

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

LIST OF TABLES

OVERVIEW OF STUDY POPULATION

TABLE 1. OVERVIEW OF BENEFICIARY SELECTION CRITERIA FOR STUDY POPULATION

FOR ALL MEDICAID BENEFICIARIES

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

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

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

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

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

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

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

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

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

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

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

FOR DUAL ELIGIBLE BENEFICIARIES

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

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

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

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

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

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

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

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

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

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

TABLE 11

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

Beneficiary Characteristics	No. of Benes							No. of Bene Mos						
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown		
All	188,454	88,683	97,549	2,215	7	0	1,991,854	908,508	1,064,444	18,856	46	0		
Age														
5 and younger	14	10	4	0	0	0	77	48	29	0	0	0		
6-14	15	1	11	0	3	0	140	12	102	0	26	0		
15-20	214	2	205	4	3	0	1,649	24	1,578	28	19	0		
21-44	36,387	134	34,851	1,401	1	0	391,023	1,451	377,715	11,856	1	0		
45-64	40,089	325	39,065	699	0	0	433,089	3,278	423,701	6,110	0	0		
65-74	38,387	21,402	16,887	98	0	0	415,477	227,436	187,265	776	0	0		
75-84	38,186	33,110	5,063	13	0	0	404,094	345,628	58,380	86	0	0		
85 and older	35,161	33,698	1,463	0	0	0	346,300	330,626	15,674	0	0	0		
Unknown	1	1	0	0	0	5	0	5	0	0	0	0		
Gender														
Female	119,571	66,744	51,687	1,136	4	0	1,270,868	691,401	569,880	9,570	17	0		
Male	68,883	21,939	45,862	1,079	3	0	720,986	217,107	494,564	9,286	29	0		
Unknown	0	0	0	0	0	0	0	0	0	0	0	0		
Race														
White	151,632	74,510	76,017	1,103	2	0	1,621,575	773,167	838,860	9,541	7	0		
African American	10,202	2,935	7,036	231	0	0	110,830	32,286	76,541	2,003	0	0		
Other/unknown	26,620	11,238	14,496	881	5	0	259,449	103,055	149,043	7,312	39	0		
Use of Nursing Facilities														
All year	33,300	30,455	2,844	1	0	0	337,136	306,068	31,067	1	0	0		
Part year	16,737	13,507	3,224	6	0	0	158,577	123,872	34,663	42	0	0		
None	138,417	44,721	91,481	2,208	7	0	1,496,141	478,568	998,714	18,813	46	0		
Maintenance Assistance Status														
Cash	87,020	30,616	56,216	188	0	0	977,317	345,503	630,427	1,387	0	0		
Medically needy	11,964	7,321	4,643	0	0	0	115,697	71,323	44,374	0	0	0		
Poverty-related	63,354	31,312	31,792	244	6	0	656,553	316,816	337,747	1,949	41	0		
Other/unknown	26,116	19,434	4,898	1,783	1	0	242,287	174,866	51,896	15,520	5	0		
Dual Medicare Status^c														
Full dual, all year	186,794	87,145	97,432	2,210	7	0	1,973,737	891,650	1,063,231	18,810	46	0		
Full dual, part year	1,660	1,538	117	5	0	0	18,117	16,858	1,213	46	0	0		
Managed Care Status														
FFS all year	178,573	88,271	88,877	1,420	5	0	1,933,991	906,075	1,012,962	14,911	43	0		
FFS part year, with Rx claims	8,739	353	7,694	692	0	0	51,847	2,085	46,291	3,471	0	0		
FFS part year, no Rx claims	1,142	59	978	103	2	0	6,016	348	5,191	474	3	0		

Source: Data for this table are from the MAX 1999 file for Massachusetts, released by CMS in 12/2003. This table was produced on 06/25/2004.

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

Table 11

Dual Eligible Beneficiaries

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

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

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

TABLE 12
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BENEFICIARY CHARACTERISTIC^{a,b}
 DUAL ELIGIBLE BENEFICIARIES, MASSACHUSETTS, 1999

Beneficiary Characteristics	% with at Least One Rx	Mean No. of Rx	Mean Rx \$	\$ per Rx	Mean \$, All Services	Rx \$ as % of All Services	Mean OTC Drug \$ ^c	No. of Beneficiaries
All	87.3 %	37.7	\$1,710	\$45	\$14,133	12.1 %	\$37	188,454
Age								
5 and younger	85.7	32.4	1,646	51	26,626	6.2	19	14
6-14	86.7	36.9	3,056	83	8,271	37.0	7	15
15-20	79.0	17.7	1,245	70	8,778	14.2	17	214
21-44	85.8	34.2	2,304	67	12,745	18.1	25	36,387
45-64	88.2	41.4	2,204	53	13,385	16.5	57	40,089
65-74	86.6	35.0	1,431	41	8,732	16.4	55	38,387
75-84	87.4	38.7	1,392	36	14,550	9.6	34	38,186
85 and older	88.5	39.0	1,187	31	21,899	5.4	12	35,161
Unknown	100.0	39.0	612	16	11,913	5.1	0	1
Basis of Eligibility								
Aged	86.6	37.0	1,282	35	16,563	7.7	25	88,683
Disabled	88.0	38.6	2,106	55	12,168	17.3	48	97,549
Adults	83.7	25.3	1,448	57	3,439	42.1	26	2,215
Children	57.1	16.7	3,373	202	4,308	78.3	9	7
Unknown	0.0	0.0	0	0	0	0.0	0	0
Gender								
Female	89.5	40.2	1,651	41	14,420	11.5	39	119,571
Male	83.5	33.3	1,813	55	13,635	13.3	34	68,883
Unknown	0.0	0.0	0	0	0	0.0	0	0
Race								
White	87.7	38.5	1,727	45	14,503	11.9	36	151,632
African American	86.1	32.2	1,573	49	8,343	18.9	61	10,202
Other/unknown	85.7	35.3	1,669	47	14,248	11.7	36	26,620
Use of Nursing Facilities								
Entire year	94.3	52.0	1,751	34	32,836	5.3	19	33,300
Part year	86.1	42.4	1,547	37	24,307	6.4	26	16,737
None	85.8	33.7	1,720	51	8,404	20.5	43	138,417
Maintenance Assistance Status								
Cash	88.5	35.3	1,657	47	8,110	20.4	45	87,020
Medically needy	79.2	32.7	1,438	44	10,745	13.4	28	11,964
Poverty related	87.8	40.6	1,876	46	19,977	9.4	34	63,354
Other/unknown	85.6	41.1	1,613	39	21,582	7.5	21	26,116

Source: Data for this table are from the MAX 1999 file for Massachusetts, released by CMS in 12/2003. This table was produced on 06/25/2004.

Table 12

Dual Eligible Beneficiaries

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

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

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

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

TABLE 13
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a,b}
 DUAL ELIGIBLE BENEFICIARIES, MASSACHUSETTS, 1999

Beneficiary Characteristics	Mean No. of Rx	Mean Rx \$	Rx \$ as % of All Services	No. of Rx, % with:					Mean \$, All Services	Benes	Bene Mos	