

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

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TABLE 11  
 CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY<sup>a,b</sup>  
 DUAL ELIGIBLE BENEFICIARIES, IDAHO, 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>16,657</b>	<b>9,405</b>	<b>7,184</b>	<b>67</b>	<b>1</b>	<b>0</b>	<b>171,212</b>	<b>92,535</b>	<b>78,168</b>	<b>502</b>	<b>7</b>	<b>0</b>
<b>Age</b>												
5 and younger	3	0	3	0	0	0	36	0	36	0	0	0
6-14	7	0	7	0	0	0	68	0	68	0	0	0
15-20	48	0	48	0	0	0	503	0	503	0	0	0
21-44	3,644	0	3,588	55	1	0	39,661	0	39,216	438	7	0
45-64	3,478	0	3,467	11	0	0	37,777	0	37,716	61	0	0
65-74	3,228	3,167	61	0	0	0	33,296	32,765	531	0	0	0
75-84	3,129	3,119	9	1	0	0	30,800	30,702	95	3	0	0
85 and older	3,120	3,119	1	0	0	0	29,071	29,068	3	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
<b>Gender</b>												
Female	10,544	6,901	3,602	41	0	0	108,500	68,962	39,245	293	0	0
Male	6,113	2,504	3,582	26	1	0	62,712	23,573	38,923	209	7	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
<b>Race</b>												
White	15,422	8,662	6,697	62	1	0	157,870	84,581	72,819	463	7	0
African American	58	32	26	0	0	0	590	319	271	0	0	0
Other/unknown	1,177	711	461	5	0	0	12,752	7,635	5,078	39	0	0
<b>Use of Nursing Facilities</b>												
All year	2,903	2,736	167	0	0	0	28,583	26,827	1,756	0	0	0
Part year	1,563	1,390	173	0	0	0	13,749	11,981	1,768	0	0	0
None	12,191	5,279	6,844	67	1	0	128,880	53,727	74,644	502	7	0
<b>Maintenance Assistance Status</b>												
Cash	9,043	2,146	6,895	2	0	0	98,393	23,276	75,097	20	0	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0
Poverty-related	239	76	148	14	1	0	2,347	745	1,516	79	7	0
Other/unknown	7,375	7,183	141	51	0	0	70,472	68,514	1,555	403	0	0
<b>Dual Medicare Status<sup>c</sup></b>												
Full dual, all year	16,129	9,128	6,934	66	1	0	165,869	89,811	75,557	494	7	0
Full dual, part year	528	277	250	1	0	0	5,343	2,724	2,611	8	0	0
<b>Managed Care Status</b>												
FFS all year	16,657	9,405	7,184	67	1	0	171,212	92,535	78,168	502	7	0
FFS part year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
FFS part year, no Rx claims	0	0	0	0	0	0	0	0	0	0	0	0

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

a. Table 11 includes the beneficiaries represented by Cells G of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

Table 11

Dual Eligible Beneficiaries

b. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services. The total includes some beneficiaries with unknown basis of eligibility and some whose age categories are not consistent with basis of eligibility.

c. The "Full dual, all year" group contains beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefits during all months of Medicaid enrollment in 1999. The "Full dual, part year" group contains beneficiaries who had such benefits for some, but not all, months of their enrollment. Refer to footnote g of Table 1 for more information about how we determined dual eligibility status.

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

TABLE 12  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BENEFICIARY CHARACTERISTIC<sup>a,b</sup>  
 DUAL ELIGIBLE BENEFICIARIES, IDAHO, 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	88.9 %	47.8	\$2,071	\$43	\$13,348	15.5 %	\$29	16,657
<b>Age</b>								
5 and younger	100.0	57.3	5,011	87	16,238	30.9	43	3
6-14	100.0	57.9	4,385	76	8,198	53.5	4	7
15-20	83.3	25.3	2,924	116	12,945	22.6	11	48
21-44	86.0	37.0	2,217	60	12,436	17.8	16	3,644
45-64	90.9	56.6	2,739	48	13,324	20.6	39	3,478
65-74	86.0	48.3	1,907	40	9,211	20.7	44	3,228
75-84	89.7	50.8	1,851	36	14,184	13.1	29	3,129
85 and older	92.1	47.3	1,522	32	17,896	8.5	16	3,120
Unknown	0.0	0.0	0	0	0	0.0	0	0
<b>Basis of Eligibility</b>								
Aged	89.3	49.0	1,767	36	13,782	12.8	30	9,405
Disabled	88.3	46.4	2,477	53	12,856	19.3	27	7,184
Adults	86.6	29.2	1,080	37	5,458	19.8	14	67
Children	100.0	5.0	92	18	1,126	8.2	0	1
Unknown	0.0	0.0	0	0	0	0.0	0	0
<b>Gender</b>								
Female	91.6	52.9	2,132	40	13,180	16.2	32	10,544
Male	84.1	38.9	1,965	51	13,638	14.4	23	6,113
Unknown	0.0	0.0	0	0	0	0.0	0	0
<b>Race</b>								
White	89.1	48.8	2,117	43	13,869	15.3	27	15,422
African American	84.5	54.5	1,940	36	9,709	20.0	25	58
Other/unknown	86.2	33.7	1,473	44	6,704	22.0	50	1,177
<b>Use of Nursing Facilities</b>								
Entire year	96.8	61.8	2,223	36	28,798	7.7	24	2,903
Part year	93.7	53.6	1,962	37	17,871	11.0	29	1,563
None	86.3	43.7	2,048	47	9,089	22.5	30	12,191
<b>Maintenance Assistance Status</b>								
Cash	88.6	46.3	2,306	50	11,202	20.6	29	9,043
Medically needy	0.0	0.0	0	0	0	0.0	0	0
Poverty related	75.7	20.6	867	42	3,012	28.8	10	239
Other/unknown	89.6	50.5	1,821	36	16,314	11.2	29	7,375

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

Table 12

Dual Eligible Beneficiaries

a. Table 12 includes beneficiaries represented by Cell G of Table 1.

