

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

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TABLE 11

CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a,b}
 DUAL ELIGIBLE BENEFICIARIES, CALIFORNIA, 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	780,380	443,229	333,381	3,730	40	0	8,367,079	4,685,049	3,656,822	24,891	317	0						0	
Age																			
5 and younger	21	2	17	0	2	0	212	24	164	0	24	0						0	
6-14	79	0	72	0	7	0	866	0	800	0	66	0						0	
15-20	661	0	628	7	26	0	7,162	0	6,911	54	197	0						0	
21-44	89,708	10	87,905	1,788	5	0	964,223	107	951,643	12,443	30	0						0	
45-64	119,717	28	118,137	1,552	0	0	1,263,471	275	1,252,821	10,375	0	0						0	
65-74	265,840	175,605	89,890	345	0	0	2,869,834	1,839,767	1,028,238	1,829	0	0						0	
75-84	204,778	176,232	28,510	36	0	0	2,234,688	1,908,889	325,627	172	0	0						0	
85 and older	99,574	91,350	8,222	2	0	0	1,026,609	935,973	90,618	18	0	0						0	
Unknown	2	2	0	0	0	0	14	14	0	0	0	0						0	
Gender																			
Female	466,973	285,698	179,666	1,594	15	0	5,059,535	3,043,965	2,004,491	10,959	120	0						0	
Male	313,406	157,531	153,714	2,136	25	0	3,307,532	1,641,084	1,652,319	13,932	197	0						0	
Unknown	1	0	1	0	0	0	12	0	12	0	0	0						0	
Race																			
White	360,780	181,155	178,081	1,525	19	0	3,808,883	1,849,791	1,948,285	10,634	173	0						0	
African American	75,112	26,655	47,930	522	5	0	798,746	274,517	521,120	3,082	27	0						0	
Other/unknown	344,488	235,419	107,370	1,683	16	0	3,759,450	2,560,741	1,187,417	11,175	117	0						0	
Use of Nursing Facilities																			
All year	49,603	42,841	6,759	3	0	0	528,213	451,812	76,377	24	0	0						0	
Part year	44,590	34,847	9,721	22	0	0	410,516	309,859	100,467	190	0	0						0	
None	686,187	365,541	316,901	3,705	40	0	7,428,350	3,923,378	3,479,978	24,677	317	0						0	
Maintenance Assistance Status																			
Cash	575,449	303,544	270,170	1,730	5	0	6,482,901	3,401,571	3,068,923	12,361	46	0						0	
Medically needy	172,902	120,670	50,652	1,556	24	0	1,545,172	1,083,090	452,507	9,404	171	0						0	
Poverty-related	6,953	4,788	2,057	102	6	0	61,829	42,384	18,568	821	56	0						0	
Other/unknown	25,076	14,227	10,502	342	5	0	277,177	158,004	116,824	2,305	44	0						0	
Dual Medicare Status^c																			
Full dual, all year	768,519	435,211	329,584	3,684	40	0	8,259,584	4,612,355	3,622,425	24,487	317	0						0	
Full dual, part year	11,861	8,018	3,797	46	0	0	107,495	72,694	34,397	404	0	0						0	
Managed Care Status																			
FFS all year	760,963	432,086	326,553	2,294	30	0	8,248,995	4,611,951	3,618,957	17,838	249	0						0	
FFS part year, with Rx claims	12,555	7,063	4,599	886	7	0	85,754	52,220	28,386	5,092	56	0						0	
FFS part year, no Rx claims	6,862	4,080	2,229	550	3	0	32,330	20,878	9,479	1,961	12	0						0	

Source: Data for this table are from the MAX 1999 file for California, 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, CALIFORNIA, 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 Benes
All	80.2 %	23.9	\$1,362	\$57	\$6,574	20.7 %	\$59	750,380
Age								
5 and younger	81.0	21.2	2,805	132	10,262	27.3	494	21
6-14	84.8	30.8	4,792	156	11,691	41.0	279	79
15-20	67.8	14.5	1,506	104	9,836	15.3	38	661
21-44	76.7	22.9	2,381	104	8,550	27.8	55	89,708
45-64	81.5	28.3	1,957	69	7,568	25.9	74	119,717
65-74	78.8	22.1	1,099	50	4,108	26.8	60	265,840
75-84	81.8	24.1	1,119	46	6,218	18.0	59	204,778
85 and older	82.4	24.0	922	39	10,890	8.5	45	99,574
Unknown	50.0	20.0	555	28	1,032	53.8	0	2
Basis of Eligibility								
Aged	78.2	21.1	963	46	6,010	16.0	47	443,229
Disabled	83.0	27.9	1,895	68	7,366	25.7	76	333,381
Adults	63.2	12.6	954	76	2,769	34.5	34	3,730
Children	80.0	19.7	2,169	110	7,764	27.9	39	40
Unknown	0.0	0.0	0	0	0	0.0	0	0
Gender								
Female	82.4	25.3	1,259	50	6,748	18.7	59	466,973
Male	76.8	21.8	1,514	69	6,315	24.0	60	313,406
Unknown	100.0	18.0	614	34	913	67.3	11	1
Race								
White	79.3	26.4	1,577	60	8,457	18.6	51	360,780
African American	76.9	24.1	1,314	55	7,253	18.1	78	75,112
Other/unknown	81.8	21.3	1,147	54	4,455	25.7	64	344,488
Use of Nursing Facilities								
Entire year	87.1	39.4	1,441	37	29,184	4.9	27	49,603
Part year	87.3	30.7	1,327	43	15,504	8.6	58	44,590
None	79.2	22.4	1,358	61	4,359	31.2	62	686,187
Maintenance Assistance Status								
Cash	82.3	23.9	1,360	57	4,833	28.1	66	575,449
Medically needy	74.1	24.1	1,369	57	12,789	10.7	40	172,902
Poverty related	50.9	7.2	438	61	2,115	20.7	18	6,953
Other/unknown	82.3	27.0	1,612	60	4,928	32.7	57	25,076

