

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

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TABLE 11

CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a,b}
DUAL ELIGIBLE BENEFICIARIES, FLORIDA, 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	Aged	Disabled	Adults	Children	Other/ Unknown	
All	328,402	182,392	144,932	1,054	24	0	3,367,598	1,856,050	1,504,710	6,650	188	0	3,367,598	1,856,050	1,504,710	6,650	188	0	
Age																			
5 and younger	22	0	21	0	1	0	244	0	232	0	12	0	244	0	232	0	12	0	0
6-14	75	0	68	0	7	0	806	0	735	0	71	0	806	0	735	0	71	0	0
15-20	476	0	457	7	12	0	4,546	0	4,404	52	90	0	4,546	0	4,404	52	90	0	0
21-44	45,904	0	45,229	673	2	0	471,515	0	466,692	4,815	8	0	471,515	0	466,692	4,815	8	0	0
45-64	51,161	8	50,898	253	2	0	529,380	65	527,889	1,419	7	0	529,380	65	527,889	1,419	7	0	0
65-74	91,472	63,856	27,518	98	0	0	951,427	656,304	294,830	293	0	0	951,427	656,304	294,830	293	0	0	0
75-84	80,091	66,051	14,018	22	0	0	832,788	688,982	143,738	68	0	0	832,788	688,982	143,738	68	0	0	0
85 and older	59,200	52,476	6,723	1	0	0	576,880	510,687	66,190	3	0	0	576,880	510,687	66,190	3	0	0	0
Unknown	1	1	0	0	0	0	12	12	0	0	0	0	12	12	0	0	0	0	0
Gender																			
Female	217,111	133,758	82,622	722	9	0	2,250,434	1,375,112	870,442	4,813	67	0	2,250,434	1,375,112	870,442	4,813	67	0	0
Male	111,291	48,634	62,310	332	15	0	1,117,164	480,938	634,268	1,837	121	0	1,117,164	480,938	634,268	1,837	121	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Race																			
White	175,013	94,439	79,977	586	11	0	1,769,530	937,524	828,086	3,828	92	0	1,769,530	937,524	828,086	3,828	92	0	0
African American	62,817	28,767	33,728	312	10	0	649,851	296,678	351,244	1,862	67	0	649,851	296,678	351,244	1,862	67	0	0
Other/unknown	90,572	59,186	31,227	156	3	0	948,217	621,848	325,380	960	29	0	948,217	621,848	325,380	960	29	0	0
Use of Nursing Facilities																			
All year	46,865	38,914	7,951	0	0	0	445,710	370,323	75,387	0	0	0	445,710	370,323	75,387	0	0	0	0
Part year	20,404	15,084	5,319	1	0	0	183,602	134,091	49,506	5	0	0	183,602	134,091	49,506	5	0	0	0
None	261,133	128,394	131,662	1,053	24	0	2,738,286	1,351,636	1,379,817	6,645	188	0	2,738,286	1,351,636	1,379,817	6,645	188	0	0
Maintenance Assistance Status																			
Cash	184,304	89,896	93,767	639	2	0	1,992,724	981,809	1,007,510	3,382	23	0	1,992,724	981,809	1,007,510	3,382	23	0	0
Medically needy	834	3	793	36	2	0	7,094	16	6,789	272	17	0	7,094	16	6,789	272	17	0	0
Poverty-related	90,667	53,796	36,666	197	8	0	895,106	535,256	358,466	1,321	63	0	895,106	535,256	358,466	1,321	63	0	0
Other/unknown	52,597	38,697	13,706	182	12	0	472,674	338,969	131,945	1,675	85	0	472,674	338,969	131,945	1,675	85	0	0
Dual Medicare Status^c																			
Full dual, all year	323,328	180,312	141,971	1,023	22	0	3,317,791	1,835,680	1,475,553	6,391	167	0	3,317,791	1,835,680	1,475,553	6,391	167	0	0
Full dual, part year	5,074	2,080	2,961	31	2	0	49,807	20,370	29,157	259	21	0	49,807	20,370	29,157	259	21	0	0
Managed Care Status																			
FFS all year	313,792	176,458	136,502	812	20	0	3,291,162	1,825,644	1,459,727	5,615	176	0	3,291,162	1,825,644	1,459,727	5,615	176	0	0
FFS part year, with Rx claims	10,024	3,807	6,070	144	3	0	58,551	22,179	35,647	717	8	0	58,551	22,179	35,647	717	8	0	0
FFS part year, no Rx claims	4,586	2,127	2,360	98	1	0	17,885	8,227	9,336	318	4	0	17,885	8,227	9,336	318	4	0	0

Source: Data for this table are from the MAX 1999 file for Florida, 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, FLORIDA, 1999

Beneficiary Characteristics	% with at Least One Rx	Mean No. of Rx	Mean Rx \$	\$ per Rx	Mean \$, All Services	Rx \$ as % of All Services	Mean OTC Drug \$ ^c	No. of Benefes
All	81.6 %	35.3	\$1,878	\$53	\$8,287	22.7 %	\$48	328,402
Age								
5 and younger	90.9	45.4	3,656	81	33,552	10.9	319	22
6-14	97.3	47.8	7,189	150	19,539	36.8	197	75
15-20	71.8	19.1	1,961	103	7,327	26.8	32	476
21-44	79.0	30.1	3,131	104	8,115	38.6	38	45,904
45-64	85.2	41.8	2,689	64	8,078	33.3	77	51,161
65-74	76.3	32.5	1,443	44	4,854	29.7	56	91,472
75-84	82.4	36.8	1,516	41	8,364	18.1	42	80,091
85 and older	87.4	36.3	1,357	37	13,783	9.8	26	59,200
Unknown	100.0	28.0	417	15	40,842	1.0	0	1
Basis of Eligibility								
Aged	80.1	33.2	1,353	41	8,596	15.7	35	182,392
Disabled	83.5	38.3	2,544	67	7,939	32.0	64	144,932
Adults	64.9	13.8	863	63	2,382	36.2	22	1,054
Children	75.0	19.7	3,355	170	16,273	20.6	15	24
Unknown	0.0	0.0	0	0	0	0.0	0	0
Gender								
Female	83.6	37.5	1,698	45	8,283	20.5	50	217,111
Male	77.5	31.0	2,228	72	8,294	26.9	44	111,291
Unknown	0.0	0.0	0	0	0	0.0	0	0
Race								
White	84.1	38.4	1,952	51	10,156	19.2	40	175,013
African American	78.0	29.7	1,758	59	7,761	22.6	64	62,817
Other/unknown	79.2	33.3	1,817	55	5,039	36.1	51	90,572
Use of Nursing Facilities								
Entire year	94.0	45.3	1,747	39	26,026	6.7	24	46,865
Part year	89.5	36.5	1,593	44	15,831	10.1	37	20,404
None	78.7	33.5	1,923	58	4,514	42.6	53	261,133
Maintenance Assistance Status								
Cash	80.7	34.5	1,791	52	4,305	41.6	54	184,304
Medically needy	90.0	49.0	4,228	86	7,729	54.7	138	834
Poverty related	81.0	34.9	1,794	51	10,191	17.6	45	90,667
Other/unknown	85.6	38.8	2,289	59	18,967	12.1	30	52,597

