

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

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TABLE 11

CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY<sup>a,b</sup>  
 DUAL ELIGIBLE BENEFICIARIES, CONNECTICUT, 1999

Beneficiary Characteristics	No. of Beneficiaries							No. of Bene Mos						
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown		
<b>All</b>	<b>75,327</b>	<b>48,332</b>	<b>26,591</b>	<b>350</b>	<b>54</b>	<b>0</b>	<b>789,467</b>	<b>495,320</b>	<b>290,860</b>	<b>2,775</b>	<b>512</b>	<b>0</b>		
<b>Age</b>														
5 and younger	1	0	0	0	1	1		0	0	0	1	0		
6-14	6	0	0	0	6	0	61	0	0	0	61	0		
15-20	60	0	50	0	10	0	544	0	478	0	66	0		
21-44	12,545	0	12,256	252	37	0	136,606	0	134,256	1,966	384	0		
45-64	14,060	1	13,978	81	0	0	153,828	7	153,163	658	0	0		
65-74	13,859	13,537	307	15	0	0	148,420	145,324	2,963	133	0	0		
75-84	16,804	16,802	0	2	0	0	173,491	173,473	0	18	0	0		
85 and older	17,992	17,992	0	0	0	0	176,516	176,516	0	0	0	0		
Unknown	0	0	0	0	0	0		0	0	0	0	0		
<b>Gender</b>														
Female	48,407	35,689	12,517	183	18	0	509,376	369,181	138,569	1,442	184	0		
Male	26,920	12,643	14,074	167	36	0	280,091	126,139	152,291	1,333	328	0		
Unknown	0	0	0	0	0	0		0	0	0	0	0		
<b>Race</b>														
White	56,725	38,214	18,334	167	10	0	591,208	386,613	203,224	1,286	85	0		
African American	9,371	4,977	4,296	91	7	0	100,517	53,847	45,854	760	56	0		
Other/unknown	9,231	5,141	3,961	92	37	0	97,742	54,860	41,782	729	371	0		
<b>Use of Nursing Facilities</b>														
All year	18,491	17,565	926	0	0	0	188,750	178,351	10,399	0	0	0		
Part year	7,337	6,654	683	0	0	0	71,988	64,744	7,244	0	0	0		
None	49,499	24,113	24,982	350	54	0	528,729	252,225	273,217	2,775	512	0		
<b>Maintenance Assistance Status</b>														
Cash	15,996	6,560	9,351	83	2	0	180,103	73,485	105,956	659	3	0		
Medically needy	21,377	10,636	10,658	79	4	0	223,108	109,656	112,838	586	28	0		
Poverty-related	1,439	515	891	20	13	0	15,524	5,639	9,666	111	108	0		
Other/unknown	36,515	30,621	5,691	168	35	0	370,732	306,540	62,400	1,419	373	0		
<b>Dual Medicare Status<sup>c</sup></b>														
Full dual, all year	71,838	46,742	24,704	338	54	0	750,743	477,804	269,789	2,638	512	0		
Full dual, part year	3,489	1,590	1,887	12	0	0	38,724	17,516	21,071	137	0	0		
<b>Managed Care Status</b>														
FFS all year	75,138	48,328	26,500	265	45	0	788,574	495,297	290,334	2,451	492	0		
FFS part year, with Rx claims	127	3	65	53	6	0	698	18	429	241	10	0		
FFS part year, no Rx claims	62	1	26	32	3	0	195	5	97	83	10	0		

Source: Data for this table are from the MAX 1999 file for Connecticut, released by CMS in 11/2003. 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<sup>a,b</sup>  
 DUAL ELIGIBLE BENEFICIARIES, CONNECTICUT, 1999

Beneficiary Characteristics	% with at Least One Rx	Mean No. of Rx	Mean Rx \$	\$ per Rx	Mean \$, All Services	Rx \$ as % of All Services	Mean OTC Drug \$ <sup>c</sup>	No. of Benef
All	87.4 %	42.0	\$2,031	\$48	\$22,715	8.9 %	\$76	75,327
<b>Age</b>								
5 and younger	100.0	7.0	501	72	4,549	11.0	7	1
6-14	100.0	43.8	6,308	144	10,833	58.2	21	6
15-20	61.7	22.7	1,390	61	10,339	13.4	78	60
21-44	86.2	41.5	2,910	70	20,938	13.9	72	12,545
45-64	88.2	47.1	2,695	57	23,630	11.4	125	14,060
65-74	86.4	39.8	1,809	46	15,293	11.8	109	13,859
75-84	87.6	42.9	1,721	40	22,455	7.7	66	16,804
85 and older	88.2	39.4	1,360	35	29,244	4.6	25	17,992
Unknown	0.0	0.0	0	0	0	0.0	0	0
<b>Basis of Eligibility</b>								
Aged	87.5	40.8	1,614	40	23,002	7.0	63	48,332
Disabled	87.4	44.6	2,786	63	22,474	12.4	100	26,591
Adults	72.3	21.3	2,331	109	4,488	51.9	65	350
Children	25.9	7.7	1,001	131	2,247	44.6	6	54
Unknown	0.0	0.0	0	0	0	0.0	0	0
<b>Gender</b>								
Female	89.2	44.1	1,946	44	22,658	8.6	75	48,407
Male	84.1	38.3	2,182	57	22,817	9.6	78	26,920
Unknown	0.0	0.0	0	0	0	0.0	0	0
<b>Race</b>								
White	87.4	44.6	2,097	47	26,290	8.0	57	56,725
African American	88.3	38.0	2,033	54	15,022	13.5	143	9,371
Other/unknown	86.5	30.4	1,623	53	8,557	19.0	128	9,231
<b>Use of Nursing Facilities</b>								
Entire year	90.7	49.9	1,856	37	40,485	4.6	18	18,491
Part year	93.1	52.5	2,091	40	28,698	7.3	46	7,337
None	85.3	37.5	2,087	56	15,189	13.7	102	49,499
<b>Maintenance Assistance Status</b>								
Cash	90.3	43.4	2,420	56	15,292	15.8	102	15,996
Medically needy	86.7	38.7	2,120	55	9,799	21.6	95	21,377
Poverty related	71.7	14.9	868	58	3,237	26.8	38	1,439
Other/unknown	87.1	44.4	1,854	42	34,295	5.4	55	36,515