Source: Data for this table are from the MAX 1999 file for California, 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, CALIFORNIA, 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	2.2	\$127	20.7 %	19.8 %	28.5 %	16.1 %	27.3 %	7.5 %	0.7 %	\$613	780,380	8,367,079
Age												
5 and younger	2.1	278	27.3	19.0	42.9	4.8	23.8	9.5	0.0	1,017	21	212
6-14	2.8	437	41.0	15.2	21.5	19.0	32.9	8.9	2.5	1,067	79	866
15-20	1.3	139	15.3	32.2	37.4	11.0	15.4	3.6	0.3	908	661	7,162
21-44	2.1	222	27.8	23.3	30.9	13.2	23.1	8.3	1.2	795	89,708	964,223
45-64	2.7	185	25.9	18.5	23.7	14.8	30.9	10.8	1.3	717	119,717	1,263,471
65-74	2.0	102	26.8	21.2	29.9	16.4	25.9	6.0	0.5	381	265,840	2,869,834
75-84	2.2	103	18.0	18.2	28.4	17.4	28.5	6.9	0.6	570	204,778	2,234,688
85 and older	2.3	90	8.5	17.6	28.2	16.9	28.5	8.2	0.6	1,056	99,574	1,026,609
Unknown	2.9	79	53.8	50.0	0.0	0.0	50.0	0.0	0.0	147	2	14
Basis of Eligibility												
Aged	2.0	91	16.0	21.8	30.5	16.6	24.8	5.8	0.5	569	443,229	4,685,049
Disabled	2.5	173	25.7	17.0	25.8	15.5	30.8	9.8	1.1	672	333,381	3,656,822
Adults	1.9	143	34.5	36.8	26.2	12.5	19.0	5.0	0.6	415	3,730	24,891
Children	2.5	274	27.9	20.0	35.0	12.5	25.0	5.0	2.5	980	40	317
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Gender												
Female	2.3	116	18.7	17.6	27.7	16.9	29.2	7.9	0.8	623	466,973	5,059,535
Male	2.1	144	24.0	23.2	29.7	14.9	24.6	6.9	0.7	598	313,406	3,307,532
Unknown	1.5	51	67.3	0.0	0.0	100.0	0.0	0.0	0.0	76	1	12
Race												
White	2.5	149	18.6	20.7	24.6	14.6	29.0	10.0	1.1	801	360,780	3,808,883
African American	2.3	124	18.1	23.1	25.4	14.9	27.7	8.2	0.7	682	75,112	798,746
Other/unknown	1.9	105	25.7	18.2	33.2	17.9	25.6	4.8	0.3	408	344,488	3,759,450
Use of Nursing Facilities												
Entire year	3.7	135	4.9	12.9	18.2	12.5	32.5	20.3	3.6	2,741	49,603	528,213
Part year	3.3	144	8.6	12.7	20.5	15.0	34.0	15.6	2.1	1,684	44,590	410,516
None	2.1	125	31.2	20.8	29.7	16.4	26.5	6.1	0.5	403	686,187	7,428,350
Maintenance Assistance Status												
Cash	2.1	121	28.1	17.7	30.5	17.1	27.8	6.5	0.5	429	575,449	6,482,901
Medically needy	2.7	153	10.7	25.9	22.0	13.2	26.2	11.1	1.6	1,431	172,902	1,545,172
Poverty related	0.8	49	20.7	49.1	33.0	8.6	7.8	1.4	0.1	238	6,953	61,829
Other/unknown	2.4	146	32.7	17.7	25.5	16.5	31.0	8.6	0.7	446	25,076	277,177

Source: Data for this table are from the MAX 1999 file for California, 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, CALIFORNIA, 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	2.2	\$127	\$57	0.7	\$81	\$108	0.3	\$22	\$71	1.0	\$18	\$18
Age												
5 and younger	2.1	278	132	0.9	240	256	0.3	23	72	0.7	13	17
6-14	2.8	437	156	1.1	344	314	0.5	58	105	1.0	28	28
15-20	1.3	139	104	0.4	89	216	0.2	33	137	0.6	14	22
21-44	2.1	222	104	0.8	163	217	0.3	30	108	1.0	23	23
45-64	2.7	185	69	0.9	123	138	0.3	30	89	1.3	26	19
65-74	2.0	102	50	0.7	62	85	0.3	18	67	0.9	15	17
75-84	2.2	103	46	0.7	60	81	0.3	20	62	1.0	16	16
85 and older	2.3	90	39	0.6	48	74	0.4	20	51	1.1	17	15
Unknown	2.9	79	28	0.1	4	58	0.8	31	40	2.0	44	22
Basis of Eligibility												
Aged	2.0	91	46	0.7	54	80	0.3	18	60	0.9	14	16
Disabled	2.5	173	68	0.8	115	135	0.3	28	83	1.2	23	19
Adults	1.9	143	76	0.7	99	144	0.2	23	102	0.9	16	19
Children	2.5	274	110	0.7	125	188	0.8	123	164	1.0	22	23
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Gender												
Female	2.3	116	50	0.8	71	90	0.3	21	67	1.1	18	17
Male	2.1	144	69	0.7	95	140	0.3	24	77	1.0	18	19
Unknown	1.5	51	34	0.2	5	31	0.3	25	76	1.0	21	21
Race												
White	2.5	149	60	0.8	95	115	0.4	26	71	1.2	21	18
African American	2.3	124	55	0.7	79	116	0.3	21	67	1.1	18	16
Other/unknown	1.9	105	54	0.7	66	97	0.3	18	72	0.9	15	17
Use of Nursing Facilities												
Entire year	3.7	135	37	0.9	72	77	0.7	30	45	1.9	28	15
Part year	3.3	144	43	0.9	83	87	0.5	28	52	1.6	26	16
None	2.1	125	61	0.7	81	112	0.3	21	78	0.9	17	18
Maintenance Assistance Status												
Cash	2.1	121	57	0.7	76	104	0.3	21	75	1.0	17	18
Medically needy	2.7	153	57	0.8	99	121	0.4	26	60	1.3	22	17
Poverty related	0.8	49	61	0.3	31	113	0.1	9	81	0.4	8	20
Other/unknown	2.4	146	60	0.8	90	114	0.3	26	81	1.2	23	19

