiaries

- a. Table 13 includes the beneficiaries represented by Cell G 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 14
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, ALABAMA, 1999

Beneficiary Characteristics	All Rx			Patented Brand-Name Drugs			Off-Patent Brand-Name Drugs			Generic Drugs		
	No. of Rx	Rx \$	\$ per Rx	No. of Rx	Rx \$	\$ per Rx	No. of Rx	Rx \$	\$ per Rx	No. of Rx	Rx \$	\$ per Rx
All	3.6	\$125	\$34	1.2	\$74	\$64	0.5	\$19	\$38	1.8	\$24	\$14
Age												
5 and younger	1.8	84	48	0.6	68	122	0.1	4	35	1.0	11	11
6-14	4.0	328	82	1.2	192	158	0.7	104	150	2.0	30	15
15-20	1.6	120	77	0.5	89	172	0.3	19	74	0.7	10	14
21-44	2.2	111	50	0.7	75	100	0.2	15	61	1.1	16	14
45-64	3.9	145	37	1.3	90	68	0.5	20	45	1.9	26	14
65-74	3.7	121	32	1.2	71	58	0.5	19	38	1.8	24	13
75-84	4.0	126	31	1.2	71	58	0.6	21	35	2.0	27	14
85 and older	4.1	120	30	1.1	66	58	0.6	20	31	2.1	28	13
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility												
Aged	3.8	117	31	1.2	66	57	0.6	19	34	1.9	25	13
Disabled	3.5	132	37	1.2	81	70	0.4	19	44	1.8	24	14
Adults	2.4	90	37	0.8	57	73	0.2	11	50	1.3	17	13
Children	3.4	195	58	0.5	47	102	0.8	120	150	1.8	23	13
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Gender												
Female	4.0	132	33	1.3	78	61	0.5	20	37	2.0	26	13
Male	2.7	108	39	0.8	65	79	0.4	17	43	1.4	20	14
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Race												
White	4.2	147	35	1.3	88	65	0.6	22	39	2.1	29	14
African American	2.9	98	33	0.9	58	64	0.4	16	38	1.5	19	13
Other/unknown	3.5	116	33	1.1	68	61	0.5	18	38	1.7	23	13
Use of Nursing Facilities												
Entire year	5.7	184	32	1.7	105	62	0.9	31	35	2.9	40	14
Part year	4.2	142	34	1.3	84	64	0.6	22	35	2.0	29	14
None	3.3	114	35	1.1	68	65	0.4	17	40	1.6	21	13
Maintenance Assistance Status												
Cash	3.4	116	34	1.1	70	64	0.4	18	39	1.7	22	13
Medically needy	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Poverty related	1.5	51	33	0.5	30	61	0.2	7	37	0.7	10	13
Other/unknown	4.8	162	34	1.5	95	65	0.7	26	36	2.4	33	14

Source: Data for this table are from the MAX 1999 file for Alabama, released by CMS in 1/2004. This table was produced on 06/25/2004.

a. Table 14 includes the beneficiaries represented by Cell G 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 14

Dual Eligible 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 Alabama, 4.9 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 15