Source: Data for this table are from the MAX 1999 file for Connecticut, released by CMS in 11/2003. 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<sup>a,b</sup>  
 DUAL ELIGIBLE BENEFICIARIES, CONNECTICUT, 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	4.0	\$194	8.9 %	12.6 %	18.2 %	12.3 %	30.3 %	20.8 %	5.7 %	\$2,167	75,327	789,467
<b>Age</b>												
5 and younger	7.0	501	11.0	0.0	0.0	0.0	0.0	100.0	0.0	4,549	1	1
6-14	4.3	621	58.2	0.0	33.3	0.0	33.3	33.3	0.0	1,066	6	61
15-20	2.5	153	13.4	38.3	25.0	5.0	13.3	15.0	3.3	1,140	60	544
21-44	3.8	267	13.9	13.8	25.1	12.0	26.4	16.5	6.2	1,923	12,545	136,606
45-64	4.3	246	11.4	11.8	18.1	12.0	29.8	21.4	7.1	2,160	14,060	153,828
65-74	3.7	169	11.8	13.6	20.0	13.3	29.2	19.0	4.9	1,428	13,859	148,420
75-84	4.2	167	7.7	12.4	15.3	12.1	31.4	22.6	6.3	2,175	16,804	173,491
85 and older	4.0	139	4.6	11.8	14.7	12.2	33.5	23.3	4.6	2,981	17,992	176,516
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<b>Basis of Eligibility</b>												
Aged	4.0	158	7.0	12.5	16.4	12.4	31.5	21.9	5.3	2,245	48,332	495,320
Disabled	4.1	255	12.4	12.6	21.3	12.0	28.3	19.1	6.7	2,055	26,591	290,860
Adults	2.7	294	51.9	27.7	28.3	10.0	20.9	11.4	1.7	566	350	2,775
Children	0.8	106	44.6	74.1	7.4	1.9	3.7	11.1	1.9	237	54	512
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<b>Gender</b>												
Female	4.2	185	8.6	10.8	16.8	12.6	31.6	22.1	6.1	2,153	48,407	509,376
Male	3.7	210	9.6	15.9	20.6	11.7	28.0	18.6	5.2	2,193	26,920	280,091
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<b>Race</b>												
White	4.3	201	8.0	12.6	16.0	11.5	30.5	22.8	6.6	2,522	56,725	591,208
African American	3.5	190	13.5	11.7	21.9	14.1	31.5	16.9	3.9	1,401	9,371	100,517
Other/unknown	2.9	153	19.0	13.5	28.1	15.4	28.0	12.8	2.2	808	9,231	97,742
<b>Use of Nursing Facilities</b>												
Entire year	4.9	182	4.6	9.3	10.6	9.6	32.6	29.6	8.4	3,966	18,491	188,750
Part year	5.3	213	7.3	6.9	9.3	10.1	35.0	29.3	9.4	2,925	7,337	71,988
None	3.5	195	13.7	14.7	22.4	13.6	28.8	16.3	4.2	1,422	49,499	528,729
<b>Maintenance Assistance Status</b>												
Cash	3.9	215	15.8	9.7	23.0	13.5	29.9	18.6	5.3	1,358	15,996	180,103
Medically needy	3.7	203	21.6	13.3	21.2	13.6	29.8	17.2	5.0	939	21,377	223,108
Poverty related	1.4	80	26.8	28.3	40.7	13.2	13.3	3.3	1.2	300	1,439	15,524
Other/unknown	4.4	183	5.4	12.9	13.4	11.0	31.5	24.7	6.6	3,378	36,515	370,732

Source: Data for this table are from the MAX 1999 file for Connecticut, released by CMS in 11/2003. 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<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, CONNECTICUT, 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
<b>All</b>	<b>4.0</b>	<b>\$194</b>	<b>\$48</b>	<b>1.5</b>	<b>\$120</b>	<b>\$82</b>	<b>0.6</b>	<b>\$34</b>	<b>\$54</b>	<b>1.8</b>	<b>\$33</b>	<b>\$19</b>
<b>Age</b>												
5 and younger	7.0	501	72	4.0	479	120	0.0	0	0	3.0	22	7
6-14	4.3	621	144	2.0	500	252	0.7	96	130	1.4	23	16
15-20	2.5	153	61	0.9	97	104	0.6	31	51	0.9	24	26
21-44	3.8	267	70	1.5	175	114	0.6	51	92	1.6	35	22
45-64	4.3	246	57	1.7	160	94	0.6	41	69	1.8	37	20
65-74	3.7	169	46	1.4	105	74	0.6	28	50	1.6	30	19
75-84	4.2	167	40	1.4	98	68	0.7	29	42	1.9	34	18
85 and older	4.0	139	35	1.3	79	62	0.7	23	33	1.9	32	17
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Basis of Eligibility</b>												
Aged	4.0	158	40	1.4	93	68	0.7	26	41	1.8	32	18
Disabled	4.1	255	63	1.6	166	103	0.6	46	79	1.7	35	21
Adults	2.7	294	109	1.0	131	128	0.3	59	194	1.2	97	79
Children	0.8	106	131	0.3	72	213	0.2	29	162	0.2	4	15
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Gender</b>												
Female	4.2	185	44	1.5	114	75	0.6	31	48	1.9	34	18
Male	3.7	210	57	1.4	132	97	0.6	39	66	1.6	33	21
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Race</b>												
White	4.3	201	47	1.5	122	80	0.7	36	53	1.9	37	19
African American	3.5	190	54	1.4	127	91	0.5	31	57	1.5	26	18
Other/unknown	2.9	153	53	1.2	105	86	0.4	21	59	1.2	21	18
<b>Use of Nursing Facilities</b>												
Entire year	4.9	182	37	1.6	105	68	0.8	30	36	2.3	41	18
Part year	5.3	213	40	1.8	130	70	0.9	32	37	2.4	45	18
None	3.5	195	56	1.4	124	90	0.5	35	68	1.5	29	20
<b>Maintenance Assistance Status</b>												
Cash	3.9	215	56	1.5	136	91	0.6	40	71	1.6	31	20
Medically needy	3.7	203	55	1.5	131	90	0.5	35	65	1.5	30	19
Poverty related	1.4	80	58	0.6	53	95	0.2	13	72	0.6	11	19
Other/unknown	4.4	183	42	1.5	109	73	0.7	30	42	2.0	37	19