Source: Data for this table are from the MAX 1999 file for California, 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 California, 7.0 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, CALIFORNIA, 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 Benes	No. of Bene Mos		
																Generic	Patented Brand-Name
Anti-infective Agents	0.3	0.1	0.0	0.2	\$24	\$21	\$0	\$2	\$79	\$175	\$94	\$14	1,342,197	\$105,918,103	387,814	49.7 %	4,412,614
Biologics	0.1	0.1	0.0	0.0	17	3	5	9	175	51	3,913	232	7,655	1,337,973	6,792	0.9	78,316
Antineoplastic Agents	0.4	0.1	0.1	0.1	71	39	22	10	176	310	167	70	106,016	18,665,291	24,073	3.1	261,377
Endocrine/Metabolic Drugs	0.6	0.3	0.0	0.3	35	29	1	5	61	101	37	19	1,675,506	101,933,450	257,646	33.0	2,907,733
Cardiovascular Agents	1.0	0.3	0.3	0.4	48	27	15	6	49	78	58	15	4,596,086	222,972,407	416,016	53.3	4,672,406
Respiratory Agents	0.5	0.2	0.0	0.3	17	13	0	4	37	65	37	15	1,415,737	51,886,639	262,558	33.6	3,004,163
Gastrointestinal Agents	0.4	0.2	0.1	0.2	30	19	8	3	73	127	84	18	1,149,696	84,377,729	247,382	31.7	2,818,436
Genitourinary Agents	0.3	0.1	0.0	0.1	10	6	0	3	37	53	39	23	203,053	7,496,771	68,382	8.8	786,275
CNS Drugs	0.8	0.3	0.1	0.4	65	42	16	7	83	156	113	19	2,428,545	200,678,272	273,391	35.0	3,074,640
Stimulants/Anti-obesity/Anorexia	0.4	0.1	0.2	0.2	37	12	15	10	86	119	95	58	4,977	426,716	1,008	0.1	11,407
Miscellaneous Psychological/Neurological Agents	0.4	0.2	0.0	0.2	30	26	0	3	83	140	93	19	46,280	3,828,334	11,177	1.4	127,934
Analgesics and Anesthetics	0.4	0.1	0.0	0.3	19	12	2	5	44	110	125	16	1,621,752	70,882,275	327,715	42.0	3,734,397
Neuromuscular Agents	0.8	0.2	0.1	0.4	40	24	6	11	53	109	48	25	986,062	51,776,765	113,945	14.6	1,281,792
Nutritional Products	0.3	0.0	0.0	0.3	6	0	2	4	18	46	57	13	264,342	4,692,677	70,538	9.0	789,437
Hematological Agents	0.4	0.0	0.2	0.2	34	21	6	6	77	440	40	27	423,315	32,515,695	85,998	11.0	958,480
Topical Products	0.4	0.2	0.0	0.2	12	8	1	3	31	50	36	14	1,229,158	37,819,968	281,186	36.0	3,236,527
Miscellaneous Products	0.4	0.1	0.1	0.2	94	55	30	8	240	476	355	43	57,247	13,725,627	13,728	1.8	146,152
Unknown Therapeutic Category	0.4	0.0	0.0	0.0	17	0	0	0	46	0	0	0	1,112,079	51,581,663	266,684	34.2	3,043,024
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.	18,669,703	1,062,516,355	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 1999 file for California, 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 California, 7.0 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, CALIFORNIA, 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	\$120,923,824	130,840	16.8 %	1,471,998	0.6	\$139
ULCER DRUGS	68,786,280	243,481	31.2	2,791,925	0.3	91
ANTIHYPERTENSIVE	67,444,997	265,562	34.0	3,011,359	0.4	52
ANTHYPERLIPIDEMIC	63,339,815	135,136	17.3	1,555,560	0.4	100
CALCIUM BLOCKERS	61,965,652	172,881	22.2	1,967,287	0.5	67
ANTIVIRAL	60,517,506	37,552	4.8	415,408	0.5	304
ANTIDIABETIC	56,946,905	193,714	24.8	2,189,844	0.5	55
ANTIDEPRESSANTS	56,647,344	189,228	24.2	2,135,148	0.4	62
MISC. ENDOCRINE	43,636,159	51,362	6.6	595,767	0.3	214
ANTICONVULSANT	41,437,872	101,809	13.0	1,148,993	0.6	62

Source: Data for this table are from the MAX 1999 file for California, 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, CALIFORNIA, 1999