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

c. Information about OTC drugs appears in this column only. OTC drugs are not part of the reimbursement amount for prescription drugs.

Bene(s) = beneficiary (or beneficiaries); CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; OTC = over-the-counter; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE 13  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC<sup>a,b</sup>  
 DUAL ELIGIBLE BENEFICIARIES, IDAHO, 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			
<b>All</b>	<b>4.6</b>	<b>\$201</b>	<b>15.5 %</b>	<b>11.1 %</b>	<b>17.1 %</b>	<b>10.3 %</b>	<b>28.1 %</b>	<b>24.6 %</b>	<b>\$1,299</b>	<b>16,657</b>	<b>171,212</b>
<b>Age</b>											
5 and younger	4.8	418	30.9	0.0	0.0	0.0	66.7	33.3	1,353	3	36
6-14	6.0	451	53.5	0.0	0.0	0.0	57.1	42.9	844	7	68
15-20	2.4	279	22.6	16.7	39.6	8.3	20.8	14.6	1,235	48	503
21-44	3.4	204	17.8	14.0	29.0	12.2	24.8	14.6	1,143	3,644	39,661
45-64	5.2	252	20.6	9.1	15.6	10.3	27.5	26.7	1,227	3,478	37,777
65-74	4.7	185	20.7	14.0	16.5	10.0	25.9	24.2	893	3,228	33,296
75-84	5.2	188	13.1	10.3	12.1	8.2	30.0	28.3	1,441	3,129	30,800
85 and older	5.1	163	8.5	7.9	10.3	10.3	33.0	30.9	1,921	3,120	29,071
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<b>Basis of Eligibility</b>											
Aged	5.0	180	12.8	10.7	12.9	9.5	29.6	27.8	1,401	9,405	92,535
Disabled	4.3	228	19.3	11.7	22.4	11.3	26.1	20.5	1,182	7,184	78,168
Adults	3.9	144	19.8	13.4	32.8	3.0	29.9	14.9	728	67	502
Children	0.7	13	8.2	0.0	100.0	0.0	0.0	0.0	161	1	7
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<b>Gender</b>											
Female	5.1	207	16.2	8.4	14.7	10.0	29.2	27.3	1,281	10,544	108,500
Male	3.8	192	14.4	15.9	21.3	10.7	26.3	20.0	1,329	6,113	62,712
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<b>Race</b>											
White	4.8	207	15.3	10.9	16.4	9.9	28.3	25.3	1,355	15,422	157,870
African American	5.4	191	20.0	15.5	10.3	6.9	39.7	19.0	954	58	590
Other/unknown	3.1	136	22.0	13.8	27.1	15.0	25.7	15.5	619	1,177	12,752
<b>Use of Nursing Facilities</b>											
Entire year	6.3	226	7.7	3.2	6.4	8.1	31.4	36.6	2,925	2,903	28,583
Part year	6.1	223	11.0	6.3	9.0	8.1	30.7	32.5	2,032	1,563	13,749
None	4.1	194	22.5	13.7	20.7	11.0	27.0	20.8	860	12,191	128,880
<b>Maintenance Assistance Status</b>											
Cash	4.3	212	20.6	11.4	21.6	11.3	26.9	21.0	1,030	9,043	98,393
Medically needy	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Poverty related	2.1	88	28.8	24.3	36.0	8.8	22.6	6.7	307	239	2,347
Other/unknown	5.3	191	11.2	10.4	11.0	9.0	29.7	29.6	1,707	7,375	70,472

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

Table 13

Dual Eligible Beneficiaries

- a. Table 13 includes the beneficiaries represented by Cell G of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- b. The Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
- Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE 14  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, IDAHO, 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>4.6</b>	<b>\$201</b>	<b>\$43</b>	<b>1.7</b>	<b>\$122</b>	<b>\$73</b>	<b>0.8</b>	<b>\$35</b>	<b>\$46</b>	<b>2.0</b>	<b>\$34</b>	<b>\$17</b>
<b>Age</b>												
5 and younger	4.8	418	87	1.9	318	164	1.0	40	40	1.7	53	32
6-14	6.0	451	76	3.3	329	101	1.0	86	84	1.5	17	11
15-20	2.4	279	116	1.3	243	193	0.3	21	79	0.8	13	16
21-44	3.4	204	60	1.4	135	99	0.5	34	71	1.4	26	19
45-64	5.2	252	48	2.0	158	78	0.7	41	56	2.2	40	18
65-74	4.7	185	40	1.7	107	63	0.8	33	43	2.0	34	17
75-84	5.2	188	36	1.7	106	61	0.9	34	37	2.2	37	16
85 and older	5.1	163	32	1.5	87	58	1.0	32	33	2.4	35	15
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Basis of Eligibility</b>												
Aged	5.0	180	36	1.7	101	61	0.9	33	37	2.2	35	16
Disabled	4.3	228	53	1.7	147	87	0.6	37	62	1.8	33	18
Adults	3.9	144	37	1.2	84	70	0.4	22	55	2.2	35	16
Children	0.7	13	18	0.0	0	0	0.3	7	23	0.4	7	15
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Gender</b>												
Female	5.1	207	40	1.8	123	67	0.8	36	43	2.2	37	16
Male	3.8	192	51	1.4	119	88	0.6	33	53	1.6	30	18
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Race</b>												
White	4.8	207	43	1.7	125	73	0.8	36	46	2.1	35	17
African American	5.4	191	36	1.8	110	62	0.9	35	38	2.3	35	15
Other/unknown	3.1	136	44	1.2	83	71	0.5	23	47	1.3	22	17
<b>Use of Nursing Facilities</b>												
Entire year	6.3	226	36	2.0	128	64	1.1	42	38	2.9	45	16
Part year	6.1	223	37	2.0	127	64	1.1	40	36	2.7	44	16
None	4.1	194	47	1.6	120	77	0.6	33	51	1.7	31	18
<b>Maintenance Assistance Status</b>												
Cash	4.3	212	50	1.6	134	82	0.6	35	56	1.8	32	18
Medically needy	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Poverty related	2.1	88	42	0.8	52	69	0.3	15	55	1.0	16	16
Other/unknown	5.3	191	36	1.7	107	62	0.9	35	37	2.3	37	16

