

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

LIST OF TABLES

OVERVIEW OF STUDY POPULATION

TABLE 1. OVERVIEW OF BENEFICIARY SELECTION CRITERIA FOR STUDY POPULATION

FOR ALL MEDICAID BENEFICIARIES

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

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

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

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

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

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

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

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

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

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

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

FOR DUAL ELIGIBLE BENEFICIARIES

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

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

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

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

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

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

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

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

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

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

TABLE 11
 CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a, b}
 DUAL ELIGIBLE BENEFICIARIES, COLORADO, 1999

Beneficiary Characteristics	No. of Beneficiaries							No. of Bene Mos						
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown		
All	10,062	6,717	3,226	102	2	15	27,359	17,262	9,803	227	4	63		
Age														
5 and younger	3	0	3	0	0	0		0	9	0	0	0		
6-14	6	0	4	0	2	0	19	0	15	0	4	0		
15-20	22	0	22	0	0	0	65	0	65	0	0	0		
21-44	1,614	0	1,525	89	0	0	4,740	0	4,540	200	0	0		
45-64	1,646	0	1,631	12	0	3	5,115	0	5,084	25	0	6		
65-74	2,151	2,098	41	1	0	11	5,940	5,793	90	2	0	55		
75-84	2,457	2,457	0	0	0	0	6,372	6,372	0	0	0	0		
85 and older	2,163	2,162	0	0	0	1	5,099	5,097	0	0	0	2		
Unknown	0	0	0	0	0	0		0	0	0	0	0		
Gender														
Female	6,231	4,569	1,574	76	0	12	16,660	11,679	4,757	176	0	48		
Male	3,831	2,148	1,652	26	2	3	10,699	5,583	5,046	51	4	15		
Unknown	0	0	0	0	0	0		0	0	0	0	0		
Race														
White	7,005	4,991	1,937	66	1	10	18,892	12,670	6,026	146	3	47		
African American	358	209	140	9	0	0	1,027	580	427	20	0	0		
Other/unknown	2,699	1,517	1,149	27	1	5	7,440	4,012	3,350	61	1	16		
Use of Nursing Facilities														
All year	1,826	1,722	104	0	0	0	4,016	3,777	239	0	0	0		
Part year	1,545	1,372	171	0	0	2	4,373	3,768	600	0	0	5		
None	6,691	3,623	2,951	102	2	13	18,970	9,717	8,964	227	4	58		
Maintenance Assistance Status														
Cash	4,994	2,874	2,051	62	0	7	13,066	7,373	5,545	127	0	21		
Medically needy	0	0	0	0	0	0		0	0	0	0	0		
Poverty-related	495	217	243	34	1	0	2,816	1,277	1,447	89	3	0		
Other/unknown	4,573	3,626	932	6	1	8	11,477	8,612	2,811	11	1	42		
Dual Medicare Status^c														
Full dual, all year	8,900	6,089	2,698	100	2	11	20,376	13,554	6,568	211	4	39		
Full dual, part year	1,162	628	528	2	0	4	6,983	3,708	3,235	16	0	24		
Managed Care Status														
FFS all year	1,851	1,352	479	15	0	5	5,385	3,455	1,863	29	0	38		
FFS part year, with Rx claims	6,154	4,069	2,008	66	2	9	16,051	10,315	5,564	144	4	24		
FFS part year, no Rx claims	2,057	1,296	739	21	0	1	5,923	3,492	2,376	54	0	1		

Source: Data for this table are from the MAX 1999 file for Colorado, released by CMS in 9/2003. 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, COLORADO, 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	63.3 %	21.3	\$857	\$40	\$8,710	9.8 %	\$12	10,062
Age								
5 and younger	100.0	12.7	318	25	4,104	7.8	45	3
6-14	100.0	38.7	3,990	103	20,020	19.9	10	6
15-20	54.5	11.0	812	74	4,117	19.7	0	22
21-44	60.8	15.1	961	64	5,876	16.3	10	1,614
45-64	67.9	24.3	1,207	50	7,422	16.3	20	1,646
65-74	59.9	20.0	734	37	6,364	11.5	13	2,151
75-84	63.1	23.3	794	34	9,787	8.1	12	2,457
85 and older	65.1	22.6	702	31	12,933	5.4	5	2,163
Unknown	0.0	0.0	0	0	0	0.0	0	0
Basis of Eligibility								
Aged	62.7	22.0	745	34	9,720	7.7	10	6,717
Disabled	64.3	20.0	1,093	55	6,806	16.1	15	3,226
Adults	68.6	11.4	619	54	2,835	21.8	4	102
Children	100.0	49.0	5,196	106	9,170	56.7	0	2
Unknown	73.3	26.5	1,239	47	5,574	22.2	9	15
Gender								
Female	66.3	23.5	891	38	8,776	10.2	13	6,231
Male	58.4	17.6	802	46	8,601	9.3	10	3,831
Unknown	0.0	0.0	0	0	0	0.0	0	0
Race								
White	64.2	23.2	907	39	9,649	9.4	10	7,005
African American	59.8	15.3	647	42	7,607	8.5	15	358
Other/unknown	61.4	17.0	757	44	6,416	11.8	15	2,699
Use of Nursing Facilities								
Entire year	68.1	29.4	1,023	35	19,287	5.3	11	1,826
Part year	77.5	32.9	1,112	34	15,857	7.0	12	1,545
None	58.7	16.3	753	46	4,172	18.1	12	6,691
Maintenance Assistance Status								
Cash	62.3	19.1	821	43	6,390	12.9	11	4,994
Medically needy	0.0	0.0	0	0	0	0.0	0	0
Poverty related	58.2	13.8	576	42	2,478	23.3	12	495
Other/unknown	65.0	24.4	927	38	11,917	7.8	13	4,573