Beneficiary Characteristics	All Top 10 Drug Groups				ANTIPSYCHOTICS				ULCER DRUGS			
	No. of Rx	Rx \$	No. of Users	Users as % of Dual Mos among 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	7,492,245	\$641,646,354	130,840	16.8 %	1,471,998	0.6	\$82	243,481	31.2 %	2,791,925	0.3	\$25
Female	4,580,594	333,677,704	71,477	15.3	804,495	0.5	63	161,051	34.5	1,854,197	0.3	24
Disabled	2,196,182	179,347,481	43,009	23.9	494,476	0.6	81	68,188	38.0	794,464	0.3	26
5 and younger	17	3,495	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	231	42,451	0	0.0	0	0.0	0	10	35.7	114	0.4	32
15-20	1,622	176,817	50	19.2	566	0.6	78	55	21.1	640	0.3	23
21-44	360,201	38,862,751	13,687	42.0	157,232	0.7	104	6,640	20.4	76,617	0.3	26
45-64	754,567	65,222,132	16,684	28.4	190,998	0.6	88	20,882	35.5	240,202	0.3	29
65-74	757,999	53,991,596	8,423	14.2	98,075	0.5	51	28,397	47.8	334,528	0.3	24
75-84	259,435	17,334,418	3,149	14.4	36,346	0.4	41	9,553	43.6	111,892	0.3	26
85 and older	62,110	3,713,821	1,016	15.1	11,259	0.4	27	2,651	39.5	30,471	0.3	25
Other Eligibles	2,384,412	154,330,223	28,468	9.9	310,019	0.4	36	92,863	32.3	1,059,733	0.3	23
5 and younger	6	434	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	29	3,983	0	0.0	0	0.0	0	2	100.0	24	0.3	37
15-20	92	9,176	1	7.1	5	0.2	9	3	21.4	34	0.4	38
21-44	4,825	514,904	130	13.8	1,238	0.4	47	146	15.5	1,428	0.3	25
45-64	3,500	294,006	64	11.8	618	0.3	53	112	20.6	1,051	0.3	23
65-74	779,047	54,934,505	6,375	6.1	70,693	0.4	44	33,399	32.1	382,972	0.2	21
75-84	1,030,646	67,531,656	11,386	10.2	125,119	0.4	37	38,757	34.6	446,726	0.3	23
85 and older	566,267	31,041,559	10,512	15.0	112,346	0.4	29	20,444	29.3	227,498	0.3	27
Male	2,911,643	307,968,433	59,362	18.9	667,491	0.7	105	82,430	26.3	937,728	0.3	25
Disabled	1,813,257	233,084,363	47,739	31.1	544,226	0.7	120	37,612	24.5	430,324	0.3	28
5 and younger	60	19,128	0	0.0	0	0.0	0	2	18.2	24	0.6	17
6-14	536	154,631	1	2.3	12	0.4	28	23	52.3	269	0.5	31
15-20	2,134	270,385	84	22.9	935	0.7	125	46	12.5	535	0.3	29
21-44	685,421	117,580,230	24,941	45.1	284,528	0.8	133	9,034	16.3	103,269	0.3	28
45-64	734,722	87,025,166	18,393	31.0	209,370	0.8	118	14,789	24.9	166,271	0.3	30
65-74	315,543	23,129,772	3,285	10.8	37,692	0.5	60	10,898	35.8	127,328	0.3	24
75-84	63,507	4,201,002	838	12.7	9,551	0.5	44	2,303	35.0	26,761	0.3	25
85 and older	11,334	704,049	197	13.0	2,138	0.4	28	517	34.1	5,867	0.3	27
Other Eligibles	1,098,367	74,863,393	11,623	7.3	123,265	0.4	39	44,818	28.1	507,404	0.3	23
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	43	5,743	0	0.0	0	0.0	0	3	60.0	31	0.5	15
15-20	112	10,003	3	15.8	22	0.3	71	3	15.8	29	0.7	71
21-44	3,986	432,797	69	8.0	608	0.5	67	140	16.3	1,347	0.3	30
45-64	5,841	511,183	63	6.1	535	0.4	51	218	21.0	2,036	0.3	28
65-74	453,829	32,331,246	3,830	5.3	41,371	0.5	49	18,319	25.0	207,922	0.2	22
75-84	491,865	33,180,996	5,176	8.0	55,271	0.4	35	19,941	31.0	227,941	0.3	24
85 and older	142,691	8,411,425	2,482	11.5	25,458	0.4	28	6,194	28.8	68,098	0.3	27
Unknown	27	894	1	33.3	12	0.3	3	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 1999 file for California, 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, CALIFORNIA, 1999

Beneficiary Characteristics	ANTIHYPERTENSIVE					ANTIHYPERLIPEMIC					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	265,562	34.0 %	3,011,359	0.4	\$22	135,136	17.3 %	1,555,560	0.4	\$41	172,881	22.2 %	1,967,287	0.5	\$32
Female	157,560	33.7	1,793,082	0.4	22	87,413	18.7	1,010,964	0.4	41	117,165	25.1	1,338,460	0.5	31
Disabled	60,073	33.4	694,451	0.4	22	35,767	19.9	416,497	0.4	42	42,309	23.5	490,236	0.5	33
5 and younger	4	66.7	34	0.2	5	0	0.0	0	0.0	0	1	16.7	12	0.2	1
6-14	11	39.3	106	0.4	34	0	0.0	0	0.0	0	12	42.9	129	0.6	29
15-20	50	19.2	568	0.4	19	2	0.8	22	0.6	37	38	14.6	438	0.4	27
21-44	3,414	10.5	39,088	0.4	19	1,728	5.3	19,855	0.4	37	2,083	6.4	23,734	0.5	33
45-64	16,551	28.2	187,639	0.4	22	10,809	18.4	123,084	0.4	42	11,103	18.9	126,183	0.5	33
65-74	26,985	45.4	315,647	0.4	23	17,630	29.7	207,692	0.4	42	19,415	32.7	227,469	0.5	33
75-84	10,293	46.9	119,869	0.4	23	4,865	22.2	57,291	0.4	44	7,599	34.6	88,718	0.5	33
85 and older	2,765	41.2	31,500	0.5	22	733	10.9	8,553	0.4	40	2,058	30.7	23,553	0.5	31
Other Eligibles	97,487	33.9	1,098,631	0.4	22	51,646	18.0	594,467	0.4	40	74,856	26.1	848,224	0.5	31
5 and younger	2	66.7	24	0.3	18	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	2	100.0	24	0.4	5	0	0.0	0	0.0	0	1	50.0	12	0.8	21
15-20	6	42.9	45	0.9	42	0	0.0	0	0.0	0	3	21.4	34	0.3	17
21-44	113	12.0	989	0.5	24	43	4.6	369	0.3	36	83	8.8	792	0.5	40
45-64	127	23.4	1,183	0.5	23	75	13.8	699	0.4	43	80	14.7	659	0.5	35
65-74	32,569	31.3	366,891	0.4	22	24,180	23.3	275,921	0.4	39	25,106	24.1	284,133	0.4	31
75-84	42,357	37.8	484,225	0.4	22	22,577	20.2	262,856	0.4	41	32,859	29.4	377,120	0.5	31
85 and older	22,311	31.9	245,250	0.5	22	4,771	6.8	54,622	0.4	40	16,724	23.9	185,474	0.5	29
Male	108,002	34.5	1,218,277	0.4	23	47,723	15.2	544,596	0.4	40	55,716	17.8	628,827	0.5	32
Disabled	42,177	27.4	477,380	0.4	23	21,744	14.1	248,138	0.4	41	22,419	14.6	254,007	0.5	34
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	4	36.4	48	0.5	28
6-14	27	61.4	307	0.5	19	1	2.3	12	0.4	26	21	47.7	235	0.5	30
15-20	32	8.7	363	0.4	21	8	2.2	96	0.4	34	29	7.9	337	0.6	39
21-44	6,271	11.3	70,523	0.4	22	3,599	6.5	41,157	0.4	35	3,317	6.0	37,394	0.5	37
45-64	17,112	28.8	188,646	0.4	23	9,401	15.8	104,535	0.4	42	9,177	15.5	101,262	0.5	36
65-74	14,748	48.4	171,568	0.4	23	7,492	24.6	87,799	0.4	43	7,916	26.0	92,154	0.5	32
75-84	3,284	49.9	38,017	0.4	23	1,112	16.9	13,037	0.4	44	1,617	24.6	18,795	0.5	31
85 and older	703	46.4	7,956	0.4	21	131	8.7	1,502	0.4	38	338	22.3	3,782	0.5	30
Other Eligibles	65,823	41.2	740,873	0.4	23	25,979	16.3	296,458	0.4	40	33,296	20.9	374,808	0.4	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	1	20.0	9	0.4	11	0	0.0	0	0.0	0	3	60.0	29	0.7	37
15-20	4	21.1	40	0.3	17	0	0.0	0	0.0	0	6	31.6	60	0.7	68
21-44	158	18.4	1,531	0.4	17	70	8.1	662	0.4	36	90	10.5	845	0.6	51
45-64	258	24.9	2,328	0.4	21	153	14.8	1,340	0.5	49	148	14.3	1,293	0.5	37
65-74	26,972	37.5	302,065	0.4	23	13,261	18.4	149,788	0.4	39	13,589	18.9	152,237	0.4	31
75-84	30,087	46.8	343,300	0.4	24	10,951	17.0	126,976	0.4	41	15,201	23.6	173,372	0.4	30
85 and older	8,343	38.8	91,600	0.4	22	1,544	7.2	17,692	0.4	38	4,259	19.8	46,972	0.5	28
Unknown	2	66.7	24	0.4	14	0	0.0	0	0.0	0	1	33.3	12	0.2	8

