

**STATISTICAL COMPENDIUM:  
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 1999  
IOWA**

**LIST OF TABLES**

**OVERVIEW OF STUDY POPULATION**

TABLE 1. OVERVIEW OF BENEFICIARY SELECTION CRITERIA FOR STUDY POPULATION

**FOR ALL MEDICAID BENEFICIARIES**

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

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

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

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

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

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

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

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

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

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

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

**FOR DUAL ELIGIBLE BENEFICIARIES**

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

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

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

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

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

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

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

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

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

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

TABLE 11

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

Beneficiary Characteristics	No. of Benes						No. of Bene Mos					
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown
<b>All</b>	<b>55,993</b>	<b>32,896</b>	<b>22,778</b>	<b>309</b>	<b>10</b>	<b>0</b>	<b>588,008</b>	<b>334,392</b>	<b>251,644</b>	<b>1,921</b>	<b>51</b>	<b>0</b>
<b>Age</b>												
5 and younger	4	0	4	0	0	0	30	0	30	0	0	0
6-14	12	0	11	0	1	0	127	0	121	0	6	0
15-20	104	0	102	1	1	0	1,174	0	1,161	1	12	0
21-44	10,722	0	10,493	223	6	0	119,329	0	117,924	1,379	26	0
45-64	10,060	0	9,989	71	0	0	110,917	0	110,475	442	0	0
65-74	9,437	8,206	1,219	12	0	0	99,729	87,217	12,437	75	0	0
75-84	12,094	11,425	667	1	1	0	123,659	116,810	6,831	12	6	0
85 and older	13,559	13,265	292	1	1	0	133,038	130,365	2,660	12	1	0
Unknown	1	0	1	0	0	5	0	0	5	0	0	0
<b>Gender</b>												
Female	36,618	24,641	11,820	153	4	0	385,819	253,937	130,837	1,016	29	0
Male	19,375	8,255	10,958	156	6	0	202,189	80,455	120,807	905	22	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
<b>Race</b>												
White	52,499	31,252	20,968	271	8	0	552,133	317,740	232,675	1,684	34	0
African American	1,590	531	1,032	26	1	0	17,139	5,865	11,105	157	12	0
Other/unknown	1,904	1,113	778	12	1	0	18,736	10,787	7,864	80	5	0
<b>Use of Nursing Facilities</b>												
All year	12,936	12,192	744	0	0	0	139,826	131,288	8,538	0	0	0
Part year	6,943	6,287	655	0	1	0	59,095	52,712	6,377	0	6	0
None	36,114	14,417	21,379	309	9	0	389,087	150,392	236,729	1,921	45	0
<b>Maintenance Assistance Status</b>												
Cash	20,290	6,779	13,414	95	2	0	228,651	76,857	151,259	533	2	0
Medically needy	6,296	3,387	2,761	146	2	0	62,298	33,422	27,960	913	3	0
Poverty-related	2,625	1,069	1,519	36	1	0	27,349	11,463	15,659	221	6	0
Other/unknown	26,782	21,661	5,084	32	5	0	269,710	212,650	56,766	254	40	0
<b>Dual Medicare Status<sup>c</sup></b>												
Full dual, all year	51,444	30,677	20,469	288	10	0	539,613	310,498	227,370	1,694	51	0
Full dual, part year	4,549	2,219	2,309	21	0	0	48,395	23,894	24,274	227	0	0
<b>Managed Care Status</b>												
FFS all year	55,942	32,896	22,751	285	10	0	587,688	334,392	251,445	1,800	51	0
FFS part year, with Rx claims	47	0	26	21	0	0	307	0	195	112	0	0
FFS part year, no Rx claims	4	0	1	3	0	0	13	0	4	9	0	0

Source: Data for this table are from the MAX 1999 file for Iowa, 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<sup>a, b</sup>  
 DUAL ELIGIBLE BENEFICIARIES, IOWA, 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 Benes
All	89.6 %	44.4	\$1,737	\$39	\$12,226	14.2 %	\$39	55,993
<b>Age</b>								
5 and younger	75.0	37.0	2,680	72	9,766	27.4	4	4
6-14	100.0	75.9	7,678	101	19,343	39.7	46	12
15-20	84.6	20.0	1,444	72	13,948	10.4	14	104
21-44	84.6	32.0	1,961	61	11,648	16.8	14	10,722
45-64	88.4	47.8	2,232	47	12,854	17.4	37	10,060
65-74	86.1	45.8	1,652	36	8,754	18.9	46	9,437
75-84	91.5	49.2	1,623	33	11,824	13.7	49	12,094
85 and older	95.0	46.6	1,349	29	14,971	9.0	47	13,559
Unknown	100.0	30.0	569	19	11,699	4.9	44	1
<b>Basis of Eligibility</b>								
Aged	92.1	48.1	1,549	32	12,569	12.3	49	32,896
Disabled	86.2	39.4	2,020	51	11,859	17.0	25	22,778
Adults	65.7	16.1	805	50	2,879	28.0	12	309
Children	70.0	16.0	929	58	5,800	16.0	2	10
Unknown	0.0	0.0	0	0	0	0.0	0	0
<b>Gender</b>								
Female	92.9	48.9	1,770	36	11,914	14.9	44	36,618
Male	83.2	35.9	1,673	47	12,814	13.1	28	19,375
Unknown	0.0	0.0	0	0	0	0.0	0	0
<b>Race</b>								
White	90.0	45.2	1,769	39	12,558	14.1	39	52,499
African American	83.0	33.8	1,344	40	7,814	17.2	35	1,590
Other/unknown	83.0	29.9	1,173	39	6,751	17.4	25	1,904
<b>Use of Nursing Facilities</b>								
Entire year	95.6	58.9	1,884	32	22,851	8.2	71	12,936
Part year	95.4	47.3	1,571	33	13,063	12.0	46	6,943
None	86.3	38.6	1,716	44	8,258	20.8	26	36,114
<b>Maintenance Assistance Status</b>								
Cash	88.6	41.3	1,850	45	5,418	34.1	26	20,290
Medically needy	88.0	39.7	1,841	46	3,708	49.6	28	6,296
Poverty related	69.1	11.0	422	38	1,641	25.7	7	2,625
Other/unknown	92.6	51.1	1,756	34	20,422	8.6	54	26,782