Source: Data for this table are from the MAX 1999 file for Florida, 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, FLORIDA, 1999

Beneficiary Characteristics	Mean No. of Rx	Mean Rx \$	Rx \$ as % of All Services	No. of Rx, % with:					Mean \$, All Services	Benes	Bene Mos	
				None	More than 0, but 1 or Less	More than 1, but 2 or Less	More than 2, but 5 or Less	More than 5, but 10 or Less				More than 10
All	3.4	\$183	22.7 %	18.4 %	16.6 %	11.5 %	31.7 %	19.1 %	2.6 %	\$808	328,402	3,367,598
Age												
5 and younger	4.1	330	10.9	9.1	9.1	18.2	40.9	22.7	0.0	3,025	22	244
6-14	4.4	669	36.8	2.7	8.0	8.0	53.3	28.0	0.0	1,818	75	806
15-20	2.0	205	26.8	28.2	33.4	12.8	18.5	5.7	1.5	767	476	4,546
21-44	2.9	305	38.6	21.0	24.5	12.4	26.0	13.4	2.9	790	45,904	471,515
45-64	4.0	260	33.3	14.8	15.7	11.0	31.2	22.4	4.8	781	51,161	529,380
65-74	3.1	139	29.7	23.7	16.9	11.0	29.3	16.9	2.1	467	91,472	951,427
75-84	3.5	146	18.1	17.6	14.2	11.3	33.9	20.8	2.3	804	80,091	832,788
85 and older	3.7	139	9.8	12.6	14.0	12.2	37.2	22.1	1.9	1,415	59,200	576,880
Unknown	2.3	35	1.0	0.0	0.0	100.0	0.0	0.0	0.0	3,404	1	12
Basis of Eligibility												
Aged	3.3	133	15.7	19.9	15.8	11.7	32.6	18.1	1.9	845	182,392	1,856,050
Disabled	3.7	245	32.0	16.5	17.5	11.2	30.6	20.5	3.6	765	144,932	1,504,710
Adults	2.2	137	36.2	35.1	25.9	9.1	20.7	7.7	1.5	378	1,054	6,650
Children	2.5	428	20.6	25.0	25.0	8.3	37.5	4.2	0.0	2,077	24	188
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Gender												
Female	3.6	164	20.5	16.4	15.2	11.6	33.3	20.8	2.8	799	217,111	2,250,434
Male	3.1	222	26.9	22.5	19.3	11.2	28.6	16.0	2.4	826	111,291	1,117,164
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	3.8	193	19.2	15.9	15.1	11.2	32.4	21.9	3.5	1,005	175,013	1,769,530
African American	2.9	170	22.6	22.0	20.3	12.6	29.3	14.1	1.7	750	62,817	649,851
Other/unknown	3.2	174	36.1	20.8	17.0	11.3	31.9	17.2	1.7	481	90,572	948,217
Use of Nursing Facilities												
Entire year	4.8	184	6.7	6.0	10.2	11.2	37.0	30.6	4.9	2,737	46,865	445,710
Part year	4.1	177	10.1	10.5	14.0	12.8	37.4	22.5	2.7	1,759	20,404	183,602
None	3.2	183	42.6	21.3	18.0	11.4	30.3	16.8	2.2	431	261,133	2,738,286
Maintenance Assistance Status												
Cash	3.2	166	41.6	19.3	18.1	11.6	31.5	17.6	2.0	398	184,304	1,992,724
Medically needy	5.8	497	54.7	10.0	7.6	7.3	32.1	34.5	8.5	909	834	7,094
Poverty related	3.5	182	17.6	19.0	16.3	11.6	31.4	18.8	2.8	1,032	90,667	895,106
Other/unknown	4.3	255	12.1	14.4	12.1	11.0	32.9	25.0	4.6	2,111	52,597	472,674

Source: Data for this table are from the MAX 1999 file for Florida, 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, FLORIDA, 1999

Beneficiary Characteristics	All Rx			Patented Brand-Name Drugs			Off-Patent Brand-Name Drugs			Generic Drugs		
	No. of Rx	Rx \$	\$ per Rx	No. of Rx	Rx \$	\$ per Rx	No. of Rx	Rx \$	\$ per Rx	No. of Rx	Rx \$	\$ per Rx
All	3.4	\$183	\$53	1.3	\$124	\$93	0.6	\$29	\$48	1.3	\$22	\$16
Age												
5 and younger	4.1	330	81	1.2	256	208	0.8	28	37	1.9	39	21
6-14	4.4	669	150	1.7	541	314	1.0	83	83	1.5	31	21
15-20	2.0	205	103	0.8	147	183	0.4	44	109	0.7	10	14
21-44	2.9	305	104	1.3	244	194	0.4	31	82	1.2	24	20
45-64	4.0	260	64	1.7	188	114	0.6	35	58	1.6	27	17
65-74	3.1	139	44	1.3	88	69	0.5	25	45	1.1	18	16
75-84	3.5	146	41	1.3	88	66	0.7	29	42	1.3	21	16
85 and older	3.7	139	37	1.2	79	65	0.8	30	38	1.5	23	15
Unknown	2.3	35	15	0.1	2	28	0.5	8	16	1.8	25	14
Basis of Eligibility												
Aged	3.3	133	41	1.2	81	66	0.6	26	41	1.2	19	15
Disabled	3.7	245	67	1.5	178	120	0.6	33	57	1.4	25	17
Adults	2.2	137	63	0.9	99	115	0.2	16	68	1.0	17	17
Children	2.5	428	170	0.8	358	458	0.5	43	90	1.1	23	21
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Gender												
Female	3.6	164	45	1.4	105	76	0.6	29	45	1.4	22	16
Male	3.1	222	72	1.2	163	134	0.5	29	54	1.2	22	18
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Race												
White	3.8	193	51	1.4	128	90	0.7	32	47	1.5	25	16
African American	2.9	170	59	1.1	124	111	0.5	23	47	1.1	17	15
Other/unknown	3.2	174	55	1.3	117	90	0.6	28	49	1.1	20	17
Use of Nursing Facilities												
Entire year	4.8	184	39	1.6	107	69	1.0	39	40	2.0	30	15
Part year	4.1	177	44	1.4	110	78	0.8	34	42	1.6	26	16
None	3.2	183	58	1.3	128	99	0.5	27	51	1.2	20	17
Maintenance Assistance Status												
Cash	3.2	166	52	1.3	110	87	0.6	28	50	1.2	20	16
Medically needy	5.8	497	86	2.6	377	147	0.8	61	73	2.1	42	20
Poverty related	3.5	182	51	1.3	123	91	0.6	29	48	1.4	23	16
Other/unknown	4.3	255	59	1.6	183	117	0.8	36	43	1.7	28	17