Table 16B

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 1999 file for California, 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, CALIFORNIA, 1999

Beneficiary Characteristics	ANTIVIRAL				ANTI-DIABETIC				ANTI-DEPRESSANTS						
	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	37,552	4.8 %	415,408	0.5	\$146	193,714	24.8 %	2,189,844	0.5	\$26	189,228	24.2 %	2,135,148	0.4	\$27
Female	9,703	2.1	111,186	0.3	61	125,242	26.8	1,424,738	0.5	26	124,070	26.6	1,405,037	0.4	26
Disabled	5,963	3.3	68,383	0.3	87	56,092	31.2	647,877	0.5	29	71,220	39.6	817,667	0.4	29
5 and younger	1	16.7	12	0.2	9	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	5	17.9	54	0.2	123	0	0.0	0	0.0	0	1	3.6	12	1.1	7
15-20	19	7.3	225	0.2	160	13	5.0	156	0.4	10	39	14.9	411	0.5	38
21-44	2,217	6.8	24,822	0.4	133	3,086	9.5	35,169	0.5	31	15,629	48.0	177,705	0.5	37
45-64	2,135	3.6	24,527	0.3	88	17,546	29.9	199,224	0.5	32	29,944	51.0	340,247	0.5	33
65-74	1,142	1.9	13,484	0.2	26	26,357	44.4	308,343	0.5	29	18,613	31.3	218,220	0.4	21
75-84	351	1.6	4,174	0.1	11	7,667	35.0	89,034	0.5	26	5,627	25.7	65,464	0.4	20
85 and older	93	1.4	1,085	0.1	9	1,423	21.2	15,951	0.4	19	1,367	20.4	15,608	0.4	20
Other Eligibles	3,740	1.3	42,803	0.1	19	69,150	24.1	776,861	0.5	23	52,850	18.4	587,370	0.4	21
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	1	50.0	12	0.3	229	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	1	7.1	12	0.3	343	2	14.3	20	0.3	12	1	7.1	5	0.4	61
21-44	75	8.0	719	0.7	244	67	7.1	589	0.4	26	364	38.6	3,404	0.4	33
45-64	20	3.7	161	0.5	158	125	23.0	1,162	0.4	28	195	35.9	1,831	0.4	33
65-74	1,444	1.4	16,385	0.2	21	28,065	27.0	314,744	0.5	25	16,728	16.1	188,294	0.3	19
75-84	1,451	1.3	17,018	0.1	10	29,909	26.7	339,749	0.5	24	21,369	19.1	240,124	0.4	21
85 and older	748	1.1	8,496	0.1	10	10,982	15.7	120,597	0.5	19	14,193	20.3	153,712	0.5	24
Male	27,848	8.9	304,210	0.6	177	68,472	21.8	765,106	0.5	26	65,158	20.8	730,111	0.4	28
Disabled	25,642	16.7	279,093	0.6	189	32,160	20.9	362,543	0.5	29	45,894	29.9	518,924	0.5	31
5 and younger	3	27.3	36	0.5	471	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	7	15.9	84	0.4	260	1	2.3	12	0.2	8	4	9.1	46	0.3	15
15-20	13	3.5	156	0.3	116	7	1.9	80	0.6	34	64	17.4	726	0.4	44
21-44	16,825	30.4	182,608	0.6	192	4,140	7.5	46,667	0.5	30	19,516	35.3	220,706	0.5	35
45-64	8,083	13.6	87,945	0.6	193	14,923	25.1	164,363	0.5	30	18,704	31.5	209,241	0.5	31
65-74	621	2.0	7,207	0.3	97	10,824	35.5	125,392	0.5	28	6,201	20.4	72,109	0.4	21
75-84	76	1.2	903	0.2	20	1,972	30.0	22,821	0.5	26	1,175	17.9	13,560	0.4	18
85 and older	14	0.9	154	0.2	20	293	19.4	3,208	0.4	22	230	15.2	2,536	0.4	19
Other Eligibles	2,206	1.4	25,117	0.2	42	36,311	22.7	402,551	0.5	23	19,264	12.1	211,187	0.4	20
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	1	20.0	9	0.4	60	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	4	21.1	45	0.3	21
21-44	71	8.2	664	0.4	125	115	13.4	1,049	0.5	31	204	23.7	1,803	0.4	27
45-64	44	4.2	462	0.5	178	292	28.2	2,601	0.5	33	217	20.9	1,908	0.4	30
65-74	1,036	1.4	11,770	0.3	56	16,939	23.5	187,239	0.4	24	7,487	10.4	83,199	0.4	20
75-84	838	1.3	9,740	0.2	20	15,450	24.0	174,066	0.5	23	8,338	13.0	92,437	0.4	20
85 and older	216	1.0	2,472	0.1	11	3,515	16.4	37,596	0.5	20	3,014	14.0	31,795	0.4	22
Unknown	1	33.3	12	0.3	15	1	33.3	12	0.7	21	0	0.0	0	0.0	0