Source: Data for this table are from the MAX 1999 file for Iowa, 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<sup>a,b</sup>  
 DUAL ELIGIBLE BENEFICIARIES, IOWA, 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
<b>All</b>	<b>4.2</b>	<b>\$165</b>	<b>14.2 %</b>	<b>10.4 %</b>	<b>17.5 %</b>	<b>11.1 %</b>	<b>29.9 %</b>	<b>24.9 %</b>	<b>6.1 %</b>	<b>\$1,164</b>	<b>55,993</b>	<b>588,008</b>
<b>Age</b>												
5 and younger	4.9	357	27.4	25.0	0.0	0.0	25.0	50.0	0.0	1,302	4	30
6-14	7.2	726	39.7	0.0	0.0	0.0	25.0	66.7	8.3	1,828	12	127
15-20	1.8	128	10.4	15.4	46.2	16.3	15.4	5.8	1.0	1,236	104	1,174
21-44	2.9	176	16.8	15.4	29.9	13.1	24.9	13.7	2.9	1,047	10,722	119,329
45-64	4.3	202	17.4	11.6	18.1	10.8	27.9	24.5	7.0	1,166	10,060	110,917
65-74	4.3	156	18.9	13.9	16.8	10.4	27.1	24.5	7.4	828	9,437	99,729
75-84	4.8	159	13.7	8.5	12.6	10.3	31.4	29.4	7.8	1,156	12,094	123,659
85 and older	4.8	138	9.0	5.0	11.9	11.0	36.0	30.5	5.6	1,526	13,559	133,038
Unknown	6.0	114	4.9	0.0	0.0	0.0	0.0	100.0	0.0	2,340	1	5
<b>Basis of Eligibility</b>												
Aged	4.7	152	12.3	7.9	13.0	10.5	32.3	29.2	7.0	1,237	32,896	334,392
Disabled	3.6	183	17.0	13.8	23.9	12.1	26.5	18.9	4.8	1,073	22,778	251,644
Adults	2.6	130	28.0	34.3	26.5	9.4	18.1	8.1	3.6	463	309	1,921
Children	3.1	182	16.0	30.0	30.0	10.0	10.0	10.0	10.0	1,137	10	51
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	4.6	168	14.9	7.1	15.4	11.2	31.5	27.6	7.1	1,131	36,618	385,819
Male	3.4	160	13.1	16.8	21.6	11.0	26.8	19.7	4.2	1,228	19,375	202,189
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	168	14.1	10.0	17.0	11.1	30.2	25.4	6.3	1,194	52,499	552,133
African American	3.1	125	17.2	17.0	25.8	10.8	25.7	17.6	3.0	725	1,590	17,139
Other/unknown	3.0	119	17.4	17.0	25.3	13.0	24.7	16.1	3.8	686	1,904	18,736
<b>Use of Nursing Facilities</b>												
Entire year	5.4	174	8.2	4.4	8.3	9.3	33.4	34.8	9.8	2,114	12,936	139,826
Part year	5.6	185	12.0	4.6	9.1	9.2	33.7	34.6	8.8	1,535	6,943	59,095
None	3.6	159	20.8	13.7	22.4	12.1	27.9	19.5	4.3	767	36,114	389,087
<b>Maintenance Assistance Status</b>												
Cash	3.7	164	34.1	11.4	23.2	12.4	28.3	20.0	4.7	481	20,290	228,651
Medically needy	4.0	186	49.6	12.0	16.8	13.1	33.0	20.9	4.3	375	6,296	62,298
Poverty related	1.1	41	25.7	30.9	44.4	10.1	11.7	2.8	0.2	158	2,625	27,349
Other/unknown	5.1	174	8.6	7.4	10.7	9.8	32.1	31.7	8.3	2,028	26,782	269,710

Source: Data for this table are from the MAX 1999 file for Iowa, 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<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, IOWA, 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>4.2</b>	<b>\$165</b>	<b>\$39</b>	<b>1.3</b>	<b>\$93</b>	<b>\$72</b>	<b>0.7</b>	<b>\$33</b>	<b>\$45</b>	<b>2.0</b>	<b>\$33</b>	<b>\$17</b>
<b>Age</b>												
5 and younger	4.9	357	72	1.7	244	141	1.4	84	62	1.4	18	13
6-14	7.2	726	101	2.3	531	235	1.5	123	80	3.0	50	17
15-20	1.8	128	72	0.7	82	124	0.4	33	94	0.7	11	16
21-44	2.9	176	61	1.0	110	109	0.5	35	77	1.3	26	21
45-64	4.3	202	47	1.5	121	82	0.6	38	59	2.0	37	19
65-74	4.3	156	36	1.4	88	63	0.7	29	41	2.0	32	16
75-84	4.8	159	33	1.4	83	59	0.9	33	37	2.2	35	16
85 and older	4.8	138	29	1.2	65	56	1.0	30	32	2.3	34	15
Unknown	6.0	114	19	0.2	12	60	1.0	17	17	4.6	77	17
<b>Basis of Eligibility</b>												
Aged	4.7	152	32	1.3	79	59	0.9	31	35	2.2	35	16
Disabled	3.6	183	51	1.2	111	91	0.6	35	64	1.6	31	19
Adults	2.6	130	50	0.8	77	94	0.3	25	78	1.3	23	17
Children	3.1	182	58	0.8	74	90	0.2	48	246	1.6	40	24
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Gender</b>												
Female	4.6	168	36	1.4	93	66	0.8	33	41	2.2	35	16
Male	3.4	160	47	1.0	92	88	0.6	33	54	1.6	29	19
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Race</b>												
White	4.3	168	39	1.3	94	72	0.8	34	45	2.0	34	17
African American	3.1	125	40	1.0	74	75	0.4	23	51	1.5	23	15
Other/unknown	3.0	119	39	1.0	71	69	0.5	22	45	1.4	22	16
<b>Use of Nursing Facilities</b>												
Entire year	5.4	174	32	1.4	88	62	1.0	37	35	2.6	41	16
Part year	5.6	185	33	1.6	99	62	1.0	36	35	2.6	41	16
None	3.6	159	44	1.2	93	79	0.6	31	53	1.6	29	18
<b>Maintenance Assistance Status</b>												
Cash	3.7	164	45	1.2	97	80	0.6	32	56	1.7	30	18
Medically needy	4.0	186	46	1.4	109	80	0.7	38	54	1.8	34	19
Poverty related	1.1	41	38	0.4	25	69	0.2	8	45	0.5	6	13
Other/unknown	5.1	174	34	1.4	92	65	0.9	35	37	2.4	38	16

Source: Data for this table are from the MAX 1999 file for Iowa, 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 Iowa, 5.3 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).