Source: Data for this table are from the MAX 1999 file for Colorado, released by CMS in 9/2003. 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, COLORADO, 1999

Beneficiary Characteristics	Mean No. of Rx	Mean Rx \$	Rx \$ as % of All Services	No. of Rx, % with:						Mean \$, All Services	Bene Mos	No.
				None	More than 0, but 1 or Less	More than 1, but 2 or Less	More than 2, but 5 or Less	Less than 5, but 10 or More	More than 10			
All	7.8	\$315	9.8 %	36.7 %	7.5 %	4.4 %	9.9 %	11.2 %	30.4 %	\$3,203	10,062	27,359
Age												
5 and younger	4.2	106	7.8	0.0	33.3	0.0	0.0	33.3	33.3	1,368	3	9
6-14	12.2	1,260	19.9	0.0	0.0	0.0	16.7	16.7	66.7	6,322	6	19
15-20	3.7	275	19.7	45.5	9.1	0.0	13.6	13.6	18.2	1,393	22	65
21-44	5.1	327	16.3	39.2	11.7	6.1	11.7	10.2	21.1	2,001	1,614	4,740
45-64	7.8	388	16.3	32.1	8.8	4.7	11.5	11.4	31.5	2,388	1,646	5,115
65-74	7.2	266	11.5	40.1	8.4	4.4	9.1	10.9	27.2	2,305	2,151	5,940
75-84	9.0	306	8.1	36.9	6.0	3.7	8.4	11.2	33.8	3,774	2,457	6,372
85 and older	9.6	298	5.4	34.9	4.1	3.7	9.6	11.8	35.9	5,486	2,163	5,099
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	8.6	290	7.7	37.3	6.1	3.9	9.0	11.3	32.4	3,782	6,717	17,262
Disabled	6.6	360	16.1	35.7	10.0	5.4	11.3	10.8	26.8	2,240	3,226	9,803
Adults	5.1	278	21.8	31.4	15.7	5.9	19.6	11.8	15.7	1,274	102	227
Children	24.5	2,598	56.7	0.0	0.0	0.0	0.0	0.0	100.0	4,585	2	4
Unknown	6.3	295	22.2	26.7	6.7	13.3	13.3	20.0	20.0	1,327	15	63
Gender												
Female	8.8	333	10.2	33.7	6.9	4.3	10.1	11.4	33.6	3,282	6,231	16,660
Male	6.3	287	9.3	41.6	8.4	4.5	9.5	10.7	25.2	3,080	3,831	10,699
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	8.6	336	9.4	35.8	6.6	4.1	9.2	11.3	33.0	3,578	7,005	18,892
African American	5.3	226	8.5	40.2	10.1	4.7	9.8	14.0	21.2	2,652	358	1,027
Other/unknown	6.2	275	11.8	38.6	9.3	5.2	11.6	10.4	24.9	2,328	2,699	7,440
Use of Nursing Facilities												
Entire year	13.4	465	5.3	31.9	2.2	2.6	7.6	12.4	43.4	8,770	1,826	4,016
Part year	11.6	393	7.0	22.5	5.6	4.1	9.4	13.7	44.9	5,602	1,545	4,373
None	5.8	266	18.1	41.3	9.4	5.0	10.6	10.3	23.5	1,472	6,691	18,970
Maintenance Assistance Status												
Cash	7.3	314	12.9	37.7	8.6	4.8	11.0	10.4	27.5	2,443	4,994	13,066
Medically needy	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Poverty related	2.4	101	23.3	41.8	19.6	5.1	11.9	10.3	11.3	436	495	2,816
Other/unknown	9.7	369	7.8	35.0	4.9	3.9	8.5	12.1	35.6	4,748	4,573	11,477