Table 16C

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 1999 file for California, 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, CALIFORNIA, 1999

Beneficiary Characteristics	MISC. ENDOCRINE				ANTICONVULSANT				Mean Rx \$	Mean No. of Rx	Mean No. of Mos among Users	Users as % of Dual Benes	No. of Users	No. of Bene Mos among Users	Users as % of Dual Benes	Mean No. of Rx	Mean No. of Mos among Users	No. of Bene Mos
	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx										
All	51,322	6.6 %	595,767	0.3	\$73	101,809	13.0 %	1,148,993	0.6	\$36	780,380	8,367,079						
Female	46,136	9.9	536,038	0.3	27	56,160	12.0	636,167	0.5	32	466,972	5,059,533						
Disabled	13,428	7.5	157,752	0.3	32	36,257	20.2	415,878	0.6	39	179,666	2,004,491						
5 and younger	1	16.7	12	0.3	267	1	16.7	12	0.2	1	6	58						
6-14	2	7.1	19	0.6	1,115	2	7.1	24	1.3	144	28	315						
15-20	6	2.3	72	0.7	203	60	23.0	686	0.6	39	261	2,869						
21-44	524	1.6	6,045	0.4	122	11,630	35.7	132,845	0.6	49	32,558	356,232						
45-64	2,853	4.9	32,746	0.3	45	14,600	24.9	166,217	0.6	42	58,742	635,543						
65-74	7,015	11.8	83,160	0.3	23	7,262	12.2	84,997	0.5	23	59,428	683,685						
75-84	2,405	11.0	28,479	0.3	24	2,202	10.0	25,472	0.5	21	21,935	251,491						
85 and older	622	9.3	7,219	0.3	22	500	7.5	5,625	0.4	16	6,708	74,298						
Other Eligibles	32,708	11.4	378,286	0.3	24	19,903	6.9	220,289	0.5	20	287,306	3,055,042						
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	36						
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	24						
15-20	1	7.1	9	0.1	19	5	35.7	39	0.3	13	14	108						
21-44	21	2.2	228	0.3	21	178	18.9	1,598	0.4	28	942	6,814						
45-64	11	2.0	111	0.4	34	80	14.7	766	0.5	44	543	3,745						
65-74	11,539	11.1	133,520	0.3	24	6,358	6.1	71,112	0.5	21	103,995	1,102,449						
75-84	14,806	13.2	172,654	0.3	25	8,464	7.6	94,822	0.5	19	111,948	1,221,170						
85 and older	6,330	9.1	71,764	0.4	25	4,818	6.9	51,952	0.6	20	69,859	720,696						
Male	5,226	1.7	59,729	0.4	492	45,649	14.6	512,826	0.6	41	313,405	3,307,520						
Disabled	2,327	1.5	26,404	0.4	1,074	35,478	23.1	401,894	0.6	46	153,714	1,652,319						
5 and younger	2	18.2	24	0.1	18	0	0.0	0	0.0	0	11	106						
6-14	11	25.0	132	0.5	829	4	9.1	48	0.5	16	44	485						
15-20	9	2.5	108	0.4	236	70	19.1	812	0.6	45	367	4,042						
21-44	886	1.6	9,941	0.5	1,868	16,972	30.7	192,372	0.7	52	55,346	595,399						
45-64	857	1.4	9,676	0.4	958	14,165	23.8	159,454	0.7	46	59,395	617,278						
65-74	405	1.3	4,694	0.3	75	3,438	11.3	39,772	0.5	25	30,462	344,553						
75-84	129	2.0	1,515	0.3	24	725	11.0	8,274	0.5	22	6,575	74,136						
85 and older	28	1.8	314	0.2	18	104	6.9	1,162	0.5	17	1,514	16,320						
Other Eligibles	2,899	1.8	33,325	0.3	30	10,171	6.4	110,932	0.5	22	159,691	1,655,201						
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12						
6-14	1	20.0	12	0.1	300	0	0.0	0	0.0	0	5	42						
15-20	0	0.0	0	0.0	0	5	26.3	37	0.5	18	19	143						
21-44	9	1.0	86	0.4	515	105	12.2	919	0.5	55	861	5,766						
45-64	6	0.6	69	0.2	48	94	9.1	800	0.5	41	1,037	6,905						
65-74	964	1.3	11,101	0.3	43	4,084	5.7	44,981	0.5	24	71,955	739,147						
75-84	1,433	2.2	16,660	0.3	22	4,444	6.9	48,947	0.5	21	64,320	687,891						
85 and older	486	2.3	5,397	0.3	21	1,439	6.7	15,248	0.5	19	21,493	215,295						
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	26						