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, IOWA, 1999

Therapeutic Category	No. of Rx per Bene Mo among Users			\$ per Bene Mo among Users			\$ per Rx			Users							
	Total	Patented Brand-Name	Off-Patent Brand-Name	Total	Patented Brand-Name	Off-Patent Brand-Name	Total	Patented Brand-Name	Off-Patent Brand-Name	Total No. of Rx	Total Rx \$	No. Dual Benes	As % of Dual Benes	No. of Bene Mos			
		Generic	Generic		Generic	Generic		Generic	Generic								
Anti-infective Agents	0.3	0.2	0.0	0.2	\$15	\$13	\$0	\$2	\$45	\$79	\$43	\$12	120,970	\$5,463,859	32,574	58.2 %	357,166
Biologics	0.1	0.1	0.0	0.0	20	1	0	18	186	15	2,491	535	2,756	512,199	2,279	4.1	26,089
Antineoplastic Agents	0.6	0.3	0.1	0.2	82	62	10	10	139	232	110	43	7,167	997,867	1,149	2.1	12,138
Endocrine/Metabolic Drugs	1.0	0.4	0.3	0.3	25	18	4	4	27	44	16	13	217,250	5,795,573	21,061	37.6	227,804
Cardiovascular Agents	1.7	0.4	0.4	0.8	44	20	14	10	26	46	34	12	574,342	14,990,531	32,108	57.3	341,115
Respiratory Agents	0.7	0.3	0.0	0.4	25	17	1	8	34	53	29	20	158,031	5,450,082	19,689	35.2	216,750
Gastrointestinal Agents	0.7	0.2	0.1	0.4	32	17	5	10	45	90	63	22	155,473	6,969,427	20,031	35.8	216,968
Genitourinary Agents	0.5	0.2	0.0	0.2	17	13	0	4	37	54	34	19	41,867	1,532,303	8,070	14.4	88,680
CNS Drugs	1.4	0.5	0.2	0.6	87	53	21	12	63	99	97	20	426,254	26,772,729	28,774	51.4	309,408
Stimulants/Anti-obesity/Anorexia	0.6	0.1	0.2	0.4	27	4	11	12	46	64	67	33	2,542	116,012	384	0.7	4,227
Miscellaneous Psychological/Neurological Agents	0.7	0.5	0.0	0.1	69	66	0	4	100	121	57	24	9,214	921,624	1,282	2.3	13,299
Analgesics and Anesthetics	0.7	0.1	0.0	0.5	23	12	3	8	32	85	65	15	193,091	6,187,593	24,735	44.2	267,336
Neuromuscular Agents	1.1	0.4	0.2	0.5	54	34	10	10	51	91	45	21	160,953	8,186,461	13,721	24.5	151,176
Nutritional Products	0.7	0.0	0.3	0.4	14	0	7	6	20	17	27	15	84,345	1,674,121	11,310	20.2	118,875
Hematological Agents	0.8	0.1	0.5	0.3	32	13	12	6	40	207	27	22	71,064	2,822,852	8,356	14.9	88,197
Topical Products	0.4	0.2	0.1	0.2	13	7	3	3	30	46	36	14	107,087	3,209,581	22,653	40.5	251,626
Miscellaneous Products	0.4	0.1	0.1	0.2	73	44	25	5	187	342	252	30	8,638	1,616,497	1,980	3.5	22,021
Unknown Therapeutic Category	0.6	0.0	0.0	0.0	15	0	0	0	28	0	0	0	144,860	4,021,225	23,745	42.4	260,026
<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.	2,485,904	97,240,536	n.a.	n.a.	n.a.

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

- a. Table 15 includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 1999. A beneficiary who used drugs from two or more categories was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
- c. For information about these therapeutic categories, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](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 Iowa, 5.3 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 16

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP<sup>a, b, c</sup>  
DUAL ELIGIBLE BENEFICIARIES, IOWA, 1999

Top 10 Drug Groups	Users			Among Users		
	Total Medicaid Rx \$	No.	As % of Dual Benes	No. of Bene Mos	No. of Rx per Bene Mo	Rx \$ per Bene Mo
ANTIPSYCHOTICS	\$13,737,140	14,541	26.0 %	160,024	0.8	\$105
ANTIDEPRESSANTS	9,565,122	24,627	44.0	267,252	0.7	52
ANTICONVULSANT	6,272,023	10,579	18.9	118,009	0.9	58
ULCER DRUGS	5,421,401	19,523	34.9	213,899	0.5	52
ANTIHYPERTENSIVE	4,224,459	16,321	29.1	175,057	0.7	34
ANTIDIABETIC	4,153,134	13,247	23.7	142,964	0.8	39
ANTIASTHMATIC	3,882,631	17,751	31.7	192,708	0.5	38
ANALGESICS - Narcotic	3,751,238	24,208	43.2	261,112	0.4	33
CALCIUM BLOCKERS	3,410,597	9,644	17.2	103,457	0.7	44
ANTIANGIETY AGENTS	2,922,495	14,230	25.4	154,790	0.6	32

Source: Data for this table are from the MAX 1999 file for Iowa, 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](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, IOWA, 1999