Source: Data for this table are from the MAX 1999 file for Colorado, released by CMS in 9/2003. 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, COLORADO, 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	7.8	\$315	\$40	2.6	\$194	\$74	1.4	\$54	\$39	3.5	\$56	\$16
Age												
5 and younger	4.2	106	25	1.2	81	66	0.9	8	9	1.8	16	9
6-14	12.2	1,260	103	3.9	795	201	3.1	366	120	5.2	100	19
15-20	3.7	275	74	1.0	192	192	0.7	58	79	2.0	24	12
21-44	5.1	327	64	1.8	223	123	0.7	52	79	2.5	43	17
45-64	7.8	388	50	2.8	256	90	1.0	57	55	3.7	63	17
65-74	7.2	266	37	2.5	158	63	1.2	46	39	3.3	52	16
75-84	9.0	306	34	3.0	177	59	1.8	59	33	3.9	59	15
85 and older	9.6	298	31	2.8	166	59	2.1	56	26	4.3	65	15
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility												
Aged	8.6	290	34	2.8	167	61	1.7	54	32	3.8	58	15
Disabled	6.6	360	55	2.4	241	102	0.9	54	63	3.1	53	17
Adults	5.1	278	54	1.6	164	100	0.6	55	92	2.7	47	18
Children	24.5	2,598	106	6.3	964	154	10.0	1,418	142	8.3	216	26
Unknown	6.3	295	47	2.6	194	74	1.0	32	34	2.3	50	21
Gender												
Female	8.8	333	38	2.9	202	69	1.6	58	37	4.0	62	16
Male	6.3	287	46	2.1	182	86	1.1	49	43	2.8	48	17
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Race												
White	8.6	336	39	2.8	204	72	1.6	61	38	3.9	60	16
African American	5.3	226	42	1.8	149	82	1.0	35	36	2.3	34	15
Other/unknown	6.2	275	44	2.2	174	81	0.9	40	44	2.9	49	17
Use of Nursing Facilities												
Entire year	13.4	465	35	4.3	276	65	2.7	82	30	6.0	93	16
Part year	11.6	393	34	3.6	232	64	2.4	75	31	5.1	73	14
None	5.8	266	46	2.0	168	83	0.9	44	51	2.7	45	17
Maintenance Assistance Status												
Cash	7.3	314	43	2.5	200	79	1.1	49	44	3.4	53	16
Medically needy	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Poverty related	2.4	101	42	0.8	59	77	0.4	20	52	1.1	17	15
Other/unknown	9.7	369	38	3.1	219	70	1.9	69	36	4.3	70	16

Source: Data for this table are from the MAX 1999 file for Colorado, released by CMS in 9/2003. 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 Colorado, 4.5 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, COLORADO, 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	Total	No. of Dual Benes	As % of Benes	No. of Bene Mos				
														Generic	Generic	Generic	Generic
Anti-infective Agents	1.3	0.7	0.0	0.6	\$83	\$73	\$2	\$8	\$66	\$110	\$55	\$14	10,254	\$672,950	3,227	32.1 %	8,140
Biologics	0.5	0.1	0.0	0.4	8	4	0	4	17	41	0	10	9	152	7	0.1	20
Antineoplastic Agents	1.8	0.7	0.4	0.7	261	188	42	32	144	278	104	43	1,020	146,595	215	2.1	561
Endocrine/Metabolic Drugs	3.2	1.3	0.6	1.3	71	48	7	16	23	38	13	12	23,270	524,361	2,846	28.3	7,361
Cardiovascular Agents	4.5	1.3	1.0	2.1	115	57	31	26	26	43	30	12	45,344	1,163,232	3,870	38.5	10,137
Respiratory Agents	2.7	1.3	0.1	1.3	96	62	1	32	36	48	25	24	13,643	486,050	1,947	19.4	5,086
Gastrointestinal Agents	2.3	0.9	0.4	1.0	149	96	31	23	65	108	70	24	14,023	910,051	2,373	23.6	6,098
Genitourinary Agents	1.6	0.9	0.0	0.7	56	44	1	12	35	51	27	16	3,447	120,165	886	8.8	2,151
CNS Drugs	3.6	1.6	0.4	1.5	212	148	41	23	60	92	91	16	33,050	1,974,788	3,555	35.3	9,308
Stimulants/Anti-obesity/Anorexia	1.8	0.2	0.3	1.4	48	7	9	31	26	43	33	23	291	7,701	63	0.6	162
Miscellaneous Psychological/Neurological Agents	2.1	1.8	0.0	0.3	229	224	0	5	111	127	5	18	1,179	130,938	233	2.3	571
Analgesics and Anesthetics	2.6	0.6	0.3	1.7	96	58	18	20	37	91	68	12	21,364	787,855	3,134	31.1	8,238
Neuromuscular Agents	3.0	1.0	0.5	1.6	133	81	22	30	45	85	47	19	13,933	622,155	1,757	17.5	4,666
Nutritional Products	2.2	0.1	0.9	1.2	50	1	20	29	23	14	22	24	7,801	180,485	1,467	14.6	3,625
Hematological Agents	3.6	0.3	2.4	1.0	108	56	35	18	30	191	15	19	9,952	296,462	1,092	10.9	2,746
Topical Products	1.4	0.5	0.2	0.7	42	25	8	9	30	49	33	14	6,691	198,164	1,927	19.2	4,773
Miscellaneous Products	2.0	0.4	0.5	1.1	263	125	110	29	131	303	215	26	780	101,858	155	1.5	387
Unknown Therapeutic Category	1.6	0.0	0.0	0.0	63	0	0	0	38	0	0	0	7,863	301,841	1,941	19.3	4,814
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.	213,914	8,625,803	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 1999 file for Colorado, released by CMS in 9/2003. 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 Colorado, 4.5 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 15