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

a. Table 14 includes the beneficiaries represented by Cell G of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

Table 14

Dual Eligible Beneficiaries



c. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In Idaho, 4.5 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](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, IDAHO, 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 Benes	No. of Bene Mos				
															Generic	Generic	Generic	Generic
Anti-infective Agents	0.3	0.2	0.0	0.2	\$16	\$13	\$0	\$2	\$47	\$82	\$45	\$13	33,813	\$1,603,334	9,421	56.6 %	103,217	
Biologics	0.1	0.1	0.0	0.0	3	2	0	1	24	26	0	19	38	900	32	0.2	346	
Antineoplastic Agents	0.6	0.3	0.1	0.2	90	69	13	9	144	251	89	42	2,234	322,412	336	2.0	3,582	
Endocrine/Metabolic Drugs	1.1	0.5	0.2	0.4	30	22	4	4	27	42	16	12	86,139	2,301,386	7,214	43.3	77,002	
Cardiovascular Agents	1.7	0.5	0.4	0.8	48	25	14	10	28	45	33	13	157,244	4,419,075	8,733	52.4	91,569	
Respiratory Agents	0.8	0.4	0.0	0.4	34	24	1	9	41	55	32	25	56,008	2,282,561	6,172	37.1	67,074	
Gastrointestinal Agents	0.8	0.4	0.1	0.3	58	42	8	9	72	106	80	27	52,192	3,738,226	5,972	35.9	64,307	
Gastrointestinal Agents	0.5	0.3	0.0	0.2	18	15	0	3	38	50	36	18	11,542	439,970	2,208	13.3	24,135	
Genitourinary Agents	1.4	0.6	0.2	0.6	90	61	18	11	63	94	91	18	139,416	8,727,617	9,081	54.5	96,749	
CNS Drugs	0.7	0.1	0.2	0.3	36	6	17	14	54	62	73	40	1,311	71,301	182	1.1	1,971	
Stimulants/Anti-obesity/Anorexia																		
Miscellaneous Psychological/Neurological Agents	0.7	0.6	0.0	0.1	82	78	0	4	114	135	26	27	2,995	342,347	405	2.4	4,190	
Neurological Agents	0.9	0.2	0.1	0.6	36	18	9	9	39	89	68	15	86,709	3,345,143	8,743	52.5	93,725	
Analgesics and Anesthetics	1.0	0.4	0.2	0.5	50	31	7	12	48	87	45	22	59,721	2,855,526	5,240	31.5	57,107	
Neuromuscular Agents	0.7	0.0	0.3	0.5	13	0	7	6	18	22	26	13	24,876	442,186	3,299	19.8	34,199	
Nutritional Products	0.9	0.0	0.4	0.4	26	9	10	7	30	187	24	17	19,486	581,632	2,166	13.0	22,575	
Hematological Agents	0.4	0.1	0.1	0.1	11	6	3	2	31	42	39	15	22,605	691,427	5,649	33.9	62,812	
Topical Products	1.1	0.4	0.4	0.3	258	151	87	20	227	361	214	64	2,139	485,696	172	1.0	1,881	
Miscellaneous Products	0.6	0.0	0.0	0.0	27	0	0	0	49	0	0	0	37,417	1,836,761	6,183	37.1	67,087	
Unknown Therapeutic Category	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	795,885	34,487,500	n.a.	n.a.	n.a.	
<b>TOTAL NO. OF RX AND RX \$</b>																		

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

- a. Table 15 includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 1999. A beneficiary who used drugs from two or more categories was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
- c. For information about these therapeutic categories, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).
- d. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In Idaho, 4.5 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](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, IDAHO, 1999

Top 10 Drug Groups	Users			Among Users			
	Total Medicaid Rx \$	No.	As % of Dual Benes	No. of Bene Mos	No. of Rx per Bene Mo	\$ per Rx	Rx \$ per Bene Mo
ANTIPSYCHOTICS	\$4,084,202	4,253	25.5 %	46,396	0.8	\$105	\$88
ANTIDEPRESSANTS	3,542,014	8,837	53.1	95,396	0.7	53	37
ULCER DRUGS	3,035,715	6,110	36.7	66,638	0.6	79	46
ANTICONVULSANT	2,139,651	3,722	22.3	41,159	0.9	58	52
ANALGESICS - Narcotic	1,866,119	9,948	59.7	107,180	0.5	34	17
ANTIDIABETIC	1,450,060	3,949	23.7	42,452	0.8	43	34
ANTIHYPERTENSIVE	1,385,273	5,078	30.5	53,716	0.8	34	26
ANTIASTHMATIC	1,377,014	5,616	33.7	59,960	0.5	42	23
ANALGESICS - ANTI-INFLAMMATORY	1,265,795	5,494	33.0	61,482	0.4	50	21
CALCIUM BLOCKERS	858,064	2,344	14.1	24,988	0.8	44	34

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

a. Table 16 includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 1999. A beneficiary who used drugs from two or more groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 1999. For information about these drug groups, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).