Beneficiary Characteristics	All Top 10 Drug Groups				ANTIPSYCHOTICS				ANTIDEPRESSANTS				
	No. of Rx	Rx \$	No. of Users	Mean No. of Rx	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>1,141,097</b>	<b>\$57,340,240</b>	<b>14,541</b>	<b>0.8</b>	<b>26.0 %</b>	<b>160,024</b>	<b>0.8</b>	<b>\$86</b>	<b>24,627</b>	<b>44.0 %</b>	<b>267,252</b>	<b>0.7</b>	<b>\$36</b>
<b>Female</b>													
<b>Disabled</b>													
5 and younger	787,952	36,970,323	8,642	0.8	23.6	94,599	0.8	72	17,695	48.3	192,644	0.7	35
6-14	272,020	15,995,910	3,797	0.9	32.1	43,605	0.9	101	6,998	59.2	79,686	0.7	40
15-20	2	18	0	0.0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	70	1,929	0	0.0	0.0	0	0.0	0	1	50.0	12	0.4	3
45-64	376	24,131	5	0.3	10.4	60	0.3	48	13	27.1	129	0.4	26
65-74	94,138	6,336,148	1,752	0.9	37.6	20,223	0.9	109	2,867	61.5	32,897	0.6	42
75-84	152,470	8,600,386	1,852	0.9	33.2	21,380	0.9	98	3,698	66.3	42,157	0.7	39
85 and older	13,251	568,649	92	0.8	11.7	983	0.8	61	226	28.7	2,470	0.6	29
<b>Other Eligibles</b>													
5 and younger	8,105	323,735	59	0.6	11.8	643	0.6	31	133	26.7	1,449	0.6	27
6-14	3,608	140,914	37	0.7	15.1	316	0.7	40	60	24.5	572	0.6	31
15-20	515,926	20,974,360	4,845	0.6	19.5	50,994	0.6	47	10,697	43.1	112,958	0.7	32
21-44	0	0	0	0.0	0.0	0	0.0	0	0	0.0	0	0.0	0
45-64	0	0	0	0.0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	4	166	0	0.0	0.0	0	0.0	0	1	50.0	12	0.2	12
75-84	1,000	64,681	12	0.9	9.6	125	0.9	160	54	43.2	469	0.5	29
85 and older	238	21,369	6	0.9	28.6	46	0.9	281	11	52.4	67	0.5	30
<b>Male</b>													
<b>Disabled</b>													
5 and younger	134,587	5,952,304	1,154	0.8	21.1	12,716	0.8	66	2,507	45.9	27,612	0.7	33
6-14	187,644	7,717,739	1,706	0.7	20.5	18,207	0.7	49	3,734	44.9	39,629	0.7	32
15-20	192,453	7,218,101	1,967	0.6	18.1	19,900	0.6	31	4,390	40.4	45,169	0.7	32
21-44	353,145	20,369,917	5,899	0.9	30.4	65,425	0.9	106	6,932	35.8	74,608	0.7	37
45-64	199,577	13,962,158	3,987	1.0	36.4	45,861	1.0	132	3,973	36.3	45,027	0.7	39
65-74	20	216	0	0.0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	237	9,909	0	0.0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	389	26,095	12	0.7	22.2	144	0.7	90	9	16.7	108	0.5	42
<b>Other Eligibles</b>													
5 and younger	96,726	7,618,830	2,294	1.0	39.3	26,430	1.0	140	2,192	37.6	25,180	0.7	41
6-14	93,883	5,931,500	1,607	1.0	36.4	18,531	1.0	124	1,638	37.1	18,407	0.7	38
15-20	5,602	256,265	45	0.6	10.4	479	0.6	64	90	20.8	938	0.6	34
21-44	2,243	98,882	19	0.7	11.3	203	0.7	56	32	19.0	301	0.5	21
45-64	477	20,461	10	0.4	21.3	74	0.4	17	12	25.5	93	0.5	34
65-74	153,568	6,407,759	1,912	0.7	22.7	19,564	0.7	47	2,959	35.2	29,581	0.7	35
75-84	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
<b>Unknown</b>													
5 and younger	703	35,299	10	0.7	9.6	87	0.7	69	33	31.7	277	0.4	35
6-14	408	26,548	9	1.1	18.0	85	1.1	149	12	24.0	113	0.7	48
15-20	52,388	2,327,067	575	0.8	20.9	6,270	0.8	64	835	30.3	8,923	0.7	32
21-44	59,705	2,458,195	747	0.7	24.0	7,536	0.7	43	1,200	38.5	11,826	0.7	36
45-64	40,364	1,560,650	571	0.6	23.9	5,586	0.6	32	879	36.8	8,442	0.7	35
65-74	6	53	0	0.0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84													
85 and older													

Source: Data for this table are from the MAX 1999 file for Iowa, 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](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, IOWA, 1999