Dual Eligible Beneficiaries

TABLE 16

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP^{a, b, c}
DUAL ELIGIBLE BENEFICIARIES, COLORADO, 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	\$ per Rx	Rx \$ per Bene Mo
ANTIDEPRESSANTS	\$108,337	416	4.1 %	1,324	1.5	\$55	\$82
ANTIPSYCHOTICS	100,180	216	2.1	648	1.5	107	155
ULCER DRUGS	88,719	270	2.7	873	1.4	75	102
ANTICONVULSANT	54,204	186	1.8	579	1.8	52	94
ANALGESICS - Narcotic	53,941	480	4.8	1,521	1.2	30	35
ANTIASTHMATIC	48,600	322	3.2	1,067	1.3	36	46
ANTIHYPERTENSIVE	47,822	341	3.4	1,148	1.3	32	42
ANTIDIABETIC	42,999	270	2.7	833	1.6	33	52
CALCIUM BLOCKERS	29,023	115	1.1	397	1.7	43	73
ANALGESICS - ANTI-INFLAMMATORY	28,921	230	2.3	801	0.8	45	36

Source: Data for this table are from the MAX 1999 file for Colorado, released by CMS in 9/2003. 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, COLORADO, 1999

Beneficiary Characteristics	All Top 10 Drug Groups				ANTIDEPRESSANTS				ANTIPSYCHOTICS			
	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	12,406	\$602,746	416	4.1 %	1,324	1.5	\$82	216	2.1 %	648	1.5	\$155
Female												
Disabled												
5 and younger	7,821	369,143	271	4.3	828	1.6	88	107	1.7	304	1.5	165
6-14	2,293	129,578	89	5.7	272	1.6	105	42	2.7	127	1.6	208
15-20	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
45-64	679	39,390	39	6.0	99	1.6	110	21	3.2	69	1.0	135
65-74	1,567	87,291	50	5.6	173	1.5	102	21	2.4	58	2.2	294
75-84	47	2,897	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles												
5 and younger	5,528	239,565	182	3.9	556	1.6	80	65	1.4	177	1.5	134
6-14	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
21-44	47	1,995	4	5.7	8	0.9	34	1	1.4	2	0.5	114
45-64	13	775	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	1,779	81,285	54	4.1	174	1.5	80	12	0.9	42	1.7	183
75-84	2,057	87,752	68	4.2	219	1.5	73	32	2.0	86	1.4	108
85 and older	1,632	67,758	56	3.4	155	1.8	91	20	1.2	47	1.6	139
Male												
Disabled												
5 and younger	4,585	233,603	145	3.8	496	1.4	71	109	2.8	344	1.4	145
6-14	2,009	127,298	67	4.1	223	1.3	80	59	3.6	194	1.5	196
15-20	7	297	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	8	242	0	0.0	0	0.0	0	0	0.0	0	0.0	0
45-64	13	1,136	0	0.0	0	0.0	0	2	12.5	6	0.8	75
65-74	767	54,811	32	3.7	97	1.4	88	30	3.4	102	1.3	188
75-84	1,200	70,151	35	4.7	126	1.2	74	26	3.5	85	1.8	215
85 and older	14	661	0	0.0	0	0.0	0	1	5.3	1	3.0	56
Other Eligibles												
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	4	205	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	21	869	2	10.5	2	1.0	35	2	10.5	2	1.0	62
45-64	43	3,209	1	16.7	2	3.0	393	1	16.7	2	1.0	4
65-74	924	42,349	25	3.1	114	1.1	53	12	1.5	29	1.9	194
75-84	1,010	37,738	34	4.1	106	1.5	63	22	2.6	69	1.1	52
85 and older	574	21,935	16	3.1	49	1.8	74	13	2.6	48	0.9	55
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 Colorado, released by CMS in 9/2003. 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, COLORADO, 1999

Beneficiary Characteristics	ULCER DRUGS				ANTICONVULSANT				ANALGESICS - Narcotic						
	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean Rx No. of	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean Rx No. of	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean Rx No. of	Mean Rx \$
All	270	2.7 %	873	1.4	\$102	186	1.8 %	579	1.8	\$94	480	4.8 %	1,521	1.2	\$36
Female	195	3.1	594	1.4	100	99	1.6	272	1.9	84	317	5.1	964	1.3	35
Disabled	48	3.0	154	1.2	103	53	3.4	145	1.8	93	120	7.6	362	1.2	34
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	13	2.0	35	1.3	118	21	3.2	50	2.3	111	44	6.8	127	1.1	24
45-64	33	3.7	116	1.1	92	32	3.6	95	1.5	83	75	8.4	232	1.3	41
65-74	2	9.1	3	4.3	328	0	0.0	0	0.0	0	1	4.5	3	0.3	2
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	147	3.2	440	1.4	99	46	1.0	127	2.0	75	197	4.2	602	1.3	35
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	2	2.9	3	0.7	11	3	4.3	10	0.5	92	6	8.6	15	0.9	7
45-64	1	11.1	1	3.0	194	1	11.1	2	1.0	23	1	11.1	2	0.5	3
65-74	53	4.1	164	1.1	85	12	0.9	37	2.5	112	61	4.7	205	1.3	42
75-84	52	3.2	159	1.4	95	17	1.0	46	2.2	63	75	4.6	207	1.4	31
85 and older	39	2.4	113	1.9	126	13	0.8	32	1.7	46	54	3.3	173	1.2	33
Male	75	2.0	279	1.3	106	87	2.3	307	1.7	102	163	4.3	557	1.1	37
Disabled	31	1.9	107	1.4	127	57	3.5	207	1.9	122	84	5.1	284	1.0	41
5 and younger	1	50.0	4	0.3	23	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	1	6.3	3	1.0	146	1	6.3	3	0.3	8	0	0.0	0	0.0	0
21-44	13	1.5	43	1.3	123	28	3.2	105	1.6	110	39	4.5	99	1.3	56
45-64	14	1.9	51	1.7	149	28	3.8	99	2.2	138	45	6.1	185	0.8	31
65-74	2	10.5	6	0.3	27	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	44	2.0	172	1.3	92	30	1.4	100	1.3	60	79	3.6	273	1.2	33
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	0	0.0	0	0.0	0	1	5.3	1	1.0	280	1	5.3	2	4.5	40
45-64	1	16.7	3	2.3	236	1	16.7	2	1.0	4	1	16.7	2	4.0	260
65-74	19	2.4	80	0.9	68	13	1.6	59	1.0	57	36	4.5	156	1.0	31
75-84	18	2.2	66	1.2	89	11	1.3	26	2.2	73	31	3.7	90	1.2	32
85 and older	6	1.2	23	2.8	163	4	0.8	12	1.2	41	10	2.0	23	1.8	32
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 Colorado, released by CMS in 9/2003. 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, COLORADO, 1999