Source: Data for this table are from the MAX 1999 file for Connecticut, released by CMS in 11/2003. 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 Connecticut, 4.7 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all combined. For information about this classification method, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).

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

TABLE 15

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, CONNECTICUT, 1999

Therapeutic Category	No. of Rx per Bene Mo among Users			\$ per Bene Mo among Users			Total No. of Rx			Total 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	Patented Brand-Name	Off-Patent Brand-Name	Generic	No. Dual Benes	As % of Benes	No. of Bene Mos
Anti-infective Agents	0.3	0.2	0.0	0.1	\$28	\$26	\$0	\$2	\$84	\$131	\$63	\$18	140,938	\$11,900,392	38,091	50.6 %	418,758
Biologics	0.1	0.1	0.0	0.0	6	2	1	3	59	27	1,433	108	1,456	85,450	1,231	1.6	14,126
Antineoplastic Agents	0.5	0.2	0.1	0.2	84	54	22	9	164	252	165	51	12,675	2,082,262	2,379	3.2	24,726
Endocrine/Metabolic Drugs	0.8	0.4	0.1	0.3	26	19	3	5	32	54	18	14	231,651	7,369,251	25,526	33.9	279,299
Cardiovascular Agents	1.5	0.5	0.4	0.7	51	25	14	11	33	54	41	16	678,389	22,606,805	41,504	55.1	447,196
Respiratory Agents	0.7	0.4	0.0	0.3	28	19	1	8	39	53	37	24	194,854	7,644,162	24,947	33.1	276,635
Gastrointestinal Agents	0.7	0.3	0.0	0.3	45	33	2	10	66	110	72	28	183,807	12,160,818	24,717	32.8	269,351
Genitourinary Agents	0.4	0.2	0.0	0.2	17	13	0	4	39	53	40	20	40,287	1,567,345	8,244	10.9	91,984
CNS Drugs	1.5	0.7	0.2	0.6	102	66	23	12	66	98	99	20	677,255	44,868,306	40,630	53.9	441,171
Stimulants/Anti-obesity/Anorexia	0.6	0.1	0.1	0.4	24	5	8	11	41	68	61	29	3,226	131,047	490	0.7	5,529
Miscellaneous Psychological/Neurological Agents	0.7	0.6	0.0	0.1	74	72	0	2	112	121	44	25	12,924	1,442,918	1,824	2.4	19,454
Analgesics and Anesthetics	0.7	0.2	0.1	0.4	29	18	5	6	44	92	70	14	217,063	9,532,110	30,209	40.1	329,178
Neuromuscular Agents	1.2	0.4	0.2	0.6	52	32	8	13	45	76	46	22	261,892	11,768,286	20,288	26.9	224,741
Nutritional Products	0.6	0.0	0.3	0.3	15	1	7	6	25	72	24	21	76,569	1,878,062	11,870	15.8	125,764
Hematological Agents	0.8	0.1	0.3	0.5	41	22	9	9	50	282	36	20	108,586	5,457,196	12,659	16.8	134,614
Topical Products	0.5	0.2	0.1	0.2	16	9	4	3	32	46	38	15	184,290	5,887,240	32,610	43.3	363,758
Miscellaneous Products	0.3	0.2	0.1	0.1	62	35	22	5	180	222	307	47	8,085	1,455,831	2,102	2.8	23,457
Unknown Therapeutic Category	0.5	0.0	0.0	0.0	18	0	0	0	39	0	0	0	131,814	5,132,456	26,273	34.9	291,526
<b>TOTAL NO. OF RX AND RX \$</b>	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	3,165,761	152,969,937	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 1999 file for Connecticut, released by CMS in 11/2003. 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](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 Connecticut, 4.7 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).
- Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Center for Medicare and Medicaid Services; CNS = Central Nervous System; MAX = Medicaid Analytic Extract; n.a. = not applicable; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