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

TABLE 16A  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR TOP 10 DRUG GROUPS COMBINED  
 AND FIRST AND SECOND GROUPS SEPARATELY, BY SEX, BOE, AND AGE<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, IDAHO, 1999

Beneficiary Characteristics	All Top 10 Drug Groups					ANTIPSYCHOTICS					ANTIDEPRESSANTS						
	No. of Rx	Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
<b>All</b>	<b>387,804</b>	<b>\$21,003,907</b>	<b>4,253</b>	<b>25.5 %</b>	<b>46,396</b>	<b>0.8</b>	<b>\$88</b>	<b>8,837</b>	<b>53.1 %</b>	<b>95,396</b>	<b>0.7</b>	<b>\$37</b>					
<b>Female</b>																	
<b>Disabled</b>																	
5 and younger	260,434	13,285,228	2,451	23.2	26,614	0.8	72	6,202	58.8	67,057	0.7	37					
6-14	102,298	6,020,466	1,170	32.5	13,357	0.9	94	2,886	80.1	32,640	0.7	40					
15-20	15	376	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
21-44	19	1,614	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
45-64	241	15,906	6	24.0	56	0.6	74	11	44.0	100	0.5	34					
65-74	36,614	2,396,981	607	39.2	6,970	0.8	97	1,249	80.6	14,209	0.6	40					
75-84	65,027	3,588,932	550	27.6	6,285	1.0	92	1,614	80.9	18,230	0.7	41					
85 and older	287	11,529	5	21.7	33	0.5	24	11	47.8	89	0.5	28					
<b>Other Eligibles</b>																	
5 and younger	94	5,100	2	50.0	13	0.2	10	1	25.0	12	1.0	9					
6-14	1	28	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
15-20	158,136	7,264,762	1,281	18.5	13,257	0.6	50	3,316	47.8	34,417	0.7	33					
21-44	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					
65-74	559	24,591	5	13.9	47	0.2	9	30	83.3	284	0.5	30					
75-84	62	2,070	0	0.0	0	0.0	0	3	75.0	26	0.7	11					
85 and older	54,865	2,662,950	340	15.9	3,746	0.7	59	1,017	47.4	11,080	0.7	32					
<b>Male</b>																	
<b>Disabled</b>																	
5 and younger	53,831	2,480,806	448	19.6	4,599	0.7	56	1,093	47.7	11,267	0.7	33					
6-14	48,819	2,094,345	488	19.8	4,865	0.6	38	1,173	47.6	11,760	0.7	34					
15-20	127,370	7,718,679	1,802	29.5	19,782	0.9	110	2,635	43.1	28,339	0.7	39					
21-44	79,349	5,516,862	1,324	37.0	15,098	1.0	126	1,685	47.0	18,967	0.7	41					
45-64	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
65-74	71	3,913	0	0.0	0	0.0	0	1	25.0	12	1.0	76					
75-84	330	35,469	8	34.8	96	0.7	176	13	56.5	156	0.8	58					
85 and older	40,185	3,027,808	843	41.3	9,565	1.0	123	972	47.7	10,948	0.7	43					
<b>Other Eligibles</b>																	
5 and younger	38,167	2,416,916	470	31.9	5,409	1.1	130	695	47.2	7,812	0.7	38					
6-14	393	17,657	1	2.6	4	0.5	3	2	5.3	15	0.8	17					
15-20	203	15,099	2	40.0	24	1.3	183	2	40.0	24	0.7	45					
21-44	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
45-64	48,021	2,201,817	478	18.9	4,684	0.7	58	950	37.5	9,372	0.7	34					
65-74	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
<b>Unknown</b>																	
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	393	16,805	5	25.0	51	0.4	49	19	95.0	199	0.4	16					
45-64	55	1,542	1	14.3	4	0.5	9	3	42.9	11	0.6	35					
65-74	19,341	923,706	163	15.9	1,706	0.7	69	286	28.0	2,973	0.7	34					
75-84	16,761	772,452	174	21.0	1,663	0.7	55	362	43.7	3,534	0.7	33					
85 and older	11,471	487,312	135	20.7	1,260	0.7	46	280	42.9	2,655	0.7	35					
<b>Dual Eligible Beneficiaries</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>					

Source: Data for this table are from the MAX 1999 file for Idaho, released by CMS in 1/2003. 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, IDAHO, 1999