Beneficiary Characteristics	ANTI-ASTHMATIC					ANTI-HYPERTENSIVE					ANTI-DIABETIC				
	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	322	3.2 %	1,067	1.3	\$46	341	3.4 %	1,148	1.3	\$42	270	2.7 %	833	1.6	\$52
Female	178	2.9	606	1.3	48	215	3.5	763	1.2	40	176	2.8	511	1.7	57
Disabled	51	3.2	201	1.0	39	45	2.9	170	1.0	35	41	2.6	142	1.5	60
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	6	0.9	15	1.5	45	10	1.5	28	0.9	30	7	1.1	24	1.8	66
45-64	44	4.9	183	0.9	36	35	3.9	142	1.0	35	34	3.8	118	1.4	59
65-74	1	4.5	3	7.0	190	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	127	2.7	405	1.5	52	170	3.7	593	1.3	41	135	2.9	369	1.7	55
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	0	0.0	0	0.0	0	3	4.3	7	0.9	19	3	4.3	7	0.9	27
45-64	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	57	4.4	193	1.2	45	61	4.7	239	1.0	36	48	3.7	132	1.7	58
75-84	36	2.2	125	1.7	68	54	3.3	209	1.3	43	60	3.7	163	1.5	49
85 and older	34	2.1	87	1.6	47	52	3.1	138	1.8	49	24	1.5	67	2.6	69
Male	144	3.8	461	1.2	42	126	3.3	385	1.4	45	94	2.5	322	1.4	44
Disabled	40	2.4	147	0.9	31	36	2.2	104	1.3	49	43	2.6	144	1.3	39
5 and younger	0	0.0	0	0.0	0	2	100.0	8	0.4	3	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	3	150.0	12	0.5	8	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	15	1.7	56	0.6	20	7	0.8	28	1.2	36	5	0.6	14	1.7	54
45-64	22	3.0	86	1.2	37	24	3.3	56	1.6	68	38	5.1	130	1.2	38
65-74	3	15.8	5	0.8	31	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	104	4.8	314	1.3	48	90	4.1	281	1.5	44	51	2.3	178	1.5	47
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	1	50.0	3	0.3	30	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	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
45-64	3	50.0	6	2.3	169	1	16.7	2	1.0	22	0	0.0	0	0.0	0
65-74	45	5.6	129	1.0	36	32	4.0	117	1.3	39	21	2.6	88	1.1	41
75-84	36	4.3	119	1.2	42	38	4.6	111	1.5	39	18	2.2	49	2.6	79
85 and older	20	3.9	60	2.1	74	18	3.5	48	2.1	70	12	2.4	41	1.1	19
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 1999 file for Colorado, released by CMS in 9/2003. 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, COLORADO, 1999