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, ALABAMA, 1999

Therapeutic Category	No. of Rx per Bene Mo among Users			\$ per Bene Mo among Users			\$ per Rx			Users							
	Total	Patented Brand-Name	Off-Patent Brand-Name	Total	Patented Brand-Name	Off-Patent Brand-Name	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total No. of Rx	Total Rx \$	No. Dual Benes	As % of Bene Mos			
															Generic	Patented Brand-Name	Off-Patent Brand-Name
Anti-infective Agents	0.3	0.2	0.0	0.1	\$15	\$13	\$0	\$2	\$46	\$79	\$45	\$12	227,278	\$10,540,933	63,227	57.8 %	717,405
Biologics	0.1	0.1	0.0	0.0	3	1	0	2	32	13	9,997	74	4,940	157,318	3,996	3.6	46,498
Antineoplastic Agents	0.5	0.2	0.1	0.2	52	27	17	8	113	170	141	46	16,842	1,903,166	3,343	3.1	36,326
Endocrine/Metabolic Drugs	0.8	0.4	0.1	0.3	23	18	1	3	28	42	17	11	378,477	10,654,424	41,196	37.6	465,654
Cardiovascular Agents	1.6	0.5	0.3	0.7	42	22	11	9	27	46	33	12	1,203,733	32,858,904	69,008	63.0	774,969
Respiratory Agents	0.5	0.2	0.0	0.3	13	9	1	4	25	47	20	13	280,706	7,055,011	45,976	42.0	522,623
Gastrointestinal Agents	0.6	0.2	0.0	0.4	29	23	1	6	49	98	77	16	275,462	13,423,824	40,345	36.9	456,972
Genitourinary Agents	0.3	0.2	0.0	0.1	11	9	0	2	34	48	21	15	52,118	1,777,886	14,041	12.8	160,980
CNS Drugs	0.9	0.4	0.1	0.5	49	33	10	7	52	92	91	14	519,915	27,168,026	49,345	45.1	554,660
Stimulants/Anti-obesity/Anorexia	0.4	0.1	0.1	0.3	14	4	3	7	35	67	53	25	1,867	65,349	422	0.4	4,622
Miscellaneous Psychological/Neurological Agents	0.6	0.4	0.0	0.1	54	51	0	3	91	115	75	21	26,464	2,419,277	4,062	3.7	45,075
Analgesics and Anesthetics	0.6	0.1	0.0	0.5	14	7	1	6	23	76	44	13	400,515	9,125,674	56,032	51.2	636,657
Neuromuscular Agents	0.7	0.2	0.1	0.4	26	15	5	6	37	81	37	15	229,855	8,461,069	28,276	25.8	320,709
Nutritional Products	0.6	0.1	0.2	0.4	10	2	5	4	16	30	22	11	214,025	3,480,384	30,257	27.6	337,316
Hematological Agents	0.6	0.1	0.2	0.3	25	11	7	8	42	170	32	23	133,195	5,612,847	19,688	18.0	220,338
Topical Products	0.4	0.2	0.1	0.1	11	7	2	2	29	42	33	13	176,340	5,193,414	40,489	37.0	462,249
Miscellaneous Products	0.4	0.1	0.1	0.2	64	41	16	8	148	329	226	32	10,363	1,535,076	2,164	2.0	23,819
Unknown Therapeutic Category	0.5	0.0	0.0	0.0	17	0	0	0	37	0	0	0	224,657	8,317,878	43,544	39.8	495,168
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.	4,376,752	149,750,460	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 1999 file for Alabama, released by CMS in 1/2004. This table was produced on 06/25/2004.

- a. Table 15 includes the beneficiaries represented by Cell G 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 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. 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 Alabama, 4.9 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 16

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP^{a, b, c}
DUAL ELIGIBLE BENEFICIARIES, ALABAMA, 1999

Top 10 Drug Groups	Users			Among Users		
	Total Medicaid Rx \$	No.	As % of Dual Benes	No. of Bene Mos	No. of Rx per Bene Mo	Rx \$ per Bene Mo
ANTIPSYCHOTICS	\$11,904,006	18,449	16.9 %	208,977	0.6	\$100
ANTIDEPRESSANTS	10,762,195	38,100	34.8	430,587	0.5	48
ULCER DRUGS	10,709,745	39,539	36.1	452,815	0.4	55
ANTIHYPERTENSIVE	9,791,893	44,164	40.3	503,162	0.6	31
CALCIUM BLOCKERS	8,931,586	25,922	23.7	295,297	0.7	44
ANTIDIABETIC	8,732,527	29,786	27.2	339,079	0.7	38
ANTICONVULSANT	6,523,831	18,731	17.1	212,983	0.6	47
ANALGESICS - Narcotic	5,483,178	62,928	57.5	721,709	0.3	23
ANTHYPERLIPIDEMIC	5,469,016	11,879	10.9	137,591	0.6	64
ANTIASTMATIC	4,498,681	29,840	27.3	337,950	0.4	33

Source: Data for this table are from the MAX 1999 file for Alabama, released by CMS in 1/2004. This table was produced on 06/25/2004.

a. Table 16 includes the beneficiaries represented by Cell G 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 16A
 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}
 DUAL ELIGIBLE BENEFICIARIES, ALABAMA, 1999