Beneficiary Characteristics	ANTICONVULSANT					ULCER DRUGS					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>10,579</b>	<b>18.9 %</b>	<b>118,009</b>	<b>0.9</b>	<b>\$53</b>	<b>19,523</b>	<b>34.9 %</b>	<b>213,899</b>	<b>0.5</b>	<b>\$25</b>	<b>16,321</b>	<b>29.1 %</b>	<b>175,057</b>	<b>0.7</b>	<b>\$24</b>
<b>Female</b>	6,282	17.2	69,954	0.9	49	14,052	38.4	154,715	0.5	25	11,574	31.6	124,643	0.7	24
<b>Disabled</b>	3,589	30.4	41,132	0.9	60	4,240	35.9	48,547	0.4	25	2,437	20.6	27,395	0.7	23
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	0.8	18	1	50.0	12	0.8	8	4	200.0	48	0.8	17
15-20	9	18.8	94	1.3	105	6	12.5	72	0.3	16	9	18.8	108	0.5	21
21-44	1,606	34.5	18,473	0.9	65	1,321	28.3	15,174	0.4	24	438	9.4	5,042	0.6	21
45-64	1,829	32.8	21,013	0.9	58	2,372	42.5	27,359	0.4	26	1,431	25.7	16,142	0.7	23
65-74	95	12.1	1,017	0.8	33	251	31.9	2,811	0.4	23	279	35.5	3,089	0.7	24
75-84	40	8.0	436	0.8	25	194	38.9	2,128	0.4	24	193	38.7	2,095	0.7	23
85 and older	9	3.7	87	0.7	15	95	38.8	991	0.5	23	83	33.9	871	0.7	23
<b>Other Eligibles</b>	2,693	10.9	28,822	0.9	33	9,812	39.6	106,168	0.5	25	9,136	36.8	97,243	0.7	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	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	18	14.4	144	0.5	40	15	12.0	143	0.3	33	6	4.8	66	0.5	18
45-64	6	28.6	54	0.3	31	9	42.9	80	0.4	12	4	19.0	38	0.4	12
65-74	902	16.5	10,058	0.9	41	2,311	42.3	25,955	0.4	25	2,196	40.2	24,321	0.7	23
75-84	1,031	12.4	11,029	0.9	31	3,390	40.8	36,985	0.5	25	3,405	41.0	36,675	0.7	24
85 and older	736	6.8	7,537	0.9	26	4,087	37.6	43,005	0.6	26	3,525	32.4	36,143	0.8	24
<b>Male</b>	4,297	22.2	48,055	1.0	60	5,471	28.2	59,184	0.5	26	4,747	24.5	50,414	0.7	25
<b>Disabled</b>	3,211	29.3	36,792	1.0	67	2,594	23.7	29,629	0.5	26	1,835	16.7	20,568	0.6	24
5 and younger	0	0.0	0	0.0	0	1	50.0	12	0.1	1	1	50.0	12	1.0	5
6-14	2	22.2	24	1.0	105	2	22.2	24	0.4	17	12	133.3	144	0.8	20
15-20	7	13.0	82	0.4	16	7	13.0	80	0.3	16	7	13.0	83	0.6	16
21-44	1,825	31.3	20,924	1.0	69	1,116	19.1	12,981	0.4	27	589	10.1	6,793	0.6	23
45-64	1,319	29.9	15,137	1.0	65	1,297	29.4	14,726	0.5	26	1,037	23.5	11,550	0.6	24
65-74	41	9.5	439	0.9	41	106	24.5	1,127	0.4	24	113	26.2	1,171	0.7	25
75-84	16	9.5	175	0.8	31	58	34.5	634	0.5	28	57	33.9	636	0.6	22
85 and older	1	2.1	11	0.5	15	7	14.9	45	0.6	17	19	40.4	179	0.6	23
<b>Other Eligibles</b>	1,086	12.9	11,263	0.9	35	2,877	34.2	29,555	0.5	25	2,912	34.6	29,846	0.7	26
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	10	9.6	84	0.4	25	19	18.3	187	0.3	28	8	7.7	77	0.6	25
45-64	5	10.0	39	0.7	15	10	20.0	87	0.5	30	9	18.0	76	0.7	29
65-74	455	16.5	4,950	0.9	39	842	30.5	9,147	0.5	24	943	34.2	10,204	0.7	25
75-84	410	13.2	4,087	0.9	33	1,109	35.6	11,415	0.5	26	1,153	37.0	11,745	0.8	27
85 and older	206	8.6	2,103	0.8	31	897	37.5	8,719	0.6	26	799	33.4	7,744	0.8	27
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	100.0	5	0.8	8

Table 16B

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 1999 file for Iowa, 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](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, IOWA, 1999

Beneficiary Characteristics	ANTIDIABETIC				ANTIASTHMATIC				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>13,247</b>	<b>23.7 %</b>	<b>142,964</b>	<b>0.8</b>	<b>\$29</b>	<b>17,751</b>	<b>31.7 %</b>	<b>192,708</b>	<b>0.5</b>	<b>\$20</b>	<b>24,208</b>	<b>43.2 %</b>	<b>261,112</b>	<b>0.4</b>	<b>\$14</b>
<b>Female</b>															
<b>Disabled</b>															
5 and younger	9,643	26.3	104,857	0.8	29	12,162	33.2	133,554	0.5	20	18,035	49.3	195,526	0.4	15
6-14	2,547	21.6	28,569	0.7	33	4,483	37.9	51,091	0.5	18	5,996	50.7	68,128	0.4	14
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	50.0	2	0.5	7
21-44	2	4.2	24	0.6	14	10	20.8	112	0.2	3	10	50.0	12	0.1	1
45-64	439	9.4	4,996	0.8	32	1,403	30.1	16,177	0.4	15	2,193	47.1	25,227	0.3	12
65-74	1,720	30.8	19,363	0.7	34	2,572	46.1	29,486	0.5	20	3,178	57.0	36,248	0.4	15
75-84	230	29.2	2,510	0.7	30	315	40.0	3,523	0.5	19	291	37.0	3,145	0.4	10
<b>85 and older</b>	118	23.6	1,323	0.8	32	125	25.1	1,273	0.5	17	204	40.9	2,200	0.4	13
<b>Other Eligibles</b>	38	15.5	353	0.7	17	58	23.7	520	0.7	27	118	48.2	1,174	0.4	14
5 and younger	7,096	28.6	76,288	0.8	28	7,679	31.0	82,463	0.5	20	12,039	48.5	127,398	0.5	16
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	1	50.0	12	0.1	2	1	50.0	12	0.1	1
21-44	4	3.2	23	0.6	21	22	17.6	196	0.7	22	50	40.0	388	0.7	30
45-64	5	23.8	38	0.2	4	10	47.6	112	0.2	6	10	47.6	95	0.4	14
65-74	2,243	41.1	24,877	0.8	31	2,486	45.5	27,654	0.6	22	2,731	50.0	30,455	0.4	14
75-84	2,867	34.5	30,969	0.8	28	2,743	33.0	29,337	0.6	22	4,064	48.9	43,514	0.5	16
<b>85 and older</b>	1,977	18.2	20,381	0.8	23	2,417	22.2	25,152	0.5	17	5,183	47.7	52,934	0.5	16
<b>Male</b>															
<b>Disabled</b>															
5 and younger	3,604	18.6	38,107	0.7	29	5,689	28.8	59,154	0.6	22	6,173	31.9	65,586	0.4	13
6-14	1,435	13.1	16,058	0.7	31	2,280	20.8	25,692	0.5	20	3,186	29.1	35,743	0.3	13
15-20	0	0.0	0	0.0	0	1	50.0	12	0.3	8	0	0.0	0	0.0	0
21-44	0	0.0	0	0.0	0	7	77.8	84	0.5	22	0	0.0	0	0.0	0
45-64	1	1.9	12	0.8	27	6	11.1	69	0.2	3	10	18.5	117	0.1	1
65-74	413	7.1	4,757	0.8	33	796	13.6	9,179	0.4	17	1,553	26.6	17,862	0.3	13
75-84	884	20.0	9,910	0.7	32	1,224	27.7	13,727	0.6	21	1,423	32.2	15,735	0.4	13
<b>85 and older</b>	84	19.4	842	0.6	24	173	40.0	1,883	0.6	23	119	27.5	1,275	0.4	18
<b>Other Eligibles</b>	37	22.0	383	0.7	22	60	35.7	646	0.4	18	59	35.1	601	0.3	11
5 and younger	16	34.0	154	0.4	23	13	27.7	92	0.6	27	22	46.8	153	0.4	20
6-14	2,169	25.8	22,049	0.8	27	3,309	39.3	33,462	0.6	23	2,987	35.5	29,843	0.4	12
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
45-64	12	11.5	101	0.9	30	11	10.6	97	0.2	5	46	44.2	421	0.4	7
65-74	6	12.0	49	0.3	10	5	10.0	39	0.4	15	7	14.0	56	0.6	8
75-84	831	30.1	8,894	0.7	31	1,123	40.7	12,243	0.6	24	879	31.9	9,502	0.4	11
<b>85 and older</b>	822	26.4	8,249	0.8	26	1,301	41.8	12,734	0.6	23	1,090	35.0	10,796	0.4	13
Unknown	498	20.8	4,756	0.8	22	869	36.4	8,349	0.6	21	965	40.4	9,068	0.5	13
	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Dual Eligible Beneficiaries