Table 16D

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 1999 file for California, 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, CALIFORNIA, 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	\$135	3.7	49,603	528,213
Age				
0-64	230	4.5	3,838	43,307
65-74	187	4.6	7,023	75,490
75-84	137	3.8	16,341	172,122
85 and older	100	3.2	22,401	237,294
Unknown	0	0.0	0	0
Gender				
Female	128	3.7	35,463	381,665
Male	155	3.7	14,140	146,548
Unknown	0	0.0	0	0
Race				
White	132	3.7	36,705	386,999
African American	138	3.6	4,636	51,323
Other/unknown	147	3.9	8,262	89,891
Basis of Eligibility				
Aged	123	3.5	42,841	451,812
Disabled	208	4.6	6,759	76,377
Adults	469	10.0	3	24
Children	0	0.0	0	0
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 1999 file for California, 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 44,590 beneficiaries who were in nursing facilities for part of their enrollment and their 410,516 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, CALIFORNIA, 1999

Therapeutic Category	No. of Rx per Bene Mo among Users			\$ per Bene Mo among Users			Total # of Rx	Total Rx \$	No. Residents	As % of Dual All-Year NF Residents	No. of Bene Mos
	Total	Patented	Off-Patent	Total	Patented	Off-Patent					
Anti-infective Agents	0.3	0.1	0.0	\$12	\$10	\$0	78,592	\$3,565,046	26,550	53.5 %	298,225
Biologics	0.1	0.1	0.0	1	1	0	4,761	69,824	4,360	8.8	50,856
Antineoplastic Agents	0.5	0.1	0.3	62	16	36	21,807	2,571,208	3,770	7.6	41,236
Endocrine/Metabolic Drugs	1.0	0.3	0.1	20	13	1	178,928	3,562,606	15,722	31.7	174,361
Cardiovascular Agents	1.5	0.3	0.5	34	13	13	467,166	10,270,323	27,586	55.6	303,499
Respiratory Agents	0.7	0.2	0.0	20	10	1	88,791	2,548,203	11,633	23.5	129,923
Gastrointestinal Agents	0.7	0.2	0.2	40	20	12	126,770	6,720,716	15,249	30.7	169,617
Genitourinary Agents	0.4	0.1	0.0	14	5	0	28,053	866,889	5,665	11.4	64,145
CNS Drugs	1.1	0.5	0.2	77	54	16	314,318	21,183,072	24,778	50.0	275,497
Stimulants/Anti-obesity/Anorexia	0.5	0.0	0.1	13	0	5	105	2,857	20	0.0	219
Miscellaneous Psychological/Neurological Agents	0.6	0.5	0.0	65	64	0	5,443	613,742	884	1.8	9,477
Analgesics and Anesthetics	0.6	0.1	0.0	19	11	2	92,212	2,788,460	13,242	26.7	146,523
Neuromuscular Agents	1.2	0.2	0.3	45	18	11	169,019	6,576,455	13,035	26.3	146,913
Nutritional Products	0.5	0.0	0.0	7	0	1	50,499	757,556	9,522	19.2	106,226
Hematological Agents	0.9	0.1	0.4	31	16	7	89,824	3,068,249	8,883	17.9	97,810
Topical Products	0.5	0.1	0.0	12	6	2	113,278	2,871,750	21,900	44.2	249,240
Miscellaneous Products	0.2	0.0	0.0	7	1	1	6,583	245,161	3,068	6.2	33,861
Unknown Therapeutic Category	0.5	0.0	0.0	14	0	0	116,925	3,184,702	20,639	41.6	234,391
TOTAL NO. OF RX AND RX \$	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	1,953,074	71,466,819	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 1999 file for California, 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 44,590 beneficiaries who were in nursing facilities for part of their enrollment and their 410,516 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 California, 7.0 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, CALIFORNIA, 1999

Beneficiary Characteristics	No. of Benes					No. of Bene Mos					
	All	Aged	Disabled	Adults	Children	All	Aged	Disabled	Adults	Children	Unknown
All	885,767	501,557	378,321	5,837	52	9,621,876	5,365,954	4,201,627	53,849	446	0
Age											
5 and younger	25	4	18	0	3	253	48	176	0	29	0
6-14	95	0	83	0	12	1,080	0	958	0	122	0
15-20	788	0	749	8	31	8,819	0	8,486	74	259	0
21-44	105,272	10	102,524	2,732	6	1,156,595	107	1,130,835	25,617	36	0
45-64	135,642	28	133,216	2,398	0	1,455,582	275	1,433,298	22,009	0	0
65-74	301,114	199,489	100,975	650	0	3,292,123	2,122,769	1,163,544	5,810	0	0
75-84	230,655	199,054	31,558	43	0	2,541,703	2,179,036	362,393	274	0	0
85 and older	112,174	102,970	9,198	6	0	1,165,707	1,063,705	101,937	65	0	0
Unknown	2	2	0	0	0	14	14	0	0	0	0
Gender											
Female	531,301	323,998	204,715	2,568	20	5,826,867	3,492,502	2,310,097	24,094	174	0
Male	354,465	177,559	173,605	3,269	32	3,794,997	1,873,452	1,891,518	29,755	272	0
Unknown	1	0	1	0	0	12	0	12	0	0	0
Race											
White	406,592	202,299	202,062	2,210	21	4,338,500	2,082,508	2,235,970	19,836	186	0
African American	82,310	28,507	52,818	979	6	886,979	296,601	581,290	9,045	43	0
Other/unknown	396,865	270,751	123,441	2,648	25	4,396,397	2,986,845	1,384,367	24,968	217	0
Use of Nursing Facilities											
All year	50,803	43,738	7,062	3	0	541,472	461,561	79,887	24	0	0
Part year	46,541	36,287	10,231	23	0	437,701	329,710	107,764	227	0	0
None	788,423	421,532	361,028	5,811	52	8,642,703	4,574,683	4,013,976	53,598	446	0
Maintenance Assistance Status											
Cash	655,128	345,355	307,016	2,750	7	7,461,157	3,910,312	3,523,898	26,863	84	0
Medically needy	194,955	135,601	57,060	2,263	31	1,771,658	1,231,780	520,559	19,095	224	0
Poverty related	6,985	4,809	2,066	102	8	68,213	46,892	20,419	822	80	0
Other/unknown	28,699	15,792	12,179	722	6	320,848	176,970	136,751	7,069	58	0
Dual Status^c											
Full dual, all year	873,836	493,491	374,503	5,790	52	9,500,948	5,284,562	4,162,610	53,330	446	0
Full dual, part year	11,931	8,066	3,818	47	0	120,928	81,392	39,017	519	0	0
Managed Care Status											
FFS all year	760,963	432,086	326,553	2,294	30	8,248,995	4,611,951	3,618,957	17,838	249	0
FFS part year, with Rx claims	12,555	7,063	4,599	886	7	143,150	81,233	52,650	9,190	77	0
FFS part year, no Rx claims	6,862	4,080	2,229	550	3	71,232	42,523	23,735	4,957	17	0
MC all year, with Rx claims	3,093	548	2,381	159	5	35,948	6,148	27,975	1,779	46	0
MC all year, no Rx claims	102,294	57,780	42,559	1,948	7	1,122,551	624,099	478,310	20,085	57	0