Beneficiary Characteristics	CALCIUM BLOCKERS				ANALGESICS - ANTI-INFLAMMATORY				Mean Rx \$	No. of Benes	No. of Benes Rx	Mean Rx \$	No. of Benes Rx	No. of Benes 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	115	1.1 %	397	1.7	\$73	230	2.3 %	801	0.8	\$36	10,062	27,359		
Female	74	1.2	267	1.8	76	154	2.5	547	0.8	39	6,231	16,660		
Disabled	15	1.0	47	1.8	77	52	3.3	167	0.7	41	1,574	4,757		
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	1		
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	9		
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	6	19		
21-44	3	0.5	5	2.8	166	25	3.8	78	0.6	32	650	1,951		
45-64	12	1.3	42	1.7	66	27	3.0	89	0.8	36	893	2,729		
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	22	48		
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0		
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0		
Other Eligibles	59	1.3	220	1.9	76	102	2.2	380	0.8	38	4,657	11,903		
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	0	0		
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0		
21-44	0	0.0	0	0.0	0	1	1.4	1	2.0	12	70	167		
45-64	0	0.0	0	0.0	0	1	11.1	1	2.0	47	9	15		
65-74	26	2.0	117	0.9	37	34	2.6	130	0.7	30	1,302	3,623		
75-84	19	1.2	58	2.6	118	37	2.3	140	0.9	42	1,622	4,248		
85 and older	14	0.8	45	3.2	121	29	1.8	108	0.9	43	1,654	3,850		
Male	41	1.1	130	1.4	67	76	2.0	254	0.8	30	3,831	10,699		
Disabled	15	0.9	52	1.2	61	30	1.8	103	0.7	27	1,652	5,046		
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	8		
6-14	1	50.0	4	0.5	38	0	0.0	0	0.0	0	2	6		
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	16	46		
21-44	4	0.5	14	1.0	42	13	1.5	38	0.9	36	875	2,589		
45-64	10	1.4	34	1.1	61	17	2.3	65	0.6	21	738	2,355		
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	19	42		
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0		
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0		
Other Eligibles	26	1.2	78	1.6	72	46	2.1	151	0.8	32	2,179	5,653		
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	2	4		
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0		
21-44	0	0.0	0	0.0	0	0	0.0	0	0.0	0	19	33		
45-64	0	0.0	0	0.0	0	2	33.3	5	0.4	25	6	16		
65-74	9	1.1	28	1.5	87	11	1.4	53	0.8	36	808	2,227		
75-84	11	1.3	37	1.6	67	22	2.6	67	0.7	18	835	2,124		
85 and older	6	1.2	13	1.5	47	11	2.2	26	1.3	60	509	1,249		
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 Colorado, released by CMS in 9/2003. 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, COLORADO, 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	\$465	13.4	1,826	4,016
Age				
0-64	1,048	21.5	100	232
65-74	508	14.4	242	573
75-84	415	12.7	624	1,404
85 and older	415	12.5	860	1,807
Unknown	0	0.0	0	0
Gender				
Female	466	13.8	1,196	2,560
Male	463	12.7	630	1,456
Unknown	0	0.0	0	0
Race				
White	452	13.7	1,511	3,279
African American	466	12.5	36	86
Other/unknown	530	11.9	279	651
Basis of Eligibility				
Aged	429	12.9	1,722	3,777
Disabled	1,026	21.0	104	239
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 Colorado, released by CMS in 9/2003. 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 1,545 beneficiaries who were in nursing facilities for part of their enrollment and their 4,373 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, COLORADO, 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											
	Brand-Name	Brand-Name	Generic	Brand-Name	Brand-Name	Generic											
Anti-infective Agents	1.4	0.7	0.0	0.6	\$76	\$68	\$1	\$7	\$55	\$92	\$26	\$11	2,395	\$132,743	772	42.3 %	1,749
Biologics	0.3	0.0	0.0	0.3	4	0	0	4	13	0	0	13	1	13	1	0.1	3
Antineoplastic Agents	1.9	0.5	0.4	0.9	243	158	46	40	131	300	119	42	216	28,234	52	2.8	116
Endocrine/Metabolic Drugs	4.2	1.6	0.8	1.8	88	60	9	20	21	37	12	11	5,173	108,368	562	30.8	1,229
Cardiovascular Agents	6.1	1.5	1.5	3.1	129	58	37	34	21	38	25	11	11,368	242,118	839	45.9	1,873
Respiratory Agents	3.5	1.3	0.1	2.2	113	56	2	56	32	44	18	26	2,985	95,546	371	20.3	843
Gastrointestinal Agents	3.1	1.0	0.6	1.5	157	86	39	31	50	87	62	21	3,792	190,172	528	28.9	1,211
Genitourinary Agents	2.1	1.0	0.0	1.0	74	57	1	16	36	55	26	16	1,019	36,592	223	12.2	494
CNS Drugs	4.5	2.4	0.5	1.6	254	192	41	20	56	81	80	12	8,481	475,770	823	45.1	1,875
Stimulants/Anti-obesity/Anorexia	2.3	0.0	0.0	2.3	24	0	0	24	11	0	0	11	72	759	14	0.8	32
Miscellaneous Psychological/Neurological Agents	2.3	2.2	0.0	0.1	255	254	0	1	113	116	0	10	389	43,824	76	4.2	172
Analgesics and Anesthetics	3.4	1.0	0.3	2.1	95	63	13	19	28	64	38	9	4,436	124,470	576	31.5	1,310
Neuromuscular Agents	4.2	1.4	0.9	1.9	157	80	41	36	38	59	46	19	3,582	135,482	366	20.0	862
Nutritional Products	2.6	0.1	0.9	1.6	82	1	20	61	32	14	21	39	2,462	78,722	430	23.5	962
Hematological Agents	5.7	0.3	4.3	1.1	106	40	49	17	19	121	11	16	3,608	67,390	285	15.6	638
Topical Products	1.7	0.5	0.3	0.8	44	23	10	10	26	45	31	13	1,820	47,827	490	26.8	1,096
Miscellaneous Products	1.3	0.1	0.0	1.2	22	4	0	17	17	72	0	14	134	2,224	45	2.5	103
Unknown Therapeutic Category	2.2	0.0	0.0	0.0	67	0	0	0	31	0	0	0	1,836	56,741	391	21.4	849
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.	53,769	1,866,995	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 1999 file for Colorado, released by CMS in 9/2003. 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 1,545 beneficiaries who were in nursing facilities for part of their enrollment and their 4,373 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 Colorado, 4.5 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, COLORADO, 1999