Table 16C



Source: Data for this table are from the MAX 1999 file for Iowa, 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](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, IOWA, 1999

Beneficiary Characteristics	CALCIUM BLOCKERS				ANTIANXIETY AGENTS				Mean Rx \$	Mean No. of Rx	Users as % of Dual Benes	No. of Bene Mos among Users	Mean Rx \$	Mean No. of Rx	Users as % of Dual Benes	No. of Bene Mos among Users	No. of Bene Mos
	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean Rx \$									
<b>All</b>	<b>9,644</b>	<b>17.2 %</b>	<b>103,457</b>	<b>0.7</b>	<b>\$33</b>	<b>14,230</b>	<b>25.4 %</b>	<b>154,750</b>	<b>0.6</b>	<b>\$19</b>	<b>55,993</b>	<b>588,008</b>					
<b>Female</b>	7,362	20.1	79,459	0.8	33	9,963	27.2	108,822	0.6	18	36,617	385,814					
<b>Disabled</b>	1,491	12.6	16,735	0.7	32	3,627	30.7	41,244	0.6	20	11,819	130,832					
5 and younger	1	50.0	12	0.1	0	0	0.0	0	0.0	0	2	14					
6-14	1	50.0	12	0.8	62	0	0.0	0	0.0	0	2	24					
15-20	4	8.3	48	0.5	51	5	10.4	52	0.5	29	48	540					
21-44	219	4.7	2,474	0.7	30	1,342	28.8	15,434	0.6	19	4,660	52,503					
45-64	905	16.2	10,294	0.7	32	1,948	34.9	22,248	0.6	20	5,576	62,058					
65-74	167	21.2	1,800	0.7	34	171	21.7	1,840	0.5	16	787	8,215					
75-84	137	27.5	1,506	0.7	31	105	21.0	1,116	0.5	12	499	5,208					
85 and older	57	23.3	589	0.8	35	56	22.9	554	0.5	17	245	2,270					
<b>Other Eligibles</b>	5,871	23.7	62,724	0.8	33	6,335	25.5	67,573	0.6	17	24,798	254,982					
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0					
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	6					
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	13					
21-44	6	4.8	56	0.4	29	17	13.6	130	0.6	12	125	811					
45-64	6	28.6	49	0.4	23	6	28.6	53	0.3	2	21	145					
65-74	1,329	24.3	14,799	0.7	33	1,494	27.4	16,419	0.6	18	5,461	58,944					
75-84	2,147	25.8	23,203	0.8	33	2,278	27.4	24,505	0.6	17	8,311	86,719					
85 and older	2,383	21.9	24,617	0.8	33	2,540	23.4	26,466	0.6	17	10,877	108,344					
<b>Male</b>	2,282	11.8	23,998	0.7	34	4,267	22.0	45,968	0.6	21	19,375	202,189					
<b>Disabled</b>	882	8.0	9,789	0.7	34	2,375	21.7	27,062	0.6	23	10,958	120,807					
5 and younger	1	50.0	12	0.3	4	0	0.0	0	0.0	0	2	16					
6-14	3	33.3	36	0.7	55	1	11.1	12	1.2	26	9	97					
15-20	6	11.1	72	0.7	44	8	14.8	96	0.3	9	54	621					
21-44	256	4.4	2,930	0.6	32	1,177	20.2	13,606	0.6	24	5,833	65,421					
45-64	529	12.0	5,813	0.7	34	1,076	24.4	12,197	0.6	23	4,413	48,417					
65-74	55	12.7	564	0.7	33	65	15.0	691	0.7	22	432	4,222					
75-84	27	16.1	309	0.8	40	37	22.0	371	0.5	14	168	1,623					
85 and older	5	10.6	53	0.6	29	11	23.4	89	0.4	5	47	390					
<b>Other Eligibles</b>	1,400	16.6	14,209	0.8	33	1,892	22.5	18,906	0.6	17	8,417	81,382					
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0					
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0					
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0					
21-44	5	4.8	46	0.8	74	11	10.6	115	0.5	7	104	594					
45-64	4	8.0	38	0.6	23	5	10.0	56	0.4	13	50	297					
65-74	494	17.9	5,372	0.7	33	560	20.3	6,059	0.6	18	2,757	28,348					
75-84	559	17.9	5,540	0.8	33	730	23.4	7,113	0.6	18	3,116	30,109					
85 and older	338	14.1	3,213	0.8	33	586	24.5	5,563	0.6	16	2,390	22,034					
<b>Unknown</b>	0	0.0	0	0.0	0	1	100.0	5	0.4	2	1	5					

Table 16D

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 1999 file for Iowa, 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](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, IOWA, 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>\$174</b>	<b>5.4</b>	<b>12,936</b>	<b>139,826</b>
<b>Age</b>				
0-64	229	5.7	715	8,252
65-74	232	6.2	1,399	15,272
75-84	194	5.8	3,865	41,348
85 and older	146	5.1	6,956	74,949
Unknown	114	6.0	1	5
<b>Gender</b>				
Female	172	5.5	9,615	104,814
Male	183	5.2	3,321	35,012
Unknown	0	0.0	0	0
<b>Race</b>				
White	175	5.5	12,623	136,681
African American	167	5.4	96	1,073
Other/unknown	164	5	217	2,072
<b>Basis of Eligibility</b>				
Aged	171	5.4	12,192	131,288
Disabled	228	5.7	744	8,538
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 Iowa, 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 6,943 beneficiaries who were in nursing facilities for part of their enrollment and their 59,095 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, IOWA, 1999