Table 15

TABLE 16

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP<sup>a, b, c</sup>  
DUAL ELIGIBLE BENEFICIARIES, CONNECTICUT, 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
ANTIPSYCHOTICS	\$25,587,373	25,427	33.8 %	281,476	0.9	\$103	\$91
ANTIDEPRESSANTS	13,795,654	32,217	42.8	352,247	0.7	54	39
ULCER DRUGS	9,933,891	23,309	30.9	255,945	0.5	76	39
ANTICONVULSANT	9,564,465	17,739	23.5	197,592	0.9	52	48
ANTIHYPERTENSIVE	5,886,983	21,894	29.1	239,483	0.6	39	25
ANTIVIRAL	5,837,282	4,418	5.9	48,479	0.4	275	120
ANTIDIABETIC	5,525,367	18,485	24.5	203,079	0.7	41	27
ANALGESICS - Narcotic	5,392,795	29,115	38.7	316,450	0.4	42	17
CALCIUM BLOCKERS	5,225,624	14,177	18.8	155,272	0.7	51	34
ANTHYPERLIPIDEMIC	4,977,449	9,281	12.3	105,029	0.6	82	47

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

Beneficiary Characteristics	All Top 10 Drug Groups				ANTIPSYCHOTICS				ANTIDEPRESSANTS			
	No. of Rx	Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
<b>All</b>	<b>1,415,371</b>	<b>\$91,726,883</b>	<b>25,427</b>	<b>33.8 %</b>	<b>281,476</b>	<b>0.9</b>	<b>\$91</b>	<b>32,217</b>	<b>42.8 %</b>	<b>352,247</b>	<b>0.7</b>	<b>\$39</b>
<b>Female</b>	905,341	53,589,783	15,274	31.6	168,751	0.8	73	22,006	45.5	241,196	0.7	39
<b>Disabled</b>	321,085	22,926,117	5,981	47.8	68,798	1.0	108	8,124	64.9	92,400	0.8	44
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	219	19,566	5	22.7	54	1.0	204	6	27.3	66	1.0	58
21-44	129,510	9,837,757	2,881	57.2	33,009	1.1	116	3,457	68.6	39,076	0.8	47
45-64	188,335	12,899,536	3,061	42.1	35,350	0.9	101	4,600	63.3	52,616	0.7	41
65-74	3,021	169,258	34	17.8	385	0.8	62	61	31.9	642	0.5	28
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
<b>Other Eligibles</b>	584,256	30,663,666	9,293	25.9	99,953	0.6	49	13,882	38.7	148,796	0.7	36
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	30	3,310	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	1,839	123,897	40	24.5	437	0.8	92	82	50.3	817	0.5	24
45-64	263	15,282	4	15.4	48	0.6	43	10	38.5	89	0.5	20
65-74	161,425	9,519,125	1,909	22.1	21,681	0.7	70	3,102	36.0	34,921	0.6	34
75-84	214,063	11,225,929	3,285	26.9	35,508	0.7	49	4,824	39.5	52,181	0.7	37
85 and older	206,636	9,776,123	4,055	27.3	42,279	0.6	38	5,864	39.4	60,788	0.7	36
<b>Male</b>	510,030	38,137,100	10,153	37.7	112,725	1.0	118	10,211	37.9	111,051	0.7	40
<b>Disabled</b>	317,087	27,719,061	7,068	50.2	80,595	1.2	142	6,122	43.5	68,703	0.8	42
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	565	33,472	10	35.7	99	1.8	184	8	28.6	78	1.9	48
21-44	166,703	15,570,635	4,235	58.7	48,193	1.2	150	3,300	45.7	37,133	0.8	43
45-64	148,458	12,028,587	2,807	41.8	32,118	1.1	132	2,786	41.5	31,196	0.7	41
65-74	1,361	86,367	16	13.8	185	0.7	80	28	24.1	296	0.6	27
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
<b>Other Eligibles</b>	192,943	10,418,039	3,085	24.0	32,130	0.7	55	4,089	31.8	42,348	0.7	37
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	38	1,387	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	27	1,729	2	20.0	4	1.5	136	1	10.0	2	1.5	50
21-44	906	68,596	22	17.5	195	0.7	61	40	31.7	304	0.6	37
45-64	599	36,845	7	12.5	59	0.3	34	19	33.9	198	0.5	27
65-74	80,003	4,684,468	1,033	21.0	11,343	0.8	73	1,335	27.1	14,609	0.7	38
75-84	72,694	3,767,882	1,161	25.2	12,069	0.7	52	1,617	35.1	16,728	0.7	37
85 and older	38,676	1,857,132	860	27.5	8,460	0.6	37	1,077	34.5	10,507	0.7	34
<b>Unknown</b>	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