Source: Data for this table are from the MAX 1999 file for Florida, 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 Florida, 4.8 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, FLORIDA, 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		Total	Patented		Total	Off-Patent	Brand-Name	Generic	Total No. of Rx	Total Rx \$	No. Dual Benes	As % of Dual Benes	No. of Bene Mos		
		Off-Patent	Brand-Name		Off-Patent	Brand-Name										Generic	
Anti-infective Agents	0.4	0.3	0.0	0.1	\$44	\$42	\$0	\$2	\$115	\$163	\$71	\$15	711,999	\$81,864,496	168,124	51.2 %	1,850,518
Biologics	0.4	0.3	0.0	0.1	785	648	57	80	1842	2,156	1,631	883	8,324	15,329,799	1,794	0.5	19,519
Antineoplastic Agents	0.4	0.1	0.2	0.1	65	28	31	5	164	249	163	59	61,010	10,029,652	14,931	4.5	154,284
Endocrine/Metabolic Drugs	0.8	0.4	0.2	0.2	38	32	3	3	49	79	17	14	956,406	46,600,225	112,801	34.3	1,228,975
Cardiovascular Agents	1.4	0.5	0.4	0.5	47	26	13	8	33	51	36	14	2,879,101	95,031,787	187,618	57.1	2,022,009
Respiratory Agents	0.6	0.3	0.0	0.2	23	18	1	4	39	54	22	19	670,998	26,327,542	105,911	32.3	1,165,018
Gastrointestinal Agents	0.6	0.3	0.1	0.2	39	28	6	5	67	109	77	22	806,691	54,325,553	127,347	38.8	1,400,696
Genitourinary Agents	0.3	0.2	0.0	0.1	13	11	0	2	41	54	34	17	129,894	5,366,941	36,686	11.2	407,209
CNS Drugs	1.0	0.4	0.1	0.5	59	40	12	7	58	101	90	14	1,736,953	101,220,007	158,398	48.2	1,713,004
Stimulants/Anti-obesity/Anorexia	0.4	0.1	0.1	0.3	20	5	5	10	46	73	61	35	5,278	243,358	1,113	0.3	12,144
Miscellaneous Psychological/Neurological Agents	0.5	0.4	0.0	0.1	42	40	0	2	92	109	80	25	82,482	7,584,346	16,254	4.9	178,849
Analgesics and Anesthetics	0.6	0.2	0.1	0.4	28	17	6	5	46	96	76	14	1,004,113	45,977,848	150,530	45.8	1,652,331
Neuromuscular Agents	0.7	0.2	0.1	0.4	33	20	6	7	44	94	43	18	585,878	26,007,188	72,887	22.2	794,910
Nutritional Products	0.5	0.0	0.2	0.3	9	0	5	4	19	14	23	16	292,585	5,460,725	55,819	17.0	594,251
Hematological Agents	0.6	0.1	0.2	0.3	55	42	6	6	99	387	32	24	367,000	36,231,544	61,074	18.6	663,195
Topical Products	0.5	0.2	0.1	0.1	17	10	5	2	37	47	43	14	697,749	25,658,791	139,211	42.4	1,548,871
Miscellaneous Products	0.4	0.1	0.1	0.2	80	50	23	7	202	416	267	35	32,864	6,631,098	7,943	2.4	83,268
Unknown Therapeutic Category	0.4	0.0	0.0	0.0	20	0	0	0	46	0	0	0	576,828	26,685,421	117,640	35.8	1,301,866
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.	11,606,153	616,576,321	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 1999 file for Florida, 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_mdmb.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 Florida, 4.8 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_mdmb.asp (May 13 2003).
- Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Center for Medicare and Medicaid Services; CNS = Central Nervous System; MAX = Medicaid Analytic Extract; n.a. = not applicable; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE 16

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP^{a, b, c}
DUAL ELIGIBLE BENEFICIARIES, FLORIDA, 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
ANTIVIRAL	\$49,085,610	28,346	8.6 %	319,735	0.5	\$310	\$154
ANTIPSYCHOTICS	45,936,517	63,883	19.5	693,213	0.6	119	66
ULCER DRUGS	43,873,628	131,330	40.0	1,461,881	0.4	73	30
ANTIDEPRESSANTS	36,912,489	115,018	35.0	1,250,888	0.5	59	30
ANTIHYPERTENSIVE	25,836,874	115,388	35.1	1,264,964	0.6	36	20
ANALGESICS - ANTI-INFLAMMATORY	25,209,071	122,949	37.4	1,399,948	0.3	60	18
CALCIUM BLOCKERS	24,682,089	75,363	22.9	827,360	0.6	46	30
HEMATOPOIETIC AGENTS	22,878,483	25,729	7.8	281,350	0.4	225	81
ANTIDIABETIC	22,269,837	83,516	25.4	910,091	0.6	40	24
ANTIHYPERLIPIDEMIC	21,844,006	52,127	15.9	589,185	0.5	71	37

Source: Data for this table are from the MAX 1999 file for Florida, 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, FLORIDA, 1999