Beneficiary Characteristics	ULCER DRUGS					ANTICONVULSANT					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>6,110</b>	<b>36.7 %</b>	<b>66,638</b>	<b>0.6</b>	<b>\$46</b>	<b>3,722</b>	<b>22.3 %</b>	<b>41,159</b>	<b>0.9</b>	<b>\$52</b>	<b>9,948</b>	<b>59.7 %</b>	<b>107,180</b>	<b>0.5</b>	<b>\$17</b>
<b>Female</b>	4,214	40.0	46,074	0.6	46	2,149	20.4	23,739	0.9	47	6,932	65.7	74,920	0.5	16
<b>Disabled</b>	1,455	40.4	16,641	0.5	45	1,307	36.3	14,763	0.9	56	2,678	74.3	30,381	0.5	14
5 and younger	1	33.3	12	0.7	19	1	33.3	12	0.5	12	0	0.0	0	0.0	0
6-14	1	33.3	12	0.1	9	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	3	12.0	35	0.2	35	7	28.0	76	0.8	65	10	40.0	116	0.2	2
21-44	516	33.3	5,935	0.4	40	671	43.3	7,587	0.9	60	1,076	69.5	12,336	0.4	11
45-64	927	46.5	10,584	0.6	48	622	31.2	7,037	0.9	52	1,569	78.7	17,760	0.5	17
65-74	4	17.4	29	0.3	26	4	17.4	29	0.3	9	17	73.9	101	0.6	16
75-84	3	75.0	34	0.3	45	2	50.0	22	0.6	30	6	150.0	68	0.4	4
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Other Eligibles</b>	2,759	39.7	29,433	0.6	46	842	12.1	8,976	0.8	31	4,254	61.3	44,539	0.6	18
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	12	33.3	110	0.2	15	15	41.7	142	0.7	34	33	91.7	328	0.5	17
45-64	1	25.0	12	0.1	7	0	0.0	0	0.0	0	2	50.0	14	0.4	3
65-74	919	42.8	10,281	0.5	45	328	15.3	3,682	0.8	34	1,328	61.9	14,801	0.5	16
75-84	906	39.5	9,784	0.6	47	273	11.9	2,866	0.9	35	1,345	58.7	14,174	0.6	19
85 and older	921	37.3	9,246	0.7	47	226	9.2	2,286	0.8	22	1,546	62.7	15,222	0.6	19
<b>Male</b>	1,896	31.0	20,564	0.6	46	1,573	25.7	17,420	0.9	59	3,016	49.3	32,260	0.5	20
<b>Disabled</b>	1,042	29.1	11,813	0.6	47	1,188	33.2	13,456	1.0	66	1,780	49.7	19,912	0.5	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	3	75.0	31	0.7	40	0	0.0	0	0.0	0	2	50.0	24	0.1	0
15-20	3	13.0	36	0.4	43	8	34.8	96	0.8	61	12	52.2	144	0.2	2
21-44	523	25.6	5,938	0.5	45	719	35.3	8,154	1.0	68	936	45.9	10,482	0.4	24
45-64	503	34.1	5,716	0.6	49	459	31.2	5,182	1.0	64	817	55.5	9,106	0.6	23
65-74	10	26.3	92	0.5	60	1	2.6	12	0.3	8	10	26.3	120	0.5	5
75-84	0	0.0	0	0.0	0	1	20.0	12	1.5	92	3	60.0	36	2.4	189
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Other Eligibles</b>	854	33.7	8,751	0.6	43	385	15.2	3,964	0.9	36	1,236	48.8	12,348	0.5	14
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	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	4	20.0	48	0.4	37	8	40.0	83	0.6	37	21	105.0	235	0.7	12
45-64	0	0.0	0	0.0	0	0	0.0	0	0.0	0	5	71.4	17	0.9	9
65-74	348	34.1	3,777	0.6	43	150	14.7	1,619	0.8	36	467	45.7	4,910	0.5	13
75-84	276	33.3	2,740	0.6	44	142	17.1	1,415	0.9	41	388	46.8	3,809	0.5	16
85 and older	226	34.6	2,186	0.7	43	85	13.0	847	0.8	28	355	54.4	3,377	0.5	13
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Table 16B

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 1999 file for Idaho, released by CMS in 1/2003. 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, IDAHO, 1999

Beneficiary Characteristics	ANTIDIABETIC					ANTIHYPERTENSIVE					ANTIASTHMATIC				
	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>3,949</b>	<b>23.7 %</b>	<b>42,452</b>	<b>0.8</b>	<b>\$34</b>	<b>5,078</b>	<b>30.5 %</b>	<b>53,716</b>	<b>0.8</b>	<b>\$26</b>	<b>5,616</b>	<b>33.7 %</b>	<b>59,960</b>	<b>0.5</b>	<b>\$23</b>
<b>Female</b>	2,750	26.1	29,585	0.8	34	3,473	32.9	36,868	0.8	26	3,788	35.9	40,731	0.5	23
<b>Disabled</b>	784	21.8	8,776	0.8	41	740	20.5	8,197	0.7	24	1,431	39.7	16,080	0.5	21
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	33.3	12	0.1	1
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	2	8.0	15	0.7	35	1	4.0	12	0.8	36	3	12.0	36	0.4	8
21-44	169	10.9	1,893	0.8	40	154	9.9	1,707	0.6	19	465	30.0	5,263	0.4	17
45-64	605	30.3	6,792	0.8	41	574	28.8	6,409	0.7	25	955	47.9	10,710	0.6	24
65-74	8	34.8	76	0.9	28	9	39.1	56	0.8	24	6	26.1	47	0.2	10
75-84	0	0.0	0	0.0	0	1	25.0	10	0.8	69	1	25.0	12	0.2	11
85 and older	0	0.0	0	0.0	0	1	100.0	3	0.3	9	0	0.0	0	0.0	0
<b>Other Eligibles</b>	1,966	28.3	20,809	0.8	32	2,733	39.4	28,671	0.8	26	2,357	34.0	24,651	0.6	24
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	1	2.8	9	3.1	97	4	11.1	32	0.5	17	6	16.7	30	0.4	18
45-64	0	0.0	0	0.0	0	1	25.0	6	0.2	2	2	50.0	24	0.2	9
65-74	787	36.7	8,757	0.8	36	852	39.7	9,443	0.7	27	996	46.4	10,910	0.6	26
75-84	702	30.6	7,368	0.8	29	1,004	43.8	10,575	0.8	27	794	34.7	8,129	0.6	25
85 and older	476	19.3	4,675	0.8	27	872	35.4	8,615	0.8	26	559	22.7	5,558	0.5	20
<b>Male</b>	1,199	19.6	12,867	0.8	34	1,605	26.3	16,848	0.7	26	1,828	29.9	19,229	0.6	23
<b>Disabled</b>	572	16.0	6,369	0.8	37	699	19.5	7,717	0.7	26	844	23.6	9,456	0.5	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	1	25.0	12	0.5	20	1	25.0	12	0.2	2
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	4.3	12	0.1	9
21-44	175	8.6	1,964	0.8	34	245	12.0	2,694	0.7	25	361	17.7	4,088	0.4	16
45-64	387	26.3	4,285	0.8	39	437	29.7	4,836	0.7	26	468	31.8	5,247	0.6	26
65-74	10	26.3	120	0.7	31	15	39.5	163	0.5	22	10	26.3	61	0.4	12
75-84	0	0.0	0	0.0	0	1	20.0	12	0.8	25	3	60.0	36	0.7	9
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Other Eligibles</b>	627	24.8	6,498	0.8	31	906	35.8	9,131	0.8	26	984	38.9	9,773	0.6	25
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	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	3	15.0	24	0.3	20	5	25.0	52	0.3	10	8	40.0	66	0.2	5
45-64	1	14.3	4	1.3	31	2	28.6	8	1.0	34	2	28.6	9	0.4	10
65-74	281	27.5	3,069	0.7	33	390	38.2	4,150	0.7	26	400	39.1	4,171	0.6	25
75-84	204	24.6	2,019	0.8	33	325	39.2	3,267	0.8	26	338	40.8	3,338	0.7	28
85 and older	138	21.1	1,382	0.8	24	184	28.2	1,654	0.8	26	236	36.1	2,189	0.5	21
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Table 16C