Beneficiary Characteristics	All Top 10 Drug Groups				ANTIPSYCHOTICS				ANTIDEPRESSANTS			
	No. of Rx	Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
All	1,883,422	\$82,806,658	18,449	16.9 %	208,977	0.6	\$57	38,100	34.8 %	430,587	0.5	\$25
Female	1,428,195	60,653,813	12,198	15.9	137,995	0.5	49	29,679	38.6	336,597	0.5	25
Disabled	743,428	33,485,619	6,500	18.4	75,326	0.6	60	16,008	45.4	185,177	0.5	24
5 and younger	30	891	0	0.0	0	0.0	0	1	5.3	6	0.5	3
6-14	97	3,713	0	0.0	0	0.0	0	2	14.3	24	0.4	27
15-20	724	39,166	7	7.4	81	0.5	134	15	16.0	165	0.2	13
21-44	108,096	5,889,418	1,994	25.3	23,195	0.6	69	3,940	49.9	45,604	0.4	24
45-64	282,270	13,275,377	2,249	18.6	26,017	0.6	66	6,831	56.3	78,823	0.5	26
65-74	233,599	9,690,186	1,319	14.2	15,328	0.6	51	3,494	37.6	40,705	0.5	22
75-84	95,619	3,728,837	738	16.5	8,523	0.5	37	1,356	30.3	15,634	0.6	23
85 and older	22,993	858,031	193	14.3	2,182	0.5	29	369	27.4	4,216	0.5	23
Other Eligibles	684,767	27,168,194	5,698	13.7	62,669	0.5	36	13,671	32.9	151,420	0.6	26
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	12	503	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	1,531	69,785	24	11.5	225	0.5	40	92	44.0	882	0.5	23
45-64	447	26,322	7	14.6	60	0.4	38	19	39.6	159	0.5	33
65-74	143,682	5,971,239	763	8.7	8,476	0.5	49	2,374	27.1	26,913	0.5	24
75-84	282,578	11,305,392	2,135	13.8	23,712	0.5	38	5,243	33.9	58,450	0.6	26
85 and older	256,517	9,794,953	2,769	16.2	30,196	0.5	31	5,943	34.8	65,016	0.6	28
Male	455,227	22,152,845	6,251	19.1	70,982	0.6	73	8,421	25.8	93,990	0.5	25
Disabled	314,715	16,542,022	4,875	21.9	56,246	0.7	82	5,730	25.8	65,585	0.5	24
5 and younger	5	186	1	16.7	3	0.3	23	0	0.0	0	0.0	0
6-14	127	5,296	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	863	48,394	17	11.7	180	0.8	90	20	13.8	219	0.3	18
21-44	100,369	6,708,596	2,624	27.8	30,410	0.7	94	2,531	26.8	29,134	0.4	25
45-64	118,762	5,955,811	1,521	20.7	17,547	0.7	78	2,011	27.4	22,801	0.5	24
65-74	73,474	3,018,757	516	13.1	5,955	0.6	52	886	22.6	10,225	0.5	21
75-84	17,861	681,012	157	14.1	1,739	0.6	38	234	21.0	2,669	0.5	20
85 and older	3,294	123,970	39	16.4	412	0.4	25	48	20.2	537	0.6	25
Other Eligibles	140,512	5,610,823	1,376	13.2	14,736	0.5	36	2,691	25.8	28,405	0.5	27
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	12	934	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	619	25,341	5	8.8	51	0.3	39	28	49.1	225	0.4	21
45-64	426	20,717	3	8.8	27	0.7	83	11	32.4	102	0.6	19
65-74	42,474	1,758,376	320	9.2	3,463	0.5	46	668	19.2	7,282	0.5	23
75-84	55,250	2,200,849	516	14.3	5,611	0.5	37	1,057	29.3	11,177	0.5	28
85 and older	41,731	1,604,606	532	16.3	5,584	0.4	28	927	28.3	9,619	0.6	28
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 Alabama, released by CMS in 1/2004. This table was produced on 06/25/2004.

a. Table 16A includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 1999. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