Beneficiary Characteristics	All Top 10 Drug Groups				ANTIVIRAL				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	4,385,708	\$318,528,604	28,346	8.6 %	319,735	0.5	\$154	63,883	19.5 %	693,213	0.6	\$66
Female	3,039,420	189,708,319	8,886	4.1	100,698	0.4	104	38,321	17.7	416,042	0.5	57
Disabled	1,322,253	96,659,655	6,690	8.1	75,821	0.4	130	19,888	24.1	222,431	0.6	71
5 and younger	91	6,690	3	42.9	36	0.3	96	0	0.0	0	0.0	0
6-14	434	38,929	11	35.5	124	0.3	132	0	0.0	0	0.0	0
15-20	1,216	124,556	10	5.0	120	0.3	135	27	13.5	300	0.7	110
21-44	212,264	24,093,899	3,599	19.1	40,359	0.5	144	6,788	36.0	75,641	0.6	85
45-64	510,491	38,315,140	2,362	8.0	26,977	0.4	134	7,367	24.9	83,251	0.6	75
65-74	356,696	21,160,522	491	2.6	5,732	0.2	57	3,148	16.6	35,700	0.5	55
75-84	170,023	9,236,514	150	1.5	1,734	0.1	23	1,660	16.5	18,047	0.5	44
85 and older	71,038	3,683,405	64	1.3	739	0.1	12	898	18.5	9,492	0.4	36
Other Eligibles	1,717,153	93,048,402	2,196	1.6	24,877	0.2	25	18,433	13.7	193,611	0.5	41
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	19	5,035	2	50.0	22	0.1	12	0	0.0	0	0.0	0
15-20	6	72	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	2,130	194,953	42	8.6	436	0.4	105	73	14.9	676	0.4	39
45-64	806	50,051	1	0.7	12	0.1	11	14	9.8	114	0.3	17
65-74	518,693	29,680,179	777	1.9	8,954	0.2	41	3,482	8.4	38,040	0.5	49
75-84	686,920	37,272,876	734	1.5	8,412	0.1	17	6,834	14.0	72,761	0.5	42
85 and older	508,579	25,845,236	640	1.5	7,041	0.1	10	8,030	18.5	82,020	0.4	36
Male	1,346,288	128,820,285	19,460	17.5	219,037	0.6	176	25,562	23.0	277,171	0.6	81
Disabled	834,493	100,347,060	18,419	29.6	207,541	0.6	181	19,424	31.2	215,070	0.6	91
5 and younger	121	12,478	3	21.4	36	0.3	31	0	0.0	0	0.0	0
6-14	542	45,229	11	29.7	129	0.2	94	2	5.4	13	0.2	7
15-20	1,481	152,363	10	3.9	104	0.3	161	71	27.6	781	0.5	80
21-44	316,486	53,352,588	12,054	45.7	135,378	0.6	179	10,562	40.1	118,052	0.7	102
45-64	327,783	35,768,840	5,888	27.7	66,755	0.6	190	6,040	28.4	68,028	0.7	90
65-74	123,177	7,507,247	374	4.4	4,269	0.5	139	1,318	15.4	14,585	0.5	57
75-84	47,538	2,602,782	61	1.5	678	0.2	47	977	24.8	9,435	0.5	44
85 and older	17,365	905,533	18	1.0	192	0.1	6	454	24.4	4,176	0.5	36
Other Eligibles	511,795	28,473,225	1,041	2.1	11,496	0.3	86	6,138	12.5	62,101	0.4	43
5 and younger	16	989	1	100.0	12	0.5	66	0	0.0	0	0.0	0
6-14	34	792	1	33.3	12	0.8	50	0	0.0	0	0.0	0
15-20	109	14,475	5	50.0	60	0.9	195	0	0.0	0	0.0	0
21-44	933	73,497	12	6.5	106	0.4	186	16	8.6	107	0.3	59
45-64	871	70,511	7	5.8	39	0.6	228	11	9.2	69	0.4	59
65-74	220,796	12,778,332	628	2.8	6,918	0.4	108	1,956	8.8	20,483	0.4	48
75-84	196,867	10,689,210	262	1.5	2,957	0.2	54	2,435	14.1	24,841	0.4	43
85 and older	92,169	4,845,419	125	1.4	1,392	0.2	28	1,720	19.0	16,601	0.4	37
Unknown	14	262	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 Florida, 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, FLORIDA, 1999

Beneficiary Characteristics	ULCER DRUGS					ANTIDEPRESSANTS					ANTIHYPERTENSIVE				
	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean Rx	Mean No. of Rx	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean Rx	Mean No. of Rx	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean Rx	Mean No. of Rx
All	131,330	40.0 %	1,461,881	\$30	0.4	115,018	35.0 %	1,250,888	0.5	\$30	115,388	35.1 %	1,264,964	0.6	\$20
Female	94,359	43.5	1,055,241	30	0.4	81,317	37.5	888,883	0.5	30	79,539	36.6	876,983	0.6	20
Disabled	38,935	47.1	441,234	30	0.4	39,547	47.9	439,056	0.5	31	29,599	35.8	330,031	0.5	20
5 and younger	4	57.1	48	11	0.2	0	0.0	0	0.0	0	5	71.4	60	0.5	7
6-14	20	64.5	215	30	0.4	0	0.0	0	0.0	0	21	67.7	252	0.4	18
15-20	35	17.5	404	30	0.4	50	25.0	516	0.4	29	28	14.0	300	0.4	23
21-44	5,951	31.5	66,705	28	0.3	10,333	54.7	112,832	0.5	34	2,579	13.7	28,411	0.5	18
45-64	14,490	48.9	163,399	32	0.4	16,774	56.6	186,232	0.5	33	10,731	36.2	118,443	0.5	20
65-74	10,540	55.7	121,144	29	0.4	7,342	38.8	83,753	0.5	27	9,274	49.0	105,160	0.6	21
75-84	5,404	53.7	61,432	30	0.4	3,396	33.7	37,755	0.5	27	4,905	48.7	55,148	0.6	21
85 and older	2,491	51.2	27,887	29	0.4	1,652	34.0	17,968	0.5	27	2,056	42.3	22,857	0.6	20
Other Eligibles	55,423	41.2	613,995	30	0.4	41,769	31.1	449,815	0.5	28	49,940	37.1	546,352	0.6	21
5 and younger	0	0.0	0	0	0.0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0	0.0	0	0.0	0	0.0	0	2	50.0	24	0.3	12
15-20	0	0.0	0	0	0.0	0	0.0	0	0.0	0	1	11.1	11	0.2	5
21-44	81	16.5	788	21	0.3	201	41.0	1,802	0.4	27	32	6.5	274	0.4	12
45-64	36	25.2	306	27	0.3	66	46.2	477	0.5	34	21	14.7	141	0.6	18
65-74	16,849	40.4	190,802	28	0.4	10,814	25.9	120,624	0.5	26	15,216	36.5	169,785	0.6	21
75-84	21,468	44.0	241,135	30	0.4	15,867	32.5	173,426	0.5	28	19,851	40.7	220,578	0.6	21
85 and older	16,989	39.1	180,964	32	0.5	14,821	34.1	153,486	0.6	29	14,817	34.1	155,539	0.6	20
Male	36,971	33.2	406,640	30	0.4	33,701	30.3	362,005	0.5	29	35,849	32.2	387,981	0.6	20
Disabled	19,456	31.2	216,265	31	0.4	22,634	36.3	246,872	0.5	30	17,082	27.4	186,078	0.5	20
5 and younger	7	50.0	83	13	0.4	0	0.0	0	0.0	0	5	35.7	60	0.3	7
6-14	20	54.1	234	34	0.4	1	2.7	11	0.5	45	17	45.9	197	0.6	20
15-20	32	12.5	351	22	0.4	55	21.4	611	0.5	36	35	13.6	363	0.5	22
21-44	6,088	23.1	68,449	30	0.4	10,530	40.0	115,861	0.5	31	3,674	13.9	40,220	0.5	18
45-64	7,535	35.4	84,380	32	0.4	7,972	37.5	88,164	0.5	30	7,215	33.9	79,348	0.6	21
65-74	3,639	42.4	41,053	30	0.4	2,178	25.4	23,927	0.5	26	4,013	46.7	44,484	0.6	21
75-84	1,517	38.4	15,722	31	0.5	1,300	32.9	12,794	0.5	30	1,551	39.3	15,988	0.6	21
85 and older	618	33.2	5,993	32	0.5	598	32.2	5,504	0.6	29	572	30.8	5,418	0.6	21
Other Eligibles	17,515	35.8	190,375	28	0.4	11,067	22.6	115,133	0.5	27	18,767	38.3	201,903	0.6	21
5 and younger	2	200.0	24	3	0.1	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	3	100.0	35	0.3	3
15-20	4	40.0	30	16	0.2	1	10.0	12	0.3	3	4	40.0	48	0.4	23
21-44	30	16.2	259	40	0.5	71	38.4	529	0.4	18	24	13.0	193	0.6	31
45-64	35	29.2	328	33	0.4	47	39.2	341	0.5	35	38	31.7	293	0.5	14
65-74	7,256	32.6	80,490	28	0.4	3,906	17.5	42,197	0.4	26	8,292	37.2	90,355	0.5	21
75-84	6,760	39.0	74,014	28	0.4	4,373	25.3	45,530	0.5	27	7,221	41.7	78,113	0.6	21
85 and older	3,428	37.8	35,230	30	0.5	2,669	29.4	26,524	0.5	29	3,185	35.1	32,866	0.6	20
Unknown	1	100.0	12	18	0.6	1	100.0	12	0.6	4	0	0.0	0	0.0	0