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

Beneficiary Characteristics	ULCER DRUGS					ANTICONVULSANT					ANTIHYPERTENSIVE				
	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 \$
<b>All</b>	<b>23,309</b>	<b>30.9 %</b>	<b>255,945</b>	<b>0.5</b>	<b>\$39</b>	<b>17,739</b>	<b>23.5 %</b>	<b>197,592</b>	<b>0.9</b>	<b>\$48</b>	<b>21,894</b>	<b>29.1 %</b>	<b>239,483</b>	<b>0.6</b>	<b>\$25</b>
<b>Female</b>	16,047	33.2	177,095	0.5	39	10,297	21.3	114,655	0.9	44	14,441	29.8	158,924	0.6	24
<b>Disabled</b>	4,005	32.0	46,061	0.4	37	5,398	43.1	61,577	1.0	55	2,644	21.1	30,037	0.6	24
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	8	36.4	90	0.9	50	0	0.0	0	0.0	0
21-44	1,280	25.4	14,755	0.4	35	2,625	52.1	29,845	1.0	59	448	8.9	5,105	0.6	21
45-64	2,671	36.8	30,706	0.4	39	2,736	37.7	31,357	1.0	51	2,122	29.2	24,105	0.6	25
65-74	54	28.3	600	0.4	31	29	15.2	285	0.8	41	74	38.7	827	0.5	24
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
<b>Other Eligibles</b>	12,042	33.6	131,034	0.5	40	4,899	13.7	53,078	0.8	32	11,797	32.9	128,887	0.7	25
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	2	50.0	24	0.2	34	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	22	13.5	196	0.3	34	39	23.9	359	0.7	43	20	12.3	203	0.5	16
45-64	6	23.1	72	0.3	33	3	11.5	25	0.5	40	6	23.1	49	0.7	31
65-74	3,095	35.9	35,148	0.4	35	1,481	17.2	16,687	0.8	38	3,489	40.4	39,589	0.6	26
75-84	4,250	34.8	47,075	0.5	40	1,888	15.5	20,397	0.8	31	4,281	35.1	47,429	0.6	25
85 and older	4,667	31.4	48,519	0.6	43	1,488	10.0	15,610	0.7	26	4,001	26.9	41,617	0.7	24
<b>Male</b>	7,262	27.0	78,850	0.5	38	7,442	27.6	82,937	1.0	54	7,453	27.7	80,559	0.6	25
<b>Disabled</b>	3,224	22.9	36,365	0.5	36	5,229	37.2	59,304	1.0	61	2,741	19.5	30,571	0.6	24
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	2	7.1	20	0.4	19	17	60.7	172	1.1	58	5	17.9	52	0.6	6
21-44	1,356	18.8	15,455	0.5	35	2,959	41.0	33,593	1.1	65	796	11.0	8,911	0.6	23
45-64	1,838	27.4	20,582	0.5	37	2,237	33.3	25,379	1.0	56	1,891	28.2	21,079	0.6	24
65-74	28	24.1	308	0.3	30	16	13.8	160	0.9	53	49	42.2	529	0.6	30
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
<b>Other Eligibles</b>	4,038	31.4	42,485	0.5	40	2,213	17.2	23,633	0.8	37	4,712	36.7	49,988	0.7	25
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	7	1	50.0	12	0.1	0	1	50.0	12	0.2	5
15-20	1	10.0	12	0.6	11	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	16	12.7	158	0.2	14	23	18.3	175	0.7	58	9	7.1	80	0.4	14
45-64	13	23.2	132	0.5	33	3	5.4	24	0.3	17	8	14.3	63	0.6	29
65-74	1,506	30.6	16,601	0.5	36	967	19.6	10,710	0.9	40	1,961	39.8	21,465	0.6	25
75-84	1,489	32.4	15,570	0.6	41	846	18.4	9,004	0.8	36	1,789	38.9	19,101	0.7	26
85 and older	1,012	32.4	10,000	0.6	45	373	11.9	3,708	0.8	30	944	30.2	9,267	0.7	26
<b>Unknown</b>	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 Connecticut, released by CMS in 11/2003. 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](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<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, CONNECTICUT, 1999

Beneficiary Characteristics	ANTIVIRAL				ANTIDIABETIC				ANALGESICS - Narcotic						
	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
<b>All</b>	<b>4,418</b>	<b>5.9 %</b>	<b>48,479</b>	<b>0.4</b>	<b>\$120</b>	<b>18,485</b>	<b>24.5 %</b>	<b>203,079</b>	<b>0.7</b>	<b>\$27</b>	<b>29,115</b>	<b>38.7 %</b>	<b>316,450</b>	<b>0.4</b>	<b>\$17</b>
<b>Female</b>	1,914	4.0	21,479	0.3	70	12,685	26.2	140,155	0.7	27	20,013	41.3	218,497	0.4	16
<b>Disabled</b>	959	7.7	10,869	0.5	125	3,059	24.4	34,806	0.7	32	7,008	56.0	79,768	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	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	1	4.5	12	0.3	8	0	0.0	0	0.0	0	6	27.3	72	0.2	3
21-44	536	10.6	6,091	0.5	130	571	11.3	6,583	0.7	32	2,644	52.5	30,068	0.4	19
45-64	416	5.7	4,703	0.4	119	2,413	33.2	27,410	0.7	32	4,281	58.9	48,802	0.4	20
65-74	6	3.1	63	0.1	7	75	39.3	813	0.6	30	77	40.3	826	0.4	16
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
<b>Other Eligibles</b>	955	2.7	10,610	0.1	14	9,626	26.8	105,349	0.7	26	13,005	36.2	138,729	0.4	14
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	2	50.0	24	0.2	42	0	0.0	0	0.0	0	1	25.0	12	0.1	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	8.0	122	0.2	67	21	12.9	181	0.6	47	82	50.3	829	0.4	19
45-64	1	3.8	1	2.0	28	12	46.2	112	0.5	34	15	57.7	151	0.2	4
65-74	171	2.0	1,960	0.2	37	3,658	42.4	41,208	0.6	30	3,767	43.7	42,359	0.4	12
75-84	294	2.4	3,303	0.1	11	3,698	30.3	40,362	0.7	25	4,545	37.2	49,409	0.4	14
85 and older	474	3.2	5,200	0.1	6	2,237	15.0	23,486	0.7	19	4,595	30.9	45,969	0.4	16
<b>Male</b>	2,504	9.3	27,000	0.5	161	5,800	21.5	62,924	0.7	27	9,102	33.8	97,953	0.4	19
<b>Disabled</b>	2,202	15.6	23,727	0.6	175	2,424	17.2	27,016	0.6	30	5,102	36.3	56,603	0.4	24
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	1	3.6	10	0.3	27	0	0.0	0	0.0	0	2	7.1	18	0.1	1
21-44	1,338	18.5	14,332	0.6	177	662	9.2	7,522	0.7	30	2,498	34.6	27,865	0.4	25
45-64	862	12.8	9,377	0.6	171	1,738	25.9	19,256	0.6	31	2,576	38.4	28,444	0.4	22
65-74	1	0.9	8	0.1	5	24	20.7	238	0.5	21	26	22.4	276	0.3	17
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
<b>Other Eligibles</b>	302	2.4	3,273	0.3	58	3,376	26.3	35,908	0.7	25	4,000	31.1	41,350	0.4	13
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	2	100.0	24	0.5	8	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	1	10.0	12	0.8	71	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	5	4.0	57	0.2	177	16	12.7	150	0.5	23	64	50.8	661	0.4	22
45-64	3	5.4	29	0.4	200	14	25.0	148	0.6	29	40	71.4	397	0.4	14
65-74	140	2.8	1,569	0.5	102	1,602	32.5	17,562	0.6	28	1,670	33.9	18,280	0.3	12
75-84	82	1.8	876	0.1	11	1,213	26.4	12,813	0.7	24	1,382	30.0	14,145	0.4	14
85 and older	69	2.2	706	0.1	8	531	17.0	5,235	0.7	19	844	27.0	7,867	0.4	13
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Table 16C