Therapeutic Category	No. of Rx per Bene Mo among Users				\$ per Bene Mo among Users				Total # of Rx				Total Rx \$		Users		
	Total	Patented	Off-Patent	Generic	Total	Patented	Off-Patent	Generic	Total	Patented	Off-Patent	Generic	No.	As % of Dual All-Year NF Residents	No. of Bene Mos		
Anti-infective Agents	0.3	0.2	0.0	0.2	\$13	\$11	\$0	\$2	\$39	\$66	\$35	\$11	34,906	\$1,366,365	9,093	70.3 %	101,407
Biologics	0.1	0.1	0.0	0.0	2	1	0	1	16	13	0	23	1,202	19,732	1,082	8.4	12,401
Antineoplastic Agents	0.7	0.3	0.1	0.2	80	60	10	11	122	188	103	44	1,865	227,760	269	2.1	2,831
Endocrine/Metabolic Drugs	1.1	0.4	0.4	0.3	26	16	5	5	24	43	14	13	57,406	1,386,957	4,885	37.8	53,406
Cardiovascular Agents	1.9	0.4	0.5	1.0	41	14	14	12	21	39	29	11	187,068	3,968,965	8,988	69.5	97,759
Respiratory Agents	0.7	0.2	0.0	0.4	21	11	1	9	31	48	23	22	34,199	1,065,554	4,497	34.8	50,164
Gastrointestinal Agents	0.9	0.2	0.1	0.6	32	14	6	13	37	79	58	22	53,811	1,999,553	5,590	43.2	62,019
Genitourinary Agents	0.5	0.3	0.0	0.3	19	14	0	5	36	55	31	18	16,329	593,287	2,700	20.9	30,434
CNS Drugs	1.4	0.6	0.2	0.6	69	46	14	8	49	75	75	14	116,528	5,755,406	7,618	58.9	83,516
Stimulants/Anti-obesity/Anorexia	0.5	0.0	0.1	0.4	12	0	3	9	23	15	33	21	444	10,176	76	0.6	827
Miscellaneous Psychological/Neurological Agents	0.8	0.7	0.0	0.1	85	83	0	2	107	116	0	23	4,501	482,058	534	4.1	5,696
Analgesics and Anesthetics	0.8	0.2	0.0	0.6	25	13	2	9	29	74	46	15	54,899	1,617,714	5,980	46.2	65,558
Neuromuscular Agents	1.2	0.3	0.4	0.5	55	24	18	13	45	75	50	23	42,086	1,885,392	3,125	24.2	34,450
Nutritional Products	0.8	0.0	0.3	0.5	17	0	8	8	20	16	27	15	35,564	698,724	3,857	29.8	42,266
Hematological Agents	1.0	0.1	0.6	0.4	29	8	14	7	29	129	23	20	28,803	823,951	2,630	20.3	28,478
Topical Products	0.5	0.2	0.1	0.2	14	7	3	3	29	44	36	14	40,009	1,143,902	7,268	56.2	81,964
Miscellaneous Products	0.1	0.0	0.0	0.1	4	1	0	2	26	75	119	19	1,352	35,459	806	6.2	9,304
Unknown Therapeutic Category	0.6	0.0	0.0	0.0	16	0	0	0	25	0	0	0	51,009	1,295,358	7,053	54.5	79,286
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.	761,981	24,376,313	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 1999 file for Iowa, 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 6,943 beneficiaries who were in nursing facilities for part of their enrollment and their 59,095 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 Iowa, 5.3 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, IOWA, 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>56,015</b>	<b>32,896</b>	<b>22,778</b>	<b>331</b>	<b>10</b>	<b>588,344</b>	<b>334,392</b>	<b>251,746</b>	<b>2,155</b>	<b>51</b>	<b>0</b>
<b>Age</b>											
5 and younger	4	0	4	0	0	33	0	33	0	0	0
6-14	12	0	11	0	1	127	0	121	0	6	0
15-20	104	0	102	1	1	1,180	0	1,167	1	12	0
21-44	10,740	0	10,493	241	6	119,604	0	118,001	1,577	26	0
45-64	10,064	0	9,989	75	0	110,966	0	110,488	478	0	0
65-74	9,437	8,206	1,219	12	0	99,732	87,217	12,440	75	0	0
75-84	12,094	11,425	667	1	1	123,659	116,810	6,831	12	6	0
85 and older	13,559	13,265	292	1	1	133,038	130,365	2,660	12	1	0
Unknown	1	0	1	0	0	5	0	5	0	0	0
<b>Gender</b>											
Female	36,632	24,641	11,820	167	4	386,038	253,937	130,919	1,153	29	0
Male	19,383	8,255	10,958	164	6	202,306	80,455	120,827	1,002	22	0
Unknown	0	0	0	0	0	0	0	0	0	0	0
<b>Race</b>											
White	52,518	31,252	20,968	290	8	552,424	317,740	232,762	1,888	34	0
African American	1,593	531	1,032	29	1	17,182	5,865	11,118	187	12	0
Other/unknown	1,904	1,113	778	12	1	18,738	10,787	7,866	80	5	0
<b>Use of Nursing Facilities</b>											
All year	12,936	12,192	744	0	0	139,826	131,288	8,538	0	0	0
Part year	6,943	6,287	655	0	1	59,095	52,712	6,377	0	6	0
None	36,136	14,417	21,379	331	9	389,423	150,392	236,831	2,155	45	0
<b>Maintenance Assistance Status</b>											
Cash	20,308	6,779	13,414	113	2	228,905	76,857	151,336	710	2	0
Medically needy	6,296	3,387	2,761	146	2	62,322	33,422	27,979	918	3	0
Poverty related	2,625	1,069	1,519	36	1	27,358	11,463	15,662	227	6	0
Other/unknown	26,786	21,661	5,084	36	5	269,759	212,650	56,769	300	40	0
<b>Dual Status<sup>c</sup></b>											
Full dual, all year	51,466	30,677	20,469	310	10	539,946	310,498	227,469	1,928	51	0
Full dual, part year	4,549	2,219	2,309	21	0	48,398	23,894	24,277	227	0	0
<b>Managed Care Status</b>											
FFS all year	55,942	32,896	22,751	285	10	587,688	334,392	251,445	1,800	51	0
FFS part year, with Rx claims	47	0	26	21	0	474	0	294	180	0	0
FFS part year, no Rx claims	4	0	1	3	0	23	0	7	16	0	0
MC all year, with Rx claims	19	0	0	19	0	150	0	0	150	0	0
MC all year, no Rx claims	3	0	0	3	0	9	0	0	9	0	0