Dual Eligible Beneficiaries



Source: Data for this table are from the MAX 1999 file for Idaho, released by CMS in 1/2003. 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, IDAHO, 1999

Beneficiary Characteristics	ANALGESICS - ANTI-INFLAMMATORY				CALCIUM BLOCKERS				Mean Rx \$	Mean No. of Rx	Users as % of Dual Benes	No. of Bene Mos among Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean Rx \$	Mean No. of Rx	No. of Bene Mos
	No. of Users	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	Mean Rx \$									
<b>All</b>	<b>5,494</b>	<b>33.0 %</b>	<b>61,482</b>	<b>0.4</b>	<b>\$21</b>	<b>2,344</b>	<b>14.1 %</b>	<b>24,988</b>	<b>\$34</b>	<b>0.8</b>	<b>16,657</b>	<b>171,212</b>					
<b>Female</b>																	
<b>Disabled</b>	3,831	36.3	42,934	0.4	23	1,725	16.4	18,401	34	0.8	10,544	108,500					
5 and younger	1,636	45.4	18,830	0.4	21	368	10.2	4,151	35	0.8	3,602	39,245					
6-14	0	0.0	0	0.0	0	0	0.0	0	0	0.0	3	36					
15-20	0	0.0	0	0.0	0	2	66.7	24	63	0.8	3	36					
21-44	8	32.0	91	0.2	1	2	8.0	24	27	0.6	25	246					
45-64	617	39.8	7,124	0.3	15	75	4.8	847	33	0.7	1,549	16,963					
65-74	1,000	50.2	11,505	0.4	25	285	14.3	3,221	35	0.8	1,994	21,751					
75-84	9	39.1	86	0.3	13	2	8.7	13	48	0.8	23	175					
85 and older	2	50.0	24	0.1	12	2	50.0	22	56	0.9	4	35					
<b>Other Eligibles</b>	0	0.0	0	0.0	0	0	0.0	0	0	0.0	1	3					
5 and younger	2,195	31.6	24,104	0.4	24	1,357	19.5	14,250	34	0.8	6,942	69,255					
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	15	41.7	148	0.3	12	1	2.8	10	27	0.6	36	258					
45-64	3	75.0	36	0.6	33	1	25.0	12	21	0.9	4	32					
65-74	889	41.4	10,040	0.4	25	456	21.3	4,972	35	0.8	2,145	22,542					
75-84	698	30.5	7,569	0.4	22	484	21.1	5,122	34	0.8	2,291	23,005					
85 and older	590	23.9	6,311	0.5	23	415	16.8	4,134	32	0.8	2,466	23,418					
<b>Male</b>																	
<b>Disabled</b>	1,663	27.2	18,548	0.4	16	619	10.1	6,587	35	0.7	6,113	62,712					
5 and younger	1,079	30.1	12,360	0.3	14	289	8.1	3,210	34	0.7	3,582	38,923					
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	4	100.0	32	47	0.9	4	32					
21-44	5	21.7	60	0.2	2	2	8.7	24	71	0.6	23	257					
45-64	571	28.0	6,520	0.3	11	107	5.2	1,162	32	0.6	2,039	22,253					
65-74	486	33.0	5,603	0.4	19	173	11.7	1,956	35	0.7	1,473	15,965					
75-84	16	42.1	165	0.4	15	2	5.3	24	27	0.7	38	356					
85 and older	1	20.0	12	0.3	29	1	20.0	12	66	1.1	5	60					
<b>Other Eligibles</b>	0	0.0	0	0.0	0	0	0.0	0	0	0.0	0	0					
5 and younger	584	23.1	6,188	0.5	20	330	13.0	3,377	36	0.8	2,531	23,789					
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	14	70.0	161	0.2	14	0	0.0	0	0	0.0	20	187					
45-64	3	42.9	13	1.0	38	0	0.0	0	0	0.0	7	29					
65-74	254	24.9	2,804	0.4	18	154	15.1	1,645	39	0.8	1,022	10,223					
75-84	183	22.1	1,901	0.5	20	100	12.1	1,023	37	0.8	829	7,700					
85 and older	130	19.9	1,309	0.6	26	76	11.6	709	28	0.8	653	5,650					
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0	0.0	0	0					

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

- a. Table 16D includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 1999. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
- c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 1999. For information about these drug groups, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy; \$ = Medicaid reimbursement.