Source: Data for this table are from the MAX 1999 file for California, 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, CALIFORNIA, 1999

Beneficiary Characteristics	Bene Mos in Cell F of Table 1		Bene Mos and		Included in Cell G of Table 1		Excluded from Cell G of Table 1	
	No. of Benes	No. of Bene Mos	No. of Benes	No. of Bene Mos	No. of Benes	No. of Bene Mos	No. of Benes	No. of Bene Mos
All	885,767	9,621,876	780,380	8,367,079	105,387	1,254,797		
FFS all year	760,963	8,248,995	760,963	8,248,995	0	0		
FFS part year, with Rx claims	12,555	143,150	12,555	85,754	0	57,396		
FFS part year, with no Rx claims	6,862	71,232	6,862	32,330	0	38,902		
MC all year, with Rx claims	3,093	35,948	0	0	3,093	35,948		
MC all year, with no Rx claims	102,294	1,122,551	0	0	102,294	1,122,551		

Source: Data for this table are from the MAX 1999 file for California, 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.

SUPPLEMENTAL TABLE 1
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES^{a, b}
 CALIFORNIA, 1999

Total Number of Dual Eligible Beneficiaries 780,380
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries \$1,062,516,355
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary \$1,362

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	154,603	19.8 %	\$0	0.0 %
1-500	205,844	26.4	41,147,514	3.9
501-1,000	114,247	14.6	84,120,310	7.9
1,001-1,500	83,197	10.7	102,976,244	9.7
1,501-2,000	59,874	7.7	104,013,773	9.8
2,001-2,500	42,491	5.4	95,080,515	8.9
2,501-3,000	30,062	3.9	82,257,398	7.7
3,001-3,500	20,956	2.7	67,818,419	6.4
3,501-4,000	14,964	1.9	55,921,072	5.3
4,001-4,500	10,656	1.4	45,171,650	4.3
4,501-5,000	7,911	1.0	37,493,685	3.5
5,001-5,500	5,943	0.8	31,129,406	2.9
5,501-6,000	4,533	0.6	26,028,177	2.4
6,001-6,500	3,670	0.5	22,904,696	2.2
6,501-7,000	2,958	0.4	19,945,524	1.9
7,001-7,500	2,424	0.3	17,543,978	1.7
7,501-8,000	1,981	0.3	15,336,656	1.4
8,001-8,500	1,662	0.2	13,702,725	1.3
8,501-9,000	1,359	0.2	11,882,127	1.1
9,001-9,500	1,202	0.2	11,114,279	1.0
9,501-10,000	1,042	0.1	10,152,902	1.0
10,001+	8,801	1.1	166,775,305	15.7

Source: Data for this table are from the MAX 1999 file for California, released by CMS in 1/2004. This table was produced on 10/26/2004.

a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 1999.

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

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SUPPLEMENTAL TABLE 1D
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 85 AND OLDER^{a, b}
 CALIFORNIA, 1999

Total Number of Dual Eligible Beneficiaries, Age 85+ 99,574
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 85+ \$91,842,253
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 85+ \$922

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 85+	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	17,551	17.6 %	0	0.0 %
1-500	31,581	31.7	6,530,182	7.1
501-1,000	17,390	17.5	12,733,126	13.9
1,001-1,500	11,574	11.6	14,276,909	15.5
1,501-2,000	7,587	7.6	13,156,319	14.3
2,001-2,500	4,902	4.9	10,949,051	11.9
2,501-3,000	3,154	3.2	8,616,118	9.4
3,001-3,500	2,000	2.0	6,459,330	7.0
3,501-4,000	1,328	1.3	4,957,284	5.4
4,001-4,500	796	0.8	3,370,063	3.7
4,501-5,000	537	0.5	2,536,786	2.8
5,001-5,500	330	0.3	1,727,027	1.9
5,501-6,000	240	0.2	1,379,555	1.5
6,001-6,500	167	0.2	1,040,547	1.1
6,501-7,000	99	0.1	665,767	0.7
7,001-7,500	72	0.1	523,083	0.6
7,501-8,000	48	0.0	370,133	0.4
8,001-8,500	46	0.0	379,028	0.4
8,501-9,000	29	0.0	253,365	0.3
9,001-9,500	12	0.0	110,594	0.1
9,501-10,000	19	0.0	185,356	0.2
10,001+	112	0.1	1,622,630	1.8

Source: Data for this table are from the MAX 1999 file for California, released by CMS in 1/2004. This table was produced on 10/26/2004.

a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 1999.

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