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

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

TABLE 16B
 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}
 DUAL ELIGIBLE BENEFICIARIES, ALABAMA, 1999

Beneficiary Characteristics	ULCER DRUGS					ANTIHYPERTENSIVE					CALCIUM BLOCKERS				
	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
All	39,539	36.1 %	452,815	0.4	\$24	44,164	40.3 %	503,162	0.6	\$20	25,922	23.7 %	295,297	0.7	\$30
Female	30,254	39.4	347,355	0.4	24	33,564	43.7	383,407	0.6	20	20,515	26.7	234,246	0.7	30
Disabled	15,391	43.7	179,591	0.4	24	15,389	43.6	178,237	0.6	19	9,238	26.2	106,624	0.7	31
5 and younger	4	21.1	24	0.4	17	0	0.0	0	0.0	0	3	15.8	18	0.4	19
6-14	4	28.6	42	0.5	20	1	7.1	12	0.7	6	4	28.6	42	0.5	25
15-20	24	25.5	268	0.3	19	25	26.6	280	0.4	16	14	14.9	154	0.5	27
21-44	2,387	30.3	27,897	0.3	20	1,394	17.7	16,128	0.5	15	726	9.2	8,368	0.5	24
45-64	5,881	48.5	68,551	0.4	25	5,401	44.6	62,281	0.6	19	3,234	26.7	37,086	0.7	31
65-74	4,477	48.2	52,449	0.4	25	5,490	59.1	64,017	0.6	20	3,285	35.4	38,312	0.7	33
75-84	2,043	45.6	23,812	0.4	24	2,432	54.3	28,138	0.6	20	1,551	34.6	17,903	0.7	32
85 and older	571	42.4	6,548	0.5	24	646	48.0	7,381	0.6	18	421	31.3	4,741	0.7	30
Other Eligibles	14,863	35.8	167,764	0.5	24	18,175	43.7	205,170	0.6	20	11,277	27.1	127,622	0.7	30
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	100.0	12	1.0	42
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	50	23.9	516	0.3	16	15	7.2	153	0.5	14	12	5.7	120	0.5	20
45-64	7	14.6	60	0.6	51	11	22.9	72	0.7	15	8	16.7	72	0.5	17
65-74	2,825	32.2	32,427	0.4	23	4,143	47.3	47,458	0.6	20	2,427	27.7	27,733	0.7	31
75-84	5,807	37.5	66,080	0.5	24	7,424	48.0	84,589	0.6	20	4,590	29.6	52,556	0.7	30
85 and older	6,174	36.2	68,681	0.6	25	6,582	38.6	72,898	0.7	20	4,239	24.9	47,129	0.7	29
Male	9,285	28.4	105,460	0.4	23	10,600	32.5	119,755	0.6	19	5,407	16.6	61,051	0.7	30
Disabled	5,989	27.0	69,149	0.4	23	6,409	28.8	73,301	0.6	19	3,373	15.2	38,687	0.6	30
5 and younger	1	16.7	3	0.3	4	1	16.7	5	0.4	20	0	0.0	0	0.0	0
6-14	3	60.0	33	0.3	13	1	20.0	12	0.5	28	4	80.0	45	0.5	28
15-20	11	7.6	123	0.3	12	24	16.6	288	0.6	17	14	9.7	165	0.4	22
21-44	1,760	18.6	20,425	0.3	20	1,389	14.7	15,769	0.5	16	674	7.1	7,724	0.5	29
45-64	2,251	30.7	25,930	0.4	25	2,518	34.3	28,627	0.6	19	1,338	18.2	15,215	0.6	31
65-74	1,494	38.0	17,293	0.4	24	1,867	47.5	21,565	0.6	21	1,015	25.8	11,767	0.7	31
75-84	391	35.1	4,472	0.4	20	520	46.7	6,021	0.6	19	274	24.6	3,156	0.7	29
85 and older	78	32.8	870	0.5	27	89	37.4	1,014	0.6	19	54	22.7	615	0.8	32
Other Eligibles	3,296	31.6	36,311	0.5	22	4,191	40.1	46,454	0.6	21	2,034	19.5	22,364	0.7	28
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	100.0	12	1.0	78
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	15	26.3	147	0.4	24	10	17.5	84	0.4	13	8	14.0	72	0.3	10
45-64	10	29.4	95	0.4	32	7	20.6	72	0.6	23	4	11.8	18	0.3	16
65-74	902	26.0	10,153	0.4	21	1,350	38.9	15,265	0.6	20	657	18.9	7,330	0.6	28
75-84	1,226	34.0	13,476	0.5	22	1,596	44.2	17,688	0.6	21	778	21.6	8,657	0.7	30
85 and older	1,143	34.9	12,440	0.5	23	1,228	37.5	13,345	0.6	21	586	17.9	6,275	0.7	26
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Table 16B

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 1999 file for Alabama, released by CMS in 1/2004. This table was produced on 06/25/2004.

a. Table 16B includes the beneficiaries represented by Cell G 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 16C
 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}
 DUAL ELIGIBLE BENEFICIARIES, ALABAMA, 1999