Dual Eligible Beneficiaries



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

Beneficiary Characteristics	CALCIUM BLOCKERS				ANTHYPERLIPIDEMIC				Mean Rx \$	Mean No. of Rx	Users as % of Dual Benes	No. of Bene Mos among Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean Rx \$	Mean No. of Rx	No. of Bene Mos
	No. of Users	18.8 %	155,272	0.7	Mean Rx \$	No. of Users	12.3 %	105,029									
<b>All</b>	14,177	18.8 %	155,272	0.7	\$34	9,281	12.3 %	105,029	0.6	\$47	75,327	789,467					
<b>Female</b>	10,322	21.3	113,189	0.7	34	6,173	12.8	70,121	0.6	49	48,407	509,376					
<b>Disabled</b>	1,664	13.3	18,880	0.6	34	1,749	14.0	20,072	0.6	46	12,517	138,569					
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	22	201					
21-44	265	5.3	3,000	0.5	31	285	5.7	3,315	0.5	39	5,039	55,749					
45-64	1,348	18.6	15,304	0.6	35	1,420	19.5	16,297	0.6	48	7,265	80,742					
65-74	51	26.7	576	0.5	33	44	23.0	460	0.6	44	191	1,877					
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					
<b>Other Eligibles</b>	8,658	24.1	94,309	0.7	33	4,424	12.3	50,049	0.6	50	35,890	370,807					
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0					
6-14	2	50.0	24	0.9	61	0	0.0	0	0.0	0	4	37					
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0					
21-44	8	4.9	85	1.0	58	5	3.1	49	0.6	43	163	1,322					
45-64	6	23.1	49	0.4	36	2	7.7	19	0.2	17	26	209					
65-74	2,394	27.8	27,085	0.6	34	2,171	25.2	24,776	0.6	50	8,627	93,788					
75-84	3,157	25.9	34,726	0.7	34	1,740	14.3	19,713	0.6	50	12,202	127,674					
85 and older	3,091	20.8	32,340	0.8	32	506	3.4	5,492	0.6	47	14,868	147,777					
<b>Male</b>	3,855	14.3	42,083	0.6	34	3,108	11.5	34,908	0.6	45	26,920	280,091					
<b>Disabled</b>	1,382	9.8	15,430	0.6	36	1,614	11.5	18,261	0.6	45	14,074	152,291					
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	1	3.6	10	0.9	57	0	0.0	0	0.0	0	28	277					
21-44	368	5.1	4,205	0.6	35	443	6.1	5,075	0.6	43	7,217	78,507					
45-64	993	14.8	10,985	0.6	36	1,145	17.1	12,909	0.6	45	6,713	72,421					
65-74	20	17.2	230	0.5	35	26	22.4	277	0.5	43	116	1,086					
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					
<b>Other Eligibles</b>	2,473	19.3	26,653	0.6	33	1,494	11.6	16,647	0.6	45	12,846	127,800					
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	1					
6-14	2	100.0	24	0.8	44	0	0.0	0	0.0	0	2	24					
15-20	1	10.0	12	0.1	8	0	0.0	0	0.0	0	10	66					
21-44	7	5.6	65	0.3	23	7	5.6	49	0.5	44	126	1,028					
45-64	8	14.3	78	0.5	37	11	19.6	101	0.6	42	56	456					
65-74	1,073	21.8	11,948	0.6	35	922	18.7	10,485	0.6	45	4,925	51,669					
75-84	906	19.7	9,763	0.7	33	463	10.1	5,077	0.6	47	4,602	45,817					
85 and older	476	15.2	4,763	0.7	29	91	2.9	935	0.6	43	3,124	28,739					
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0					

Source: Data for this table are from the MAX 1999 file for Connecticut, released by CMS in 11/2003. 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](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<sup>a, b</sup>  
 DUAL ELIGIBLE BENEFICIARIES, CONNECTICUT, 1999

Beneficiary Characteristics	Rx \$ per Bene Mo	No. of Rx per Bene Mo	No. of All-Year NF Residents	Bene Mos among All-Year NF Residents
<b>All</b>	<b>\$182</b>	<b>4.9</b>	<b>18,491</b>	<b>188,750</b>
<b>Age</b>				
0-64	348	6.5	912	10,249
65-74	250	5.9	1,855	19,772
75-84	197	5.3	5,562	56,907
85 and older	143	4.3	10,162	101,822
Unknown	0	0.0	0	0
<b>Gender</b>				
Female	172	4.8	14,173	145,505
Male	214	5.1	4,318	43,245
Unknown	0	0.0	0	0
<b>Race</b>				
White	179	4.9	17,043	173,427
African American	203	4.8	1,050	11,094
Other/unknown	237	5.2	398	4,229
<b>Basis of Eligibility</b>				
Aged	172	4.8	17,565	178,351
Disabled	348	6.5	926	10,399
Adults	0	0.0	0	0
Children	0	0.0	0	0
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 1999 file for Connecticut, released by CMS in 11/2003. 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 7,337 beneficiaries who were in nursing facilities for part of their enrollment and their 71,988 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<sup>a, b, c, d, e</sup>  
 DUAL ELIGIBLE BENEFICIARIES, CONNECTICUT, 1999