Source: Data for this table are from the MAX 1999 file for Iowa, 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(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, IOWA, 1999

Beneficiary Characteristics	Benes and					
	Bene Mos in Cell F of Table 1	Included in Cell G of Table 1		Excluded from Cell G of Table 1		
	No. of Benes	No. of Benes	No. of Benes	No. of Benes	No. of Benes	No. of Benes
<b>All</b>	<b>56,015</b>	<b>588,344</b>	<b>55,993</b>	<b>588,008</b>	<b>22</b>	<b>336</b>
FFS all year	55,942	587,688	55,942	587,688	0	0
FFS part year, with Rx claims	47	474	47	307	0	167
FFS part year, with no Rx claims	4	23	4	13	0	10
MC all year, with Rx claims	19	150	0	0	19	150
MC all year, with no Rx claims	3	9	0	0	3	9

Source: Data for this table are from the MAX 1999 file for Iowa, 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 1B  
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 TO 74<sup>a, b</sup>  
 IOWA, 1999

Total Number of Dual Eligible Beneficiaries, Age 65-74 9,437  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65-74 \$15,587,167  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65-74 \$1,652

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 65-74	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	1,308	13.9%	0	0.0
1-500	2,151	22.8	461,012	3.0
501-1,000	1,279	13.6	951,221	6.1
1,001-1,500	994	10.5	1,240,343	8.0
1,501-2,000	791	8.4	1,382,428	8.9
2,001-2,500	609	6.5	1,369,448	8.8
2,501-3,000	493	5.2	1,355,686	8.7
3,001-3,500	422	4.5	1,362,786	8.7
3,501-4,000	365	3.9	1,365,260	8.8
4,001-4,500	256	2.7	1,091,858	7.0
4,501-5,000	156	1.7	739,165	4.7
5,001-5,500	125	1.3	656,457	4.2
5,501-6,000	98	1.0	560,895	3.6
6,001-6,500	102	1.1	639,236	4.1
6,501-7,000	75	0.8	505,473	3.2
7,001-7,500	49	0.5	355,260	2.3
7,501-8,000	45	0.5	348,742	2.2
8,001-8,500	33	0.3	271,860	1.7
8,501-9,000	23	0.2	201,505	1.3
9,001-9,500	10	0.1	92,277	0.6
9,501-10,000	14	0.1	135,860	0.9
10,001+	39	0.4	500,395	3.2

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

— icy  
ent  
%

SUPPLEMENTAL TABLE 1C  
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 75 TO 84<sup>a, b</sup>  
 IOWA, 1999

Total Number of Dual Eligible Beneficiaries, Age 75-84 12,094  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 75-84 \$19,628,528  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 75-84 \$1,623

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 75-84	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	1,028	8.5 %	0	0.0 %
1-500	2,529	20.9	575,609	2.9
501-1,000	1,938	16.0	1,444,372	7.4
1,001-1,500	1,579	13.1	1,968,035	10.0
1,501-2,000	1,257	10.4	2,185,789	11.1
2,001-2,500	952	7.9	2,125,225	10.8
2,501-3,000	820	6.8	2,250,662	11.5
3,001-3,500	537	4.4	1,736,530	8.8
3,501-4,000	420	3.5	1,564,140	8.0
4,001-4,500	272	2.2	1,150,112	5.9
4,501-5,000	204	1.7	964,216	4.9
5,001-5,500	166	1.4	872,114	4.4
5,501-6,000	117	1.0	669,946	3.4
6,001-6,500	64	0.5	398,217	2.0
6,501-7,000	64	0.5	429,225	2.2
7,001-7,500	47	0.4	340,768	1.7
7,501-8,000	25	0.2	193,488	1.0
8,001-8,500	23	0.2	188,486	1.0
8,501-9,000	15	0.1	131,370	0.7
9,001-9,500	8	0.1	74,319	0.4
9,501-10,000	6	0.0	58,378	0.3
10,001+	23	0.2	307,527	1.6

Source: Data for this table are from the MAX 1999 file for Iowa, 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<sup>a, b</sup>  
 IOWA, 1999

Total Number of Dual Eligible Beneficiaries, Age 85+ 13,559  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 85+ \$18,296,834  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 85+ \$1,349

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 85+	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	675	5.0 %	0	0.0 %
1-500	3,685	27.2	869,238	4.8
501-1,000	2,558	18.9	1,894,031	10.4
1,001-1,500	1,934	14.3	2,399,198	13.1
1,501-2,000	1,465	10.8	2,554,112	14.0
2,001-2,500	1,066	7.9	2,375,359	13.0
2,501-3,000	739	5.5	2,025,344	11.1
3,001-3,500	475	3.5	1,536,968	8.4
3,501-4,000	319	2.4	1,189,725	6.5
4,001-4,500	211	1.6	890,473	4.9
4,501-5,000	141	1.0	669,316	3.7
5,001-5,500	90	0.7	473,193	2.6
5,501-6,000	62	0.5	354,682	1.9
6,001-6,500	37	0.3	231,242	1.3
6,501-7,000	28	0.2	188,423	1.0
7,001-7,500	20	0.1	145,871	0.8
7,501-8,000	13	0.1	100,375	0.5
8,001-8,500	12	0.1	98,807	0.5
8,501-9,000	9	0.1	78,538	0.4
9,001-9,500	2	0.0	18,482	0.1
9,501-10,000	3	0.0	29,293	0.2
10,001+	15	0.1	174,164	1.0

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