Beneficiary Characteristics	ANTIDIABETIC				ANTICONVULSANT				ANALGESICS - Narcotic						
	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
All	29,786	27.2 %	339,079	0.7	\$26	18,731	17.1 %	212,983	0.6	\$31	62,928	57.5 %	721,709	0.3	\$8
Female	24,106	31.4	275,161	0.7	26	12,409	16.2	141,203	0.6	28	47,658	62.0	548,303	0.3	7
Disabled	12,499	35.4	144,351	0.7	28	7,603	21.6	88,010	0.6	30	27,539	78.1	320,389	0.3	8
5 and younger	1	5.3	2	0.5	12	0	0.0	0	0.0	0	3	15.8	9	0.3	2
6-14	0	0.0	0	0.0	0	2	14.3	18	1.1	38	3	21.4	36	0.2	1
15-20	5	5.3	54	0.6	30	18	19.1	207	0.6	29	52	55.3	569	0.3	5
21-44	1,152	14.6	13,296	0.6	25	2,333	29.6	27,082	0.6	37	6,103	77.4	71,076	0.3	7
45-64	4,734	39.0	54,617	0.7	30	2,999	24.7	34,719	0.6	31	10,492	86.5	121,854	0.4	8
65-74	4,525	48.7	52,520	0.7	29	1,501	16.2	17,441	0.6	23	7,119	76.6	83,285	0.3	7
75-84	1,702	38.0	19,534	0.7	26	605	13.5	6,937	0.6	21	2,988	66.7	34,611	0.4	7
85 and older	380	28.2	4,328	0.7	23	145	10.8	1,606	0.6	21	779	57.8	8,949	0.3	7
Other Eligibles	11,607	27.9	130,810	0.7	23	4,806	11.6	53,193	0.6	23	20,119	48.4	227,914	0.3	7
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	18	8.6	162	0.4	22	39	18.7	375	0.4	28	164	78.5	1,569	0.3	7
45-64	6	12.5	42	0.6	19	8	16.7	81	0.8	112	21	43.8	204	0.2	3
65-74	2,958	33.8	33,677	0.7	26	932	10.6	10,439	0.6	25	4,326	49.4	49,749	0.3	6
75-84	5,158	33.3	58,734	0.7	24	1,993	12.9	22,246	0.6	24	7,965	51.4	91,323	0.3	7
85 and older	3,467	20.3	38,195	0.7	20	1,834	10.8	20,052	0.6	21	7,643	44.8	85,069	0.3	8
Male	5,680	17.4	63,918	0.7	25	6,322	19.4	71,780	0.7	37	15,270	46.8	173,406	0.3	8
Disabled	3,628	16.3	41,744	0.7	27	5,054	22.7	58,099	0.7	40	11,131	50.1	128,018	0.3	9
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	16.7	3	0.3	2
6-14	0	0.0	0	0.0	0	3	60.0	33	0.3	7	1	20.0	12	0.1	0
15-20	4	2.8	48	0.6	12	26	17.9	300	0.9	52	29	20.0	342	0.2	4
21-44	684	7.2	7,939	0.6	25	2,485	26.3	28,758	0.7	47	4,354	46.1	49,946	0.3	9
45-64	1,662	22.6	19,036	0.6	28	1,768	24.1	20,209	0.7	35	3,909	53.2	44,960	0.4	10
65-74	996	25.4	11,503	0.7	27	589	15.0	6,745	0.7	25	2,163	55.1	25,070	0.3	7
75-84	237	21.3	2,731	0.7	23	160	14.4	1,793	0.7	24	558	50.1	6,383	0.3	8
85 and older	45	18.9	487	0.5	19	23	9.7	261	0.7	21	116	48.7	1,302	0.3	6
Other Eligibles	2,052	19.6	22,174	0.7	23	1,268	12.1	13,681	0.6	24	4,139	39.6	45,388	0.3	7
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	4	7.0	27	0.6	18	12	21.1	75	0.3	30	40	70.2	369	0.5	13
45-64	2	5.9	18	0.8	18	4	11.8	39	0.4	8	21	61.8	202	0.6	30
65-74	668	19.2	7,370	0.7	26	413	11.9	4,593	0.6	24	1,329	38.3	14,811	0.3	6
75-84	824	22.8	8,918	0.7	22	457	12.7	4,911	0.7	25	1,479	41.0	16,316	0.3	7
85 and older	554	16.9	5,841	0.6	19	382	11.7	4,063	0.6	22	1,270	38.8	13,690	0.3	6
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Table 16C

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 1999 file for Alabama, released by CMS in 1/2004. This table was produced on 06/25/2004.

a. Table 16C includes the beneficiaries represented by Cell G 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 16D
 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}
 DUAL ELIGIBLE BENEFICIARIES, ALABAMA, 1999