TABLE 17  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,  
 BY BENEFICIARY CHARACTERISTIC<sup>a, b</sup>  
 DUAL ELIGIBLE BENEFICIARIES, IDAHO, 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>\$226</b>	<b>6.3</b>	<b>2,903</b>	<b>28,583</b>
<b>Age</b>				
0-64	394	7.9	160	1,732
65-74	292	7.4	346	3,524
75-84	238	6.5	928	8,989
85 and older	181	5.6	1,469	14,338
Unknown	0	0.0	0	0
<b>Gender</b>				
Female	217	6.2	2,129	21,259
Male	250	6.4	774	7,324
Unknown	0	0.0	0	0
<b>Race</b>				
White	226	6.3	2,848	27,992
African American	145	5.6	7	75
Other/unknown	228	5.4	48	516
<b>Basis of Eligibility</b>				
Aged	215	6.2	2,736	26,827
Disabled	391	7.9	167	1,756
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 Idaho, released by CMS in 11/2003. This table was produced on 06/25/2004.

a. Table 17 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their 1999 Medicaid enrollment. A total of 1,563 beneficiaries who were in nursing facilities for part of their enrollment and their 13,749 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, IDAHO, 1999**

Therapeutic Category	No. of Rx per Bene Mo among Users				\$ per Bene Mo among Users				Total # of Rx	Total Rx \$	No. Residents	As % of Dual All-Year NF Residents	No. of Bene Mos				
	Total	Patented	Off-Patent	Generic	Total	Patented	Off-Patent	Generic									
		Brand-Name	Brand-Name	Brand-Name		Brand-Name	Brand-Name	Brand-Name									
Anti-infective Agents	0.4	0.2	0.0	0.2	\$14	\$12	\$0	\$2	\$39	\$64	\$30	\$11	7,234	\$283,894	1,939	66.8 %	20,376
Biologics	0.2	0.1	0.0	0.1	3	1	0	2	16	10	0	23	4	65	4	0.1	23
Antineoplastic Agents	0.8	0.3	0.4	0.2	106	68	32	6	139	267	92	36	596	83,065	77	2.7	783
Endocrine/Metabolic Drugs	1.2	0.5	0.3	0.5	28	18	5	5	23	37	17	11	16,708	377,202	1,344	46.3	13,619
Cardiovascular Agents	1.9	0.4	0.5	1.0	42	17	14	11	22	38	27	11	36,881	796,295	1,916	66.0	19,177
Respiratory Agents	0.7	0.3	0.0	0.4	25	13	1	12	34	48	25	26	8,098	275,940	1,059	36.5	10,875
Gastrointestinal Agents	1.1	0.4	0.1	0.5	61	41	8	13	57	93	65	25	14,221	815,024	1,295	44.6	13,308
Genitourinary Agents	0.6	0.3	0.0	0.2	20	16	1	4	36	47	50	18	3,505	126,464	599	20.6	6,326
CNS Drugs	1.5	0.8	0.2	0.5	82	59	15	8	55	75	85	15	29,631	1,615,726	1,942	66.9	19,767
Stimulants/Anti-obesity/Anorexia	0.7	0.0	0.1	0.6	13	0	2	11	20	135	30	19	193	3,954	29	1.0	293
Miscellaneous Psychological/Neurological Agents	0.8	0.7	0.0	0.1	88	86	0	2	114	123	0	22	1,031	117,319	138	4.8	1,333
Analgesics and Anesthetics	1.1	0.3	0.1	0.7	39	22	8	10	36	77	59	14	18,802	673,838	1,681	57.9	17,178
Neuromuscular Agents	1.1	0.3	0.2	0.6	42	19	10	13	39	68	45	23	12,164	478,246	1,086	37.4	11,474
Nutritional Products	0.9	0.0	0.3	0.6	16	0	8	8	18	12	26	14	8,397	152,003	922	31.8	9,282
Hematological Agents	1.2	0.0	0.5	0.7	29	9	10	10	24	224	21	15	6,845	166,864	554	19.1	5,661
Topical Products	0.4	0.2	0.1	0.2	13	6	4	2	29	36	44	14	6,259	183,170	1,352	46.6	14,636
Miscellaneous Products	0.5	0.2	0.0	0.2	17	6	0	11	38	29	0	45	61	2,296	13	0.4	135
Unknown Therapeutic Category	0.6	0.0	0.0	0.0	21	0	0	0	35	0	0	0	8,748	303,165	1,362	46.9	14,276
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.	179,378	6,454,530	n.a.	n.a.	n.a.

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

a. Table 18 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 1999. A total of 1,563 beneficiaries who were in nursing facilities for part of their enrollment and their 13,749 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 Idaho, 4.5 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.