Table 16B

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 1999 file for Florida, 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, FLORIDA, 1999

Beneficiary Characteristics	ANALGESICS - ANTI-INFLAMMATORY					CALCIUM BLOCKERS					HEMATOPOIETIC AGENTS				
	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	122,949	37.4 %	1,399,948	0.3	\$18	75,363	22.9 %	827,360	0.6	\$30	25,729	7.8 %	281,350	0.4	\$81
Female	90,856	41.8	1,037,733	0.3	19	55,856	25.7	615,781	0.6	30	17,224	7.9	189,878	0.4	48
Disabled	40,711	49.3	465,907	0.3	19	20,363	24.6	227,028	0.6	31	7,476	9.0	84,009	0.3	73
5 and younger	0	0.0	0	0.0	0	1	14.3	12	0.1	4	9	128.6	108	0.4	21
6-14	0	0.0	0	0.0	0	17	54.8	187	0.6	26	25	80.6	270	0.3	24
15-20	23	11.5	239	0.2	12	30	15.0	343	0.6	47	51	25.5	566	0.3	36
21-44	6,654	35.2	74,861	0.2	14	1,563	8.3	17,104	0.5	30	1,886	10.0	21,215	0.3	141
45-64	15,254	51.5	172,959	0.3	21	7,119	24.0	78,354	0.6	32	2,634	8.9	29,586	0.4	74
65-74	11,347	59.9	131,782	0.3	20	6,579	34.7	74,570	0.7	32	1,497	7.9	16,990	0.3	36
75-84	5,294	52.6	61,449	0.3	20	3,459	34.3	38,721	0.7	30	866	8.6	9,663	0.3	22
85 and older	2,139	44.0	24,617	0.3	19	1,595	32.8	17,737	0.7	29	508	10.4	5,611	0.3	26
Other Eligibles	50,145	37.3	571,826	0.3	19	35,493	26.4	388,753	0.7	29	9,748	7.2	105,869	0.4	29
5 and younger	0	0.0	0	0.0	0	1	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	1	25.0	12	0.3	13	2	50.0	24	0.3	180
15-20	2	22.2	20	0.1	1	0	0.0	0	0.0	0	2	22.2	12	0.2	1
21-44	124	25.3	1,180	0.2	13	34	6.9	297	0.5	21	42	8.6	411	0.2	57
45-64	58	40.6	425	0.3	19	17	11.9	124	0.4	26	5	3.5	25	0.3	2
65-74	18,029	43.3	206,088	0.3	18	10,397	24.9	115,614	0.6	30	2,111	5.1	23,570	0.3	34
75-84	20,297	41.6	234,380	0.3	19	14,017	28.7	155,926	0.7	29	3,555	7.3	39,362	0.3	28
85 and older	11,635	26.8	129,733	0.3	19	11,027	25.4	116,780	0.7	28	4,031	9.3	42,465	0.4	26
Male	32,093	28.8	362,215	0.3	15	19,507	17.5	211,579	0.6	30	8,505	7.6	91,472	0.4	150
Disabled	17,525	28.1	197,551	0.3	14	9,556	15.3	104,117	0.6	32	5,103	8.2	55,578	0.4	224
5 and younger	0	0.0	0	0.0	0	5	35.7	60	0.4	5	10	71.4	119	0.3	80
6-14	1	2.7	9	0.1	1	22	59.5	248	0.6	26	28	75.7	303	0.4	46
15-20	32	12.5	323	0.2	11	34	13.2	355	0.6	38	32	12.5	373	0.4	47
21-44	6,074	23.1	67,946	0.2	10	1,941	7.4	21,197	0.5	32	1,944	7.4	21,429	0.4	374
45-64	6,850	32.2	77,230	0.3	16	4,111	19.3	45,105	0.6	34	1,920	9.0	21,011	0.4	187
65-74	3,269	38.1	37,728	0.3	17	2,294	26.7	25,613	0.6	32	650	7.6	7,225	0.4	32
75-84	967	24.5	10,801	0.3	18	836	21.2	8,615	0.6	28	319	8.1	3,277	0.4	49
85 and older	332	17.9	3,514	0.3	16	313	16.8	2,924	0.6	26	200	10.8	1,841	0.4	33
Other Eligibles	14,568	29.7	164,664	0.3	16	9,951	20.3	107,462	0.6	29	3,402	6.9	35,894	0.4	35
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	100.0	12	0.6	10
6-14	0	0.0	0	0.0	0	1	33.3	11	0.1	4	1	33.3	12	1.0	4
15-20	1	10.0	12	0.1	11	2	20.0	24	0.6	37	3	30.0	36	0.3	2
21-44	58	31.4	442	0.3	14	18	9.7	136	0.6	23	9	4.9	73	0.2	8
45-64	35	29.2	284	0.4	27	26	21.7	201	0.6	32	6	5.0	57	0.4	139
65-74	6,931	31.1	78,585	0.3	15	4,271	19.2	46,801	0.6	30	1,158	5.2	12,431	0.3	34
75-84	5,379	31.1	61,487	0.3	16	3,854	22.3	41,806	0.6	28	1,309	7.6	13,940	0.4	34
85 and older	2,164	23.8	23,854	0.3	18	1,779	19.6	18,483	0.7	27	915	10.1	9,333	0.4	36
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Table 16C