Beneficiary Characteristics	ANTIHYPERLIPIDEMIC				ANTIASTHMATIC				Mean Rx \$	Mean No. of Rx	Users as % of Dual Benes	No. of Bene Mos among Users	Mean Rx \$	Mean No. of Rx	Users as % of Dual Benes	No. of Bene Mos among Users	No. of Bene Mos
	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean Rx \$	Mean No. of Rx	Users as % of Dual Benes	No. of Bene Mos among Users	Mean Rx \$									
All	11,879	10.9 %	137,591	0.6	\$40	29,840	27.3 %	337,950	\$13	0.4	109,483	1,202,203					
Female	9,478	12.3	109,951	0.6	40	20,859	27.2	237,090	13	0.4	76,821	847,804					
Disabled	5,326	15.1	62,016	0.6	40	12,279	34.8	141,560	13	0.4	35,259	396,557					
5 and younger	0	0.0	0	0.0	0	3	15.8	12	8	0.6	19	90					
6-14	0	0.0	0	0.0	0	3	21.4	36	11	0.3	14	120					
15-20	0	0.0	0	0.0	0	19	20.2	219	10	0.3	94	1,022					
21-44	357	4.5	4,125	0.4	27	1,863	23.6	21,585	10	0.3	7,890	88,538					
45-64	2,272	18.7	26,312	0.6	38	5,072	41.8	58,421	14	0.4	12,123	134,580					
65-74	2,015	21.7	23,653	0.7	44	3,810	41.0	44,102	15	0.4	9,292	106,232					
75-84	599	13.4	6,966	0.7	42	1,222	27.3	13,927	13	0.4	4,480	51,012					
85 and older	83	6.2	960	0.6	36	287	21.3	3,258	10	0.4	1,347	14,963					
Other Eligibles	4,152	10.0	47,935	0.6	41	8,580	20.6	95,530	12	0.4	41,562	451,247					
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0	0.0	0	0					
6-14	0	0.0	0	0.0	0	0	0.0	0	0	0.0	1	12					
15-20	0	0.0	0	0.0	0	0	0.0	0	0	0.0	2	18					
21-44	5	2.4	45	0.5	32	37	17.7	321	6	0.2	209	1,685					
45-64	3	6.3	30	0.5	14	15	31.3	129	19	0.6	48	379					
65-74	1,502	17.1	17,317	0.6	39	1,884	21.5	21,366	13	0.4	8,762	96,056					
75-84	1,951	12.6	22,712	0.7	42	3,442	22.2	38,578	13	0.4	15,482	170,949					
85 and older	691	4.1	7,831	0.6	38	3,202	18.8	35,136	12	0.4	17,058	182,148					
Male	2,401	7.4	27,640	0.6	38	8,981	27.5	100,860	14	0.4	32,662	354,399					
Disabled	1,737	7.8	20,116	0.6	39	5,452	24.5	62,488	14	0.4	22,218	245,508					
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0	0.0	6	29					
6-14	0	0.0	0	0.0	0	6	120.0	72	43	1.1	5	57					
15-20	2	1.4	24	0.6	34	5	3.4	60	2	0.1	145	1,578					
21-44	347	3.7	3,978	0.5	29	1,096	11.6	12,796	10	0.3	9,441	104,230					
45-64	816	11.1	9,424	0.6	39	1,951	26.6	22,257	14	0.4	7,342	80,188					
65-74	489	12.4	5,697	0.7	43	1,846	47.0	21,111	17	0.5	3,928	44,351					
75-84	72	6.5	861	0.6	43	462	41.5	5,255	15	0.5	1,113	12,511					
85 and older	11	4.6	132	0.7	43	86	36.1	937	11	0.4	238	2,564					
Other Eligibles	664	6.4	7,524	0.6	37	3,529	33.8	38,372	14	0.4	10,444	108,891					
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0	0.0	0	0					
6-14	0	0.0	0	0.0	0	0	0.0	0	0	0.0	1	12					
15-20	0	0.0	0	0.0	0	0	0.0	0	0	0.0	0	0					
21-44	5	8.8	42	0.4	12	17	29.8	174	32	0.8	57	433					
45-64	6	17.6	72	0.9	49	9	26.5	96	14	0.5	34	273					
65-74	317	9.1	3,590	0.6	38	1,075	31.0	11,943	14	0.4	3,473	36,718					
75-84	255	7.1	2,940	0.6	36	1,354	37.5	14,730	15	0.5	3,607	37,895					
85 and older	81	2.5	880	0.6	34	1,074	32.8	11,429	12	0.4	3,272	33,560					
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 Alabama, released by CMS in 1/2004. This table was produced on 06/25/2004.