Beneficiary Characteristics	No. of Benes					No. of Bene Mos					
	All	Aged	Disabled	Adults	Children	All	Aged	Disabled	Adults	Children	Unknown
All	56,434	36,459	19,732	197	5	593,480	375,068	216,490	1,457	43	422
Age											
5 and younger	5	0	5	0	0	52	0	52	0	0	0
6-14	18	0	16	0	2	187	0	172	0	15	0
15-20	88	0	86	0	2	962	0	938	0	24	0
21-44	9,530	0	9,362	163	1	104,164	0	102,931	1,181	4	48
45-64	9,650	0	9,614	33	0	105,794	0	105,486	273	0	35
65-74	13,667	13,019	614	1	0	146,196	139,332	6,524	3	0	337
75-84	12,635	12,610	25	0	0	130,623	130,340	283	0	0	0
85 and older	10,841	10,830	10	0	0	105,502	105,396	104	0	0	2
Unknown	0	0	0	0	0	0	0	0	0	0	0
Gender											
Female	37,161	26,856	10,135	139	3	393,032	279,663	111,999	1,053	28	289
Male	19,273	9,603	9,597	58	2	200,448	95,405	104,491	404	15	133
Unknown	0	0	0	0	0	0	0	0	0	0	0
Race											
White	36,715	23,993	12,582	113	3	380,984	241,348	138,542	820	25	249
African American	2,333	1,456	857	19	0	25,136	15,634	9,360	135	0	7
Other/unknown	17,386	11,010	6,293	65	2	187,360	118,086	68,588	502	18	166
Use of Nursing Facilities											
All year	9,625	8,927	696	0	0	95,566	87,864	7,686	0	0	16
Part year	4,780	4,232	544	0	0	45,093	39,480	5,566	0	0	47
None	42,029	23,300	18,492	197	5	452,821	247,724	203,238	1,457	43	359
Maintenance Assistance Status											
Cash	39,175	23,983	15,032	134	0	424,710	257,953	165,437	1,050	0	270
Medically needy	0	0	0	0	0	0	0	0	0	0	0
Poverty related	527	220	255	51	1	5,359	2,405	2,630	315	9	0
Other/unknown	16,732	12,256	4,445	12	4	163,411	114,710	48,423	92	34	152
Dual Status^c											
Full dual, all year	55,258	35,823	19,198	195	5	581,003	368,308	210,832	1,434	43	386
Full dual, part year	1,176	636	534	2	0	12,477	6,760	5,658	23	0	36
Managed Care Status											
FFS all year	1,851	1,352	479	15	0	5,385	3,455	1,863	29	0	38
FFS part year, with Rx claims	6,154	4,069	2,008	66	2	55,038	35,229	19,220	491	15	83
FFS part year, no Rx claims	2,057	1,296	739	21	0	16,204	9,657	6,414	131	0	2
MC all year, with Rx claims	35,723	23,556	12,100	47	2	401,290	260,081	140,564	413	24	208
MC all year, no Rx claims	10,649	6,186	4,406	48	1	115,563	66,646	48,429	393	4	91

Source: Data for this table are from the MAX 1999 file for Colorado, released by CMS in 9/2003. 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, COLORADO, 1999

Beneficiary Characteristics	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 Bene Mos	No. of Benes	No. of Bene Mos	No. of Benes	No. of Bene Mos
All	56,434	593,480	10,062	27,359	46,372	566,121
FFS all year	1,851	5,385	1,851	5,385	0	0
FFS part year, with Rx claims	6,154	55,038	6,154	16,051	0	38,987
FFS part year, with no Rx claims	2,057	16,204	2,057	5,923	0	10,281
MC all year, with Rx claims	35,723	401,290	0	0	35,723	401,290
MC all year, with no Rx claims	10,649	115,563	0	0	10,649	115,563

Source: Data for this table are from the MAX 1999 file for Colorado, released by CMS in 9/2003. This table was produced on 06/25/2004.

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

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

Total Number of Dual Eligible Beneficiaries 10,062
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries \$8,625,803
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary \$857

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	3,693	36.7 %	\$0	0.0 %
1-500	2,644	26.3	539,025	6.2
501-1,000	1,200	11.9	868,956	10.1
1,001-1,500	748	7.4	922,295	10.7
1,501-2,000	477	4.7	829,180	9.6
2,001-2,500	330	3.3	739,602	8.6
2,501-3,000	230	2.3	629,759	7.3
3,001-3,500	157	1.6	507,817	5.9
3,501-4,000	109	1.1	406,564	4.7
4,001-4,500	106	1.1	446,998	5.2
4,501-5,000	76	0.8	361,631	4.2
5,001-5,500	61	0.6	321,620	3.7
5,501-6,000	42	0.4	241,441	2.8
6,001-6,500	39	0.4	243,665	2.8
6,501-7,000	31	0.3	208,631	2.4
7,001-7,500	20	0.2	144,886	1.7
7,501-8,000	13	0.1	100,122	1.2
8,001-8,500	17	0.2	139,764	1.6
8,501-9,000	6	0.1	52,336	0.6
9,001-9,500	9	0.1	83,440	1.0
9,501-10,000	9	0.1	87,454	1.0
10,001+	45	0.4	750,617	8.7

Source: Data for this table are from the MAX 1999 file for Colorado, released by CMS in 9/2003. 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.