Therapeutic Category	No. of Rx per Bene Mo among Users			\$ per Bene Mo among Users			\$ per Rx			Users							
	Total	Patented	Off-Patent	Total	Patented	Off-Patent	Total	Patented	Off-Patent	Total	No.	As % of Dual All-Year NF Residents	No. of Bene Mos				
		Brand-Name	Generic		Brand-Name	Generic		Brand-Name	Generic								
Anti-infective Agents	0.3	0.2	0.0	0.1	\$14	\$12	\$0	\$2	\$48	\$75	\$40	\$15	33,130	\$1,603,220	10,470	56.6 %	110,584
Biologics	0.1	0.0	0.0	0.1	2	1	0	1	16	11	0	21	472	7,719	411	2.2	4,645
Antineoplastic Agents	0.6	0.2	0.2	0.2	84	46	30	8	140	199	164	43	4,259	596,612	712	3.9	7,087
Endocrine/Metabolic Drugs	1.1	0.4	0.2	0.5	23	15	3	5	21	40	13	11	63,997	1,375,125	5,726	31.0	59,670
Cardiovascular Agents	1.9	0.4	0.5	1.0	43	15	13	16	22	37	26	15	218,503	4,914,534	10,974	59.3	112,992
Respiratory Agents	0.7	0.3	0.0	0.4	28	14	0	13	39	46	34	33	38,309	1,492,682	5,102	27.6	53,969
Gastrointestinal Agents	0.9	0.3	0.0	0.5	49	32	3	14	56	97	62	28	67,582	3,762,556	7,253	39.2	76,175
Genitourinary Agents	0.6	0.3	0.0	0.3	21	14	0	6	36	52	36	20	13,705	486,870	2,179	11.8	23,641
CNS Drugs	1.5	0.7	0.2	0.6	85	61	13	10	56	84	76	16	185,773	10,363,756	11,627	62.9	122,129
Stimulants/Anti-obesity/Anorexia	0.6	0.0	0.0	0.6	14	2	0	12	23	75	25	21	774	17,804	116	0.6	1,260
Miscellaneous Psychological/Neurological Agents	0.8	0.8	0.0	0.0	83	83	0	0	107	109	0	21	5,955	635,716	726	3.9	7,621
Analgesics and Anesthetics	0.8	0.3	0.1	0.4	29	19	4	6	37	70	54	13	45,420	1,686,047	5,837	31.6	58,463
Neuromuscular Agents	1.2	0.3	0.2	0.6	49	22	11	15	41	66	46	25	63,453	2,611,235	4,943	26.7	53,279
Nutritional Products	0.7	0.0	0.3	0.4	15	0	7	7	20	19	21	19	31,312	621,468	4,147	22.4	42,318
Hematological Agents	1.1	0.1	0.3	0.7	27	12	6	9	24	173	18	12	51,074	1,215,971	4,374	23.7	45,491
Topical Products	0.6	0.2	0.1	0.3	18	9	5	4	29	42	38	14	64,992	1,911,622	9,884	53.5	107,403
Miscellaneous Products	0.3	0.1	0.0	0.1	14	7	3	4	54	59	246	34	1,309	70,746	477	2.6	5,121
Unknown Therapeutic Category	0.4	0.0	0.0	0.0	12	0	0	0	29	0	0	0	32,746	948,699	7,162	38.7	76,792
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.	922,765	34,322,382	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 1999 file for Connecticut, released by CMS in 11/2003. 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 7,337 beneficiaries who were in nursing facilities for part of their enrollment and their 71,988 benefit months were excluded from the analysis.

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

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

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

e. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. For information about this classification method, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).

In Connecticut, 4.7 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<sup>a, b</sup>  
DUAL ELIGIBLE BENEFICIARIES, CONNECTICUT, 1999