- a. Table 16D includes the beneficiaries represented by Cell G 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 17
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BENEFICIARY CHARACTERISTIC^{a, b}
 DUAL ELIGIBLE BENEFICIARIES, ALABAMA, 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	\$184	5.7	13,139	149,454
Age				
0-64	216	5.7	795	9,199
65-74	230	6.7	1,507	17,391
75-84	198	5.9	4,068	46,270
85 and older	161	5.3	6,769	76,594
Unknown	0	0.0	0	0
Gender				
Female	183	5.7	10,608	120,989
Male	190	5.5	2,531	28,465
Unknown	0	0.0	0	0
Race				
White	195	6	10,083	114,335
African American	149	4.6	2,951	33,919
Other/unknown	157	4.7	105	1,200
Basis of Eligibility				
Aged	179	5.6	10,785	122,055
Disabled	207	5.9	2,354	27,399
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 Alabama, released by CMS in 1/2004. This table was produced on 06/25/2004.

a. Table 17 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their 1999 Medicaid enrollment. A total of 10,163 beneficiaries who were in nursing facilities for part of their enrollment and their 92,055 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 18

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d, e}
 DUAL ELIGIBLE BENEFICIARIES, ALABAMA, 1999

Therapeutic Category	No. of Rx per Bene Mo among Users				\$ per Bene Mo among Users				Total # of Rx			Total Rx \$			Users	
	Total	Patented	Off-Patent	Generic	Total	Patented	Off-Patent	Generic	Total	Patented	Off-Patent	Generic	No.	As % of Dual All-Year NF Residents	No. of Bene Mos	
Anti-infective Agents	0.3	0.2	0.0	0.1	\$16	\$14	\$0	\$2	\$46	\$71	\$45	\$12	39,451	9,840	74.9 %	113,150
Biologics	0.1	0.1	0.0	0.0	1	1	0	0	11	8	0	18	3,455	2,842	21.6	33,686
Antineoplastic Agents	0.4	0.1	0.2	0.2	48	11	25	11	106	163	160	49	4,055	801	6.1	9,022
Endocrine/Metabolic Drugs	0.9	0.4	0.1	0.4	25	20	1	4	26	45	15	10	61,934	5,735	43.6	65,626
Cardiovascular Agents	1.8	0.4	0.4	1.0	40	16	12	12	22	40	26	13	198,816	9,707	73.9	110,478
Respiratory Agents	0.6	0.1	0.0	0.4	13	7	0	6	23	46	20	14	43,489	6,714	51.1	77,304
Gastrointestinal Agents	0.9	0.3	0.0	0.6	39	27	1	11	42	93	75	18	67,502	6,369	48.5	72,991
Genitourinary Agents	0.5	0.2	0.0	0.2	17	13	0	3	35	52	25	16	13,384	2,485	18.9	28,736
CNS Drugs	1.2	0.6	0.2	0.5	64	45	13	6	53	78	79	12	113,162	8,153	62.1	93,238
Stimulants/Anti-obesity/Anorexia	0.4	0.0	0.0	0.4	10	0	1	8	22	97	27	21	402	82	0.6	926
Miscellaneous Psychological/Neurological Agents	0.7	0.7	0.0	0.0	79	78	0	1	109	114	0	25	9,234	1,117	8.5	12,720
Analgesics and Anesthetics	0.7	0.1	0.0	0.5	16	8	1	7	23	69	34	13	47,644	6,086	46.3	69,852
Neuromuscular Agents	1.0	0.3	0.3	0.5	39	17	11	10	38	68	42	21	47,603	4,055	30.9	46,615
Nutritional Products	0.8	0.1	0.2	0.5	14	4	4	6	16	31	20	11	73,559	7,617	58.0	87,305
Hematological Agents	0.8	0.1	0.3	0.5	27	9	8	10	32	130	28	20	40,568	4,172	31.8	47,744
Topical Products	0.4	0.2	0.1	0.2	13	7	3	2	29	43	35	13	42,855	8,326	63.4	96,394
Miscellaneous Products	0.2	0.0	0.0	0.2	9	4	1	5	37	180	98	22	1,931	691	5.3	7,887
Unknown Therapeutic Category	0.5	0.0	0.0	0.0	14	0	0	0	31	0	0	0	38,187	7,224	55.0	83,381
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.	847,231	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 1999 file for Alabama, released by CMS in 1/2004. This table was produced on 06/25/2004.

- a. Table 18 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 1999. A total of 10,163 beneficiaries who were in nursing facilities for part of their enrollment and their 92,055 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 Alabama, 4.9 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 18

Dual Eligible 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.