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 1999 file for Florida, 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, FLORIDA, 1999

Beneficiary Characteristics	ANTI-DIABETIC				ANTI-HYPERLIPIDEMIC				No. of Bene Mos			
	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	83,516	25.4 %	910,091	0.6	\$25	52,127	15.9 %	589,155	0.5	\$37	328,402	3,367,598
Female	59,843	27.6	656,171	0.6	25	37,669	17.4	426,923	0.5	38	217,110	2,250,422
Disabled	26,527	32.1	294,382	0.6	27	16,258	19.7	184,214	0.5	38	82,622	870,442
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	7	75
6-14	1	3.2	4	0.5	27	0	0.0	0	0.0	0	31	336
15-20	15	7.5	171	0.3	10	6	3.0	57	0.3	18	200	1,906
21-44	2,349	12.4	25,848	0.6	28	1,230	6.5	13,805	0.5	32	18,880	194,928
45-64	10,644	35.9	116,849	0.6	30	6,802	23.0	75,839	0.5	39	29,635	309,111
65-74	8,766	46.3	99,105	0.6	27	5,547	29.3	63,800	0.5	39	18,933	205,701
75-84	3,600	35.7	39,977	0.6	23	2,080	20.7	23,873	0.5	38	10,072	107,575
85 and older	1,152	23.7	12,428	0.6	19	593	12.2	6,840	0.5	36	4,864	50,810
Other Eligibles	33,316	24.8	361,789	0.6	23	21,411	15.9	242,709	0.5	37	134,488	1,379,980
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	4	42
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	9	60
21-44	37	7.6	301	0.6	23	14	2.9	129	0.4	21	490	3,762
45-64	23	16.1	167	0.6	29	13	9.1	113	0.5	41	143	784
65-74	11,974	28.7	132,051	0.6	25	9,648	23.1	109,062	0.5	37	41,683	434,106
75-84	13,546	27.8	148,625	0.6	23	8,953	18.4	102,398	0.5	38	48,757	514,971
85 and older	7,736	17.8	80,645	0.6	18	2,783	6.4	31,007	0.5	34	43,402	426,255
Male	23,673	21.3	253,920	0.6	24	14,458	13.0	162,262	0.5	36	111,291	1,117,164
Disabled	12,272	19.7	133,160	0.6	26	8,090	13.0	91,111	0.5	36	62,310	634,268
5 and younger	0	0.0	0	0.0	0	1	7.1	12	0.2	9	14	157
6-14	2	5.4	24	0.3	7	2	5.4	14	0.5	11	37	399
15-20	1	0.4	12	0.7	23	2	0.8	24	0.3	21	257	2,498
21-44	2,244	8.5	24,692	0.6	26	1,991	7.6	22,569	0.5	30	26,349	271,764
45-64	5,599	26.3	61,337	0.6	27	3,754	17.7	42,203	0.5	39	21,263	218,778
65-74	2,998	34.9	32,875	0.6	26	1,834	21.4	20,783	0.5	39	8,585	89,129
75-84	1,090	27.6	11,002	0.6	20	408	10.3	4,472	0.5	32	3,946	36,163
85 and older	338	18.2	3,218	0.6	19	98	5.3	1,034	0.5	35	1,859	15,380
Other Eligibles	11,401	23.3	120,760	0.6	22	6,368	13.0	71,151	0.5	36	48,981	482,896
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	29
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	10	82
21-44	21	11.4	158	0.8	45	14	7.6	112	0.6	43	185	1,061
45-64	21	17.5	149	0.4	17	23	19.2	156	0.5	39	120	707
65-74	5,395	24.2	58,082	0.6	24	3,564	16.0	39,940	0.5	36	22,271	222,491
75-84	4,341	25.1	46,050	0.6	21	2,281	13.2	25,685	0.5	36	17,316	174,079
85 and older	1,623	17.9	16,321	0.6	19	486	5.4	5,258	0.5	34	9,075	84,435
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12

Table 16D

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 1999 file for Florida, 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, FLORIDA, 1999

Beneficiary Characteristics	Rx \$ per Bene Mo	No. of Rx per Bene Mo	No. of All-Year NF Residents	Bene Mos among All-Year NF Residents
All	\$184	4.8	46,865	445,710
Age				
0-64	278	5.8	2,389	25,117
65-74	229	5.5	5,589	54,670
75-84	194	5.0	15,215	143,854
85 and older	155	4.3	23,671	222,057
Unknown	35	2.3	1	12
Gender				
Female	178	4.8	34,339	332,970
Male	201	4.8	12,526	112,740
Unknown	0	0.0	0	0
Race				
White	185	4.9	35,935	338,372
African American	175	4.3	6,653	67,393
Other/unknown	188	4.6	4,277	39,945
Basis of Eligibility				
Aged	176	4.7	38,914	370,323
Disabled	223	5.2	7,951	75,387
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 Florida, 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 20,404 beneficiaries who were in nursing facilities for part of their enrollment and their 183,602 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, FLORIDA, 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 # of Rx	Total Rx \$	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	\$18	\$16	\$0	\$2	\$17	\$76	\$17	99,401	\$5,585,090	29,855	63.7	306,925
Biologics	0.1	0.0	0.0	0.1	2	0	0	2	27	940	27	907	22,178	866	1.8	9,165
Antineoplastic Agents	0.4	0.0	0.3	0.1	58	9	45	4	44	218	155	18,160	2,513,651	4,536	9.7	43,683
Endocrine/Metabolic Drugs	0.9	0.3	0.3	0.2	22	16	4	3	10	46	13	152,101	3,851,682	16,990	36.3	171,495
Cardiovascular Agents	1.6	0.4	0.4	0.8	38	16	12	10	13	42	28	502,482	12,019,080	31,781	67.8	314,767
Respiratory Agents	0.5	0.2	0.0	0.3	16	10	1	6	20	49	15	98,590	3,026,411	18,008	38.4	184,116
Gastrointestinal Agents	0.8	0.3	0.1	0.3	43	28	7	8	23	94	65	153,132	8,758,741	19,967	42.6	202,818
Genitourinary Agents	0.4	0.2	0.0	0.2	17	12	0	4	19	57	33	33,795	1,295,515	7,385	15.8	76,810
CNS Drugs	1.2	0.6	0.2	0.4	64	48	12	5	11	78	75	343,565	18,510,714	28,778	61.4	288,955
Stimulants/Anti-obesity/Anorexia	0.5	0.0	0.1	0.4	13	0	4	9	20	24	40	1,092	25,081	190	0.4	2,000
Miscellaneous Psychological/Neurological Agents	0.6	0.6	0.0	0.0	67	67	0	1	31	109	51	19,771	2,106,148	3,109	6.6	31,265
Analgesics and Anesthetics	0.7	0.2	0.1	0.4	25	17	4	4	10	77	53	132,196	4,671,061	18,539	39.6	186,754
Neuromuscular Agents	1.0	0.2	0.3	0.4	40	17	14	9	20	75	46	127,503	5,231,254	12,610	26.9	130,057
Nutritional Products	0.6	0.0	0.2	0.4	11	0	5	6	16	21	22	90,947	1,703,650	15,422	32.9	155,123
Hematological Agents	0.7	0.1	0.3	0.3	34	21	7	6	17	204	24	93,264	4,256,555	12,632	27.0	126,521
Topical Products	0.5	0.2	0.1	0.2	16	8	5	2	14	45	43	144,935	4,834,194	28,627	61.1	300,994
Miscellaneous Products	0.2	0.0	0.0	0.2	5	1	1	3	20	86	175	5,399	147,163	3,029	6.5	30,424
Unknown Therapeutic Category	0.4	0.0	0.0	0.0	14	0	0	0	0	0	0	105,895	3,296,447	22,885	48.8	237,008
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.	2,123,135	81,854,615	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 1999 file for Florida, 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 20,404 beneficiaries who were in nursing facilities for part of their enrollment and their 183,602 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 Florida, 4.8 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, FLORIDA, 1999