SUPPLEMENTAL TABLE 1A
 MEDICAID PHARMACY REIMBURSEMENT FOR DISABLED DUAL ELIGIBLE BENEFICIARIES UNDER AGE 65^{a, b, c}
 COLORADO, 1999

Total Number of Disabled Dual Eligible Beneficiaries, Age < 65 3,185
 Total Pharmacy Reimbursement for Disabled Dual Eligible Beneficiaries, Age < 65 \$3,499,686
 Mean Pharmacy Reimbursement per Disabled Dual Eligible Beneficiary, Age < 65 \$1,099

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age < 65	Percent of Total Pharmacy Reimbursement	
			Pharmacy Reimbursement	Reimbursement
\$0	1,140	35.8 %	0	0.0 %
1-500	868	27.3	162,468	4.6
501-1,000	319	10.0	229,250	6.6
1,001-1,500	198	6.2	245,464	7.0
1,501-2,000	136	4.3	232,506	6.6
2,001-2,500	85	2.7	191,291	5.5
2,501-3,000	75	2.4	205,073	5.9
3,001-3,500	55	1.7	177,709	5.1
3,501-4,000	39	1.2	145,255	4.2
4,001-4,500	53	1.7	222,108	6.3
4,501-5,000	32	1.0	152,106	4.3
5,001-5,500	34	1.1	178,481	5.1
5,501-6,000	22	0.7	127,117	3.6
6,001-6,500	27	0.8	168,824	4.8
6,501-7,000	18	0.6	120,445	3.4
7,001-7,500	13	0.4	93,543	2.7
7,501-8,000	11	0.3	84,929	2.4
8,001-8,500	8	0.3	65,921	1.9
8,501-9,000	5	0.2	43,363	1.2
9,001-9,500	7	0.2	64,790	1.9
9,501-10,000	8	0.3	77,903	2.2
10,001+	32	1.0	511,140	14.6

Source: Data for this table are from the MAX 1999 file for Colorado, released by CMS in 9/2003. 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.

c. This table is limited to dual eligible beneficiaries who were under age 65 and also indicated as disabled in the MAX files. Therefore, dual eligible beneficiaries under age 65 in "adults" or "children" basis-of-eligibility categories in Table 12 are excluded because they were not classified as disabled in the MAX files. Disabled dual eligible beneficiaries age 65 and over are included in Supplemental Tables 1B through 1D, depending on their age.

SUPPLEMENTAL TABLE 1B
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 TO 74^{a, b}
 COLORADO, 1999

Total Number of Dual Eligible Beneficiaries, Age 65-74 2,151
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65-74 \$1,578,178
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65-74 \$734

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 65-74	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	862	40.1 %	0	0.0
1-500	559	26.0	109,637	6.9
501-1,000	247	11.5	179,655	11.4
1,001-1,500	144	6.7	177,011	11.2
1,501-2,000	82	3.8	142,287	9.0
2,001-2,500	71	3.3	159,261	10.1
2,501-3,000	48	2.2	130,752	8.3
3,001-3,500	30	1.4	97,585	6.2
3,501-4,000	30	1.4	111,813	7.1
4,001-4,500	17	0.8	72,066	4.6
4,501-5,000	18	0.8	85,733	5.4
5,001-5,500	9	0.4	47,319	3.0
5,501-6,000	7	0.3	40,142	2.5
6,001-6,500	7	0.3	43,105	2.7
6,501-7,000	5	0.2	34,127	2.2
7,001-7,500	2	0.1	14,724	0.9
7,501-8,000	5	0.2	41,127	2.6
8,001-8,500	1	0.0	8,973	0.6
8,501-9,000	7	0.3	82,861	5.3
9,001-9,500				
9,501-10,000				
10,001+				

Source: Data for this table are from the MAX 1999 file for Colorado, released by CMS in 9/2003. 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 1C
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 75 TO 84^{a, b}
 COLORADO, 1999

Total Number of Dual Eligible Beneficiaries, Age 75-84 2,457
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 75-84 \$1,949,881
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 75-84 \$794

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 75-84	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	906	36.9 %	0	0.0 %
1-500	582	23.7	128,064	6.6
501-1,000	298	12.1	215,339	11.0
1,001-1,500	228	9.3	282,265	14.5
1,501-2,000	136	5.5	240,635	12.3
2,001-2,500	105	4.3	236,688	12.1
2,501-3,000	59	2.4	162,956	8.4
3,001-3,500	32	1.3	103,789	5.3
3,501-4,000	24	1.0	89,488	4.6
4,001-4,500	24	1.0	102,234	5.2
4,501-5,000	19	0.8	90,648	4.6
5,001-5,500	13	0.5	68,785	3.5
5,501-6,000	10	0.4	57,178	2.9
6,001-6,500	3	0.1	19,030	1.0
6,501-7,000	7	0.3	47,412	2.4
7,001-7,500	2	0.1	14,576	0.7
7,501-8,000	2	0.1	15,193	0.8
8,001-8,500	3	0.1	24,655	1.3
8,501-9,000	1	0.0	9,405	0.5
9,001-9,500	3	0.1	41,541	2.1
9,501-10,000				
10,001+				

Source: Data for this table are from the MAX 1999 file for Colorado, released by CMS in 9/2003. 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.