Beneficiary Characteristics	No. of Benes					No. of Bene Mos					
	All	Aged	Disabled	Adults	Children	All	Aged	Disabled	Adults	Children	Unknown
<b>All</b>	<b>75,433</b>	<b>48,332</b>	<b>26,591</b>	<b>449</b>	<b>61</b>	<b>791,590</b>	<b>495,338</b>	<b>291,312</b>	<b>4,358</b>	<b>582</b>	<b>0</b>
<b>Age</b>											
5 and younger	1	0	0	0	1	0	0	0	0	2	0
6-14	6	0	0	0	6	71	0	0	0	71	0
15-20	63	0	50	0	13	611	0	509	0	102	0
21-44	12,612	0	12,256	318	38	137,997	0	134,546	3,054	397	0
45-64	14,089	1	13,978	108	2	154,353	7	153,294	1,049	3	0
65-74	13,866	13,537	307	21	1	148,549	145,342	2,963	237	7	0
75-84	16,804	16,802	0	2	0	173,491	173,473	0	18	0	0
85 and older	17,992	17,992	0	0	0	176,516	176,516	0	0	0	0
Unknown	0	0	0	0	0	176,516	176,516	0	0	0	0
<b>Gender</b>											
Female	48,464	35,689	12,517	238	20	510,685	369,199	138,926	2,347	213	0
Male	26,969	12,643	14,074	211	41	280,905	126,139	152,386	2,011	369	0
Unknown	0	0	0	0	0	0	0	0	0	0	0
<b>Race</b>											
White	56,776	38,214	18,334	216	12	592,183	386,613	203,420	2,056	94	0
African American	9,397	4,977	4,296	113	11	101,061	53,852	45,971	1,144	94	0
Other/unknown	9,260	5,141	3,961	120	38	98,346	54,873	41,921	1,158	394	0
<b>Use of Nursing Facilities</b>											
All year	18,491	17,565	926	0	0	188,750	178,351	10,399	0	0	0
Part year	7,337	6,654	683	0	0	71,988	64,744	7,244	0	0	0
None	49,605	24,113	24,982	449	61	530,852	252,243	273,669	4,358	582	0
<b>Maintenance Assistance Status</b>											
Cash	16,029	6,560	9,351	116	2	180,649	73,492	106,028	1,125	4	0
Medically needy	21,380	10,636	10,658	82	4	223,459	109,656	113,111	664	28	0
Poverty related	1,443	515	891	21	16	15,601	5,639	9,694	129	139	0
Other/unknown	36,581	30,621	5,691	230	39	371,881	306,551	62,479	2,440	411	0
<b>Dual Status<sup>c</sup></b>											
Full dual, all year	71,944	46,742	24,704	437	61	752,832	477,822	270,208	4,220	582	0
Full dual, part year	3,489	1,590	1,887	12	0	38,758	17,516	21,104	138	0	0
<b>Managed Care Status</b>											
FFS all year	75,138	48,328	26,500	265	45	788,574	495,297	290,334	2,451	492	0
FFS part year, with Rx claims	127	3	65	53	6	1,368	29	728	570	41	0
FFS part year, no Rx claims	62	1	26	32	3	597	12	250	319	16	0
MC all year, with Rx claims	1	0	0	1	0	12	0	0	12	0	0
MC all year, no Rx claims	105	0	0	98	7	1,039	0	0	1,006	33	0

Source: Data for this table are from the MAX 1999 file for Connecticut, released by CMS in 11/2003. 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, CONNECTICUT, 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
<b>All</b>	<b>75,433</b>	<b>791,590</b>	<b>75,327</b>	<b>789,467</b>	<b>106</b>	<b>2,123</b>		
FFS all year	75,138	788,574	75,138	788,574	0	0		
FFS part year, with Rx claims	127	1,368	127	698	0	670		
FFS part year, with no Rx claims	62	597	62	195	0	402		
MC all year, with Rx claims	1	12	0	0	1	12		
MC all year, with no Rx claims	105	1,039	0	0	105	1,039		

Source: Data for this table are from the MAX 1999 file for Connecticut, released by CMS in 11/2003. This table was produced on 06/25/2004.

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

SUPPLEMENTAL TABLE 1  
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES<sup>a, b</sup>  
 CONNECTICUT, 1999

Total Number of Dual Eligible Beneficiaries 75,327  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries \$152,969,937  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary \$2,031

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	9,501	12.6 %	\$0	0.0 %
1-500	15,524	20.6	3,406,429	2.2
501-1,000	10,090	13.4	7,445,303	4.9
1,001-1,500	8,010	10.6	9,941,281	6.5
1,501-2,000	6,377	8.5	11,099,024	7.3
2,001-2,500	5,158	6.8	11,550,979	7.6
2,501-3,000	3,982	5.3	10,920,570	7.1
3,001-3,500	3,148	4.2	10,194,183	6.7
3,501-4,000	2,542	3.4	9,502,622	6.2
4,001-4,500	1,982	2.6	8,398,008	5.5
4,501-5,000	1,552	2.1	7,352,493	4.8
5,001-5,500	1,205	1.6	6,329,035	4.1
5,501-6,000	1,013	1.3	5,820,025	3.8
6,001-6,500	849	1.1	5,305,929	3.5
6,501-7,000	662	0.9	4,457,257	2.9
7,001-7,500	560	0.7	4,056,762	2.7
7,501-8,000	424	0.6	3,291,294	2.2
8,001-8,500	408	0.5	3,365,304	2.2
8,501-9,000	333	0.4	2,910,683	1.9
9,001-9,500	261	0.3	2,410,222	1.6
9,501-10,000	237	0.3	2,313,121	1.5
10,001+	1,509	2.0	22,899,413	15.0

Source: Data for this table are from the MAX 1999 file for Connecticut, released by CMS in 11/2003. 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 1D  
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 85 AND OLDER<sup>a, b</sup>  
 CONNECTICUT, 1999

Total Number of Dual Eligible Beneficiaries, Age 85+ 17,992  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 85+ \$24,464,791  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 85+ \$1,360

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 85+	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	2,122	11.8 %	0	0.0 %
1-500	4,433	24.6	999,142	4.1
501-1,000	2,929	16.3	2,158,003	8.8
1,001-1,500	2,309	12.8	2,872,578	11.7
1,501-2,000	1,701	9.5	2,959,234	12.1
2,001-2,500	1,260	7.0	2,813,078	11.5
2,501-3,000	926	5.1	2,534,024	10.4
3,001-3,500	694	3.9	2,241,674	9.2
3,501-4,000	516	2.9	1,927,375	7.9
4,001-4,500	349	1.9	1,473,230	6.0
4,501-5,000	230	1.3	1,084,666	4.4
5,001-5,500	145	0.8	760,944	3.1
5,501-6,000	116	0.6	666,712	2.7
6,001-6,500	74	0.4	461,720	1.9
6,501-7,000	59	0.3	396,500	1.6
7,001-7,500	41	0.2	297,773	1.2
7,501-8,000	24	0.1	186,148	0.8
8,001-8,500	21	0.1	173,199	0.7
8,501-9,000	12	0.1	104,809	0.4
9,001-9,500	8	0.0	74,200	0.3
9,501-10,000	7	0.0	67,977	0.3
10,001+	16	0.1	211,805	0.9

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