Beneficiary Characteristics	No. of Benes					No. of Bene Mos					
	All	Aged	Disabled	Adults	Children	All	Aged	Disabled	Adults	Children	Unknown
All	346,761	189,067	156,509	1,161	24	3,650,342	1,961,955	1,679,750	8,433	204	0
Age											
5 and younger	22	0	21	0	1	245	0	233	0	12	0
6-14	75	0	68	0	7	813	0	742	0	71	0
15-20	542	0	523	7	12	5,810	0	5,657	58	95	0
21-44	50,436	0	49,695	739	2	540,030	0	534,038	5,975	17	0
45-64	54,931	8	54,639	282	2	588,759	65	586,829	1,856	9	0
65-74	96,417	66,448	29,861	108	0	1,030,985	701,704	328,840	441	0	0
75-84	83,114	68,445	14,645	24	0	878,281	725,746	152,435	100	0	0
85 and older	61,223	54,165	7,057	1	0	605,407	534,428	70,976	3	0	0
Unknown	1	1	0	0	0	12	12	0	0	0	0
Gender											
Female	229,295	138,572	89,928	786	9	2,438,532	1,450,851	981,608	5,995	78	0
Male	117,466	50,495	66,581	375	15	1,211,810	511,104	698,142	2,438	126	0
Unknown	0	0	0	0	0	0	0	0	0	0	0
Race											
White	181,357	96,208	84,493	645	11	1,868,595	965,831	897,929	4,734	101	0
African American	69,368	30,606	38,405	347	10	745,948	324,219	419,153	2,502	74	0
Other/unknown	96,036	62,253	33,611	169	3	1,035,799	671,905	362,668	1,197	29	0
Use of Nursing Facilities											
All year	46,894	38,926	7,968	0	0	446,180	370,520	75,660	0	0	0
Part year	20,548	15,153	5,394	1	0	187,755	136,503	51,247	5	0	0
None	279,319	134,988	143,147	1,160	24	3,016,407	1,454,932	1,552,843	8,428	204	0
Maintenance Assistance Status											
Cash	199,982	95,503	103,741	736	2	2,220,227	1,064,972	1,150,424	4,808	23	0
Medically needy	834	3	793	36	2	7,440	19	7,102	302	17	0
Poverty related	93,288	54,850	38,228	202	8	947,664	557,005	389,115	1,480	64	0
Other/unknown	52,657	38,711	13,747	187	12	475,011	339,959	133,109	1,843	100	0
Dual Status^c											
Full dual, all year	341,687	186,987	153,548	1,130	22	3,599,294	1,941,277	1,649,678	8,156	183	0
Full dual, part year	5,074	2,080	2,961	31	2	51,048	20,678	30,072	277	21	0
Managed Care Status											
FFS all year	313,792	176,458	136,502	812	20	3,291,162	1,825,644	1,459,727	5,615	176	0
FFS part year, with Rx claims	10,024	3,807	6,070	144	3	108,612	40,836	66,371	1,385	20	0
FFS part year, no Rx claims	4,586	2,127	2,360	98	1	44,460	20,169	23,562	721	8	0
MC all year, with Rx claims	269	72	194	3	0	3,166	861	2,280	25	0	0
MC all year, no Rx claims	18,090	6,603	11,383	104	0	202,942	74,445	127,810	687	0	0

Source: Data for this table are from the MAX 1999 file for Florida, 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, FLORIDA, 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	346,761	3,650,342	328,402	3,367,598	18,359	282,744
FFS all year	313,792	3,291,162	313,792	3,291,162	0	0
FFS part year, with Rx claims	10,024	108,612	10,024	58,551	0	50,061
FFS part year, with no Rx claims	4,586	44,460	4,586	17,885	0	26,575
MC all year, with Rx claims	269	3,166	0	0	269	3,166
MC all year, with no Rx claims	18,090	202,942	0	0	18,090	202,942

Source: Data for this table are from the MAX 1999 file for Florida, 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}
 FLORIDA, 1999

Total Number of Dual Eligible Beneficiaries	328,402
Total Pharmacy Reimbursement for Dual Eligible Beneficiaries	\$616,576,321
Mean Pharmacy Reimbursement per Dual Eligible Beneficiary	\$1,878

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries 18.4 %	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement 0.0 %
\$0	60,553	19.7	\$0	
1-500	64,811	12.7	14,011,793	2.3
501-1,000	41,791	10.4	30,997,940	5.0
1,001-1,500	34,175	8.6	42,473,557	6.9
1,501-2,000	28,400	6.8	49,507,192	8.0
2,001-2,500	22,476	5.4	50,360,468	8.2
2,501-3,000	17,830	4.1	48,851,489	7.9
3,001-3,500	13,588	3.0	44,018,614	7.1
3,501-4,000	9,872	2.2	36,889,864	6.0
4,001-4,500	7,234	1.6	30,672,245	5.0
4,501-5,000	5,332	1.2	25,261,649	4.1
5,001-5,500	4,099	1.0	21,475,155	3.5
5,501-6,000	3,122	0.7	17,903,881	2.9
6,001-6,500	2,401	0.5	14,980,101	2.4
6,501-7,000	1,758	0.4	11,857,473	1.9
7,001-7,500	1,379	0.3	9,990,397	1.6
7,501-8,000	1,087	0.3	8,417,741	1.4
8,001-8,500	895	0.2	7,375,598	1.2
8,501-9,000	728	0.2	6,362,488	1.0
9,001-9,500	625	0.2	5,774,836	0.9
9,501-10,000	506	0.2	4,933,812	0.8
10,001+	5,740	1.7	134,460,028	21.8