APPENDIX TABLE A.3
 CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY^{a, b}
 DUAL ELIGIBLE BENEFICIARIES, ALABAMA, 1999

Beneficiary Characteristics	No. of Benes					No. of Bene Mos					
	All	Aged	Disabled	Adults	Children	All	Aged	Disabled	Adults	Children	Unknown
All	110,900	52,329	58,202	364	5	1,232,071	569,555	659,474	2,997	45	0
Age											
5 and younger	25	0	25	0	0	119	0	119	0	0	0
6-14	21	0	19	0	2	201	0	177	0	24	0
15-20	241	0	239	1	1	2,677	0	2,659	9	9	0
21-44	17,759	0	17,490	267	2	199,467	0	197,259	2,196	12	0
45-64	19,776	5	19,694	77	0	221,727	22	221,063	642	0	0
65-74	25,974	12,502	13,460	12	0	293,086	137,609	155,399	78	0	0
75-84	25,051	19,372	5,676	3	0	278,794	213,765	64,999	30	0	0
85 and older	22,053	20,450	1,599	4	0	236,000	218,159	17,799	42	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0
Gender											
Female	77,846	41,845	35,724	274	3	869,303	459,238	407,776	2,265	24	0
Male	33,054	10,484	22,478	90	2	362,768	110,317	251,698	732	21	0
Unknown	0	0	0	0	0	0	0	0	0	0	0
Race											
White	56,131	28,420	27,519	191	1	614,050	301,968	310,504	1,566	12	0
African American	43,409	18,263	24,974	169	3	491,181	204,188	285,577	1,395	21	0
Other/unknown	11,360	5,646	5,709	4	1	126,840	63,399	63,393	36	12	0
Use of Nursing Facilities											
All year	13,164	10,808	2,356	0	0	149,987	122,474	27,513	0	0	0
Part year	10,198	8,726	1,471	1	0	92,870	78,410	14,448	12	0	0
None	87,538	32,795	54,375	363	5	989,214	368,671	617,513	2,985	45	0
Maintenance Assistance Status											
Cash	84,647	33,586	50,848	213	0	948,121	369,175	577,062	1,884	0	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0
Poverty related	2,510	1,265	1,097	144	4	26,221	13,643	11,507	1,038	33	0
Other/unknown	23,743	17,478	6,257	7	1	257,729	186,737	70,905	75	12	0
Dual Status^c											
Full dual, all year	106,637	49,782	56,501	349	5	1,185,791	541,756	641,158	2,832	45	0
Full dual, part year	4,263	2,547	1,701	15	0	46,280	27,799	18,316	165	0	0
Managed Care Status											
FFS all year	107,357	50,956	56,048	348	5	1,190,772	553,496	634,378	2,853	45	0
FFS part year, with Rx claims	1,789	584	1,201	4	0	21,035	6,785	14,211	39	0	0
FFS part year, no Rx claims	337	100	228	9	0	3,545	1,087	2,380	78	0	0
MC all year, with Rx claims	1,184	573	611	0	0	14,141	6,833	7,308	0	0	0
MC all year, no Rx claims	233	116	114	3	0	2,578	1,354	1,197	27	0	0

Source: Data for this table are from the MAX 1999 file for Alabama, released by CMS in 1/2004. This table was produced on 06/25/2004.

a. Table A.3 includes the beneficiaries represented by Cell F 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. Refer to footnote g of Table 1 for more information about how we determined dual eligibility status.

Bene Mo(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.4
 MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS
 DUAL ELIGIBLE BENEFICIARIES, ALABAMA, 1999

Beneficiary Characteristics	Benes and					
	Bene Mos in Cell F of Table 1	Included in Cell G of Table 1		Excluded from Cell G of Table 1		
	No. of Benes	No. of Benes	No. of Benes	No. of Benes	No. of Benes	No. of Benes
All	110,900	1,232,071	109,483	1,202,203	1,417	29,868
FFS all year	107,357	1,190,772	107,357	1,190,772	0	0
FFS part year, with Rx claims	1,789	21,035	1,789	9,784	0	11,251
FFS part year, with no Rx claims	337	3,545	337	1,647	0	1,898
MC all year, with Rx claims	1,184	14,141	0	0	1,184	14,141
MC all year, with no Rx claims	233	2,578	0	0	233	2,578

Source: Data for this table are from the MAX 1999 file for Alabama, released by CMS in 1/2004. This table was produced on 06/25/2004.

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

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