Table 18

Dual Eligible Beneficiaries

Bene Mo(s) = benefit month(s); CMS = Center for Medicare and Medicaid Services; CNS = Central Nervous System; MAX = Medicaid Analytic Extract; n.a. = not applicable; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

APPENDIX TABLE A.3  
 CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY<sup>a, b</sup>  
 DUAL ELIGIBLE BENEFICIARIES, IDAHO, 1999

Beneficiary Characteristics	No. of Benes				No. of Bene Mos			
	All	Aged	Disabled	Unknown	All	Aged	Disabled	Unknown
<b>All</b>	<b>16,657</b>	<b>9,405</b>	<b>7,184</b>	<b>0</b>	<b>171,212</b>	<b>92,535</b>	<b>78,168</b>	<b>0</b>
<b>Age</b>								
5 and younger	3	0	3	0	36	0	36	0
6-14	7	0	7	0	68	0	68	0
15-20	48	0	48	0	503	0	503	0
21-44	3,644	0	3,588	1	39,661	0	39,216	438
45-64	3,478	0	3,467	11	37,777	0	37,716	61
65-74	3,228	3,167	61	0	33,296	32,765	531	0
75-84	3,129	3,119	9	1	30,800	30,702	95	3
85 and older	3,120	3,119	1	0	29,071	29,068	3	0
Unknown	0	0	0	0	0	0	0	0
<b>Gender</b>								
Female	10,544	6,901	3,602	41	108,500	68,962	39,245	293
Male	6,113	2,504	3,582	26	62,712	23,573	38,923	209
Unknown	0	0	0	0	0	0	0	0
<b>Race</b>								
White	15,422	8,662	6,697	62	157,870	84,581	72,819	463
African American	58	32	26	0	590	319	271	0
Other/unknown	1,177	711	461	5	12,752	7,635	5,078	39
<b>Use of Nursing Facilities</b>								
All year	2,903	2,736	167	0	28,583	26,827	1,756	0
Part year	1,563	1,390	173	0	13,749	11,981	1,768	0
None	12,191	5,279	6,844	67	128,880	53,727	74,644	502
<b>Maintenance Assistance Status</b>								
Cash	9,043	2,146	6,895	2	98,393	23,276	75,097	20
Medically needy	0	0	0	0	0	0	0	0
Poverty related	239	76	148	14	2,347	745	1,516	79
Other/unknown	7,375	7,183	141	51	70,472	68,514	1,555	403
<b>Dual Status<sup>c</sup></b>								
Full dual, all year	16,129	9,128	6,934	66	165,869	89,811	75,557	494
Full dual, part year	528	277	250	1	5,343	2,724	2,611	8
<b>Managed Care Status</b>								
FFS all year	16,657	9,405	7,184	67	171,212	92,535	78,168	502
FFS part year, with Rx claims	0	0	0	0	0	0	0	0
FFS part year, no Rx claims	0	0	0	0	0	0	0	0
MC all year, with Rx claims	0	0	0	0	0	0	0	0
MC all year, no Rx claims	0	0	0	0	0	0	0	0

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

a. Table A.3 includes the beneficiaries represented by Cell F of Table 1. Benefit months are months during which beneficiaries had pharmacy benefit.

b. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services. The total includes some beneficiaries with unknown basis of eligibility and some whose age categories are not consistent with basis of eligibility.

c. The "Full dual, all year" group contains beneficiaries who had Medicare as well as Medicaid pharmacy benefits during all months of Medicaid enrollment in 1999. The "Full dual, part year" group contains beneficiaries who had such benefits for some, but not all, months of their enrollment. Refer to footnote g of Table 1 for more information about how we determined dual eligibility status.

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



APPENDIX TABLE A.4  
 MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS  
 DUAL ELIGIBLE BENEFICIARIES, IDAHO, 1999

Beneficiary Characteristics	Bene Mos in Cell F of Table 1		Bene Mos in Cell G of Table 1		Bene Mos in Cell H of Table 1	
	No. of Benes	No. of Bene Mos	No. of Benes	No. of Bene Mos	No. of Benes	No. of Bene Mos
<b>All</b>	<b>16,657</b>	<b>171,212</b>	<b>16,657</b>	<b>171,212</b>	<b>0</b>	<b>0</b>
FFS all year	16,657	171,212	16,657	171,212	0	0
FFS part year, with Rx claims	0	0	0	0	0	0
FFS part year, with no Rx claims	0	0	0	0	0	0
MC all year, with Rx claims	0	0	0	0	0	0
MC all year, with no Rx claims	0	0	0	0	0	0

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

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

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

Total Number of Dual Eligible Beneficiaries 16,657  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries \$34,487,500  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary \$2,071

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	1,856	11.1 %	\$0	0.0 %
1-500	3,626	21.8	771,271	2.2
501-1,000	2,094	12.6	1,544,476	4.5
1,001-1,500	1,681	10.1	2,079,818	6.0
1,501-2,000	1,410	8.5	2,454,863	7.1
2,001-2,500	1,069	6.4	2,396,185	6.9
2,501-3,000	921	5.5	2,524,278	7.3
3,001-3,500	698	4.2	2,268,685	6.6
3,501-4,000	559	3.4	2,092,039	6.1
4,001-4,500	499	3.0	2,122,128	6.2
4,501-5,000	404	2.4	1,912,867	5.5
5,001-5,500	350	2.1	1,834,815	5.3
5,501-6,000	257	1.5	1,478,338	4.3
6,001-6,500	202	1.2	1,262,924	3.7
6,501-7,000	185	1.1	1,248,547	3.6
7,001-7,500	133	0.8	964,962	2.8
7,501-8,000	115	0.7	891,687	2.6
8,001-8,500	107	0.6	883,454	2.6
8,501-9,000	94	0.6	821,832	2.4
9,001-9,500	61	0.4	564,874	1.6
9,501-10,000	53	0.3	517,460	1.5
10,001+	283	1.7	3,851,997	11.2

Source: Data for this table are from the MAX 1999 file for Idaho, released by CMS in 1/2003. 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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