Source: Data for this table are from the MAX 1999 file for Florida, 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}
 FLORIDA, 1999

Total Number of Disabled Dual Eligible Beneficiaries, Age < 65 96,673
 Total Pharmacy Reimbursement for Disabled Dual Eligible Beneficiaries, Age < 65 \$281,876,279
 Mean Pharmacy Reimbursement per Disabled Dual Eligible Beneficiary, Age < 65 \$2,916

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age < 65	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	17,074	17.7 %	0	0.0 %
1-500	20,604	21.3	4,161,249	1.5
501-1,000	10,378	10.7	7,663,200	2.7
1,001-1,500	7,907	8.2	9,834,813	3.5
1,501-2,000	6,481	6.7	11,306,031	4.0
2,001-2,500	5,266	5.4	11,812,905	4.2
2,501-3,000	4,329	4.5	11,868,404	4.2
3,001-3,500	3,614	3.7	11,721,448	4.2
3,501-4,000	2,844	2.9	10,644,660	3.8
4,001-4,500	2,449	2.5	10,395,254	3.7
4,501-5,000	1,996	2.1	9,460,157	3.4
5,001-5,500	1,679	1.7	8,799,668	3.1
5,501-6,000	1,438	1.5	8,256,772	2.9
6,001-6,500	1,216	1.3	7,596,334	2.7
6,501-7,000	985	1.0	6,644,268	2.4
7,001-7,500	841	0.9	6,092,448	2.2
7,501-8,000	661	0.7	5,118,558	1.8
8,001-8,500	595	0.6	4,903,149	1.7
8,501-9,000	485	0.5	4,238,285	1.5
9,001-9,500	439	0.5	4,058,271	1.4
9,501-10,000	383	0.4	3,735,795	1.3
10,001+	5,009	5.2	123,564,610	43.8

Source: Data for this table are from the MAX 1999 file for Florida, 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}
 FLORIDA, 1999

Total Number of Dual Eligible Beneficiaries, Age 65-74 91,472
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65-74 \$131,996,188
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65-74 \$1,443

Annual Pharmacy Reimbursement per Beneficiary \$0	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 65-74 23.7 %	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
1-500	21,673		0	0.0
501-1,000	16,906	18.5	3,641,936	2.8
1,001-1,500	10,824	11.8	8,046,568	6.1
1,501-2,000	9,161	10.0	11,379,931	8.6
2,001-2,500	7,670	8.4	13,365,690	10.1
2,501-3,000	6,147	6.7	13,778,898	10.4
3,001-3,500	4,981	5.4	13,646,878	10.3
3,501-4,000	3,731	4.1	12,092,615	9.2
4,001-4,500	2,773	3.0	10,361,364	7.8
4,501-5,000	1,967	2.2	8,339,912	6.3
5,001-5,500	1,426	1.6	6,754,358	5.1
5,501-6,000	1,068	1.2	5,595,150	4.2
6,001-6,500	773	0.8	4,427,720	3.4
6,501-7,000	577	0.6	3,596,390	2.7
7,001-7,500	392	0.4	2,643,159	2.0
7,501-8,000	273	0.3	1,978,177	1.5
8,001-8,500	209	0.2	1,617,532	1.2
8,501-9,000	173	0.2	1,427,355	1.1
9,001-9,500	137	0.1	1,196,626	0.9
9,501-10,000	103	0.1	951,047	0.7
10,001+	62	0.1	603,828	0.5
	446	0.5	6,551,054	5.0

Source: Data for this table are from the MAX 1999 file for Florida, 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}
 FLORIDA, 1999

Total Number of Dual Eligible Beneficiaries, Age 75-84 80,091
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 75-84 \$121,378,848
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 75-84 \$1,516

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 75-84	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	14,069	17.6 %	0	0.0 %
1-500	13,862	17.3	3,155,369	2.6
501-1,000	10,898	13.6	8,119,386	6.7
1,001-1,500	9,148	11.4	11,383,074	9.4
1,501-2,000	8,020	10.0	13,982,131	11.5
2,001-2,500	6,435	8.0	14,405,698	11.9
2,501-3,000	5,097	6.4	13,969,282	11.5
3,001-3,500	3,832	4.8	12,404,896	10.2
3,501-4,000	2,632	3.3	9,830,517	8.1
4,001-4,500	1,830	2.3	7,749,967	6.4
4,501-5,000	1,256	1.6	5,947,778	4.9
5,001-5,500	890	1.1	4,658,771	3.8
5,501-6,000	607	0.8	3,475,638	2.9
6,001-6,500	451	0.6	2,809,473	2.3
6,501-7,000	264	0.3	1,781,479	1.5
7,001-7,500	196	0.2	1,420,368	1.2
7,501-8,000	151	0.2	1,170,699	1.0
8,001-8,500	94	0.1	773,424	0.6
8,501-9,000	72	0.1	630,615	0.5
9,001-9,500	54	0.1	498,141	0.4
9,501-10,000	43	0.1	418,428	0.3
10,001+	190	0.2	2,793,714	2.3

Source: Data for this table are from the MAX 1999 file for Florida, 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 1D
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 85 AND OLDER^{a, b}
 FLORIDA, 1999

Total Number of Dual Eligible Beneficiaries, Age 85+ 59,200
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 85+ \$80,342,805
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 85+ \$1,357

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 85+	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	7,459	12.6 %	0	0.0 %
1-500	13,067	22.1	2,990,967	3.7
501-1,000	9,604	16.2	7,108,374	8.8
1,001-1,500	7,892	13.3	9,792,636	12.2
1,501-2,000	6,190	10.5	10,786,629	13.4
2,001-2,500	4,603	7.8	10,306,586	12.8
2,501-3,000	3,402	5.7	9,309,378	11.6
3,001-3,500	2,398	4.1	7,757,661	9.7
3,501-4,000	1,614	2.7	6,018,982	7.5
4,001-4,500	982	1.7	4,161,771	5.2
4,501-5,000	646	1.1	3,062,005	3.8
5,001-5,500	458	0.8	2,400,492	3.0
5,501-6,000	297	0.5	1,703,284	2.1
6,001-6,500	152	0.3	946,944	1.2
6,501-7,000	115	0.2	774,913	1.0
7,001-7,500	65	0.1	470,710	0.6
7,501-8,000	66	0.1	510,952	0.6
8,001-8,500	32	0.1	263,632	0.3
8,501-9,000	32	0.1	279,358	0.3
9,001-9,500	28	0.0	257,893	0.3
9,501-10,000	18	0.0	175,761	0.2
10,001+	80	0.1	1,263,877	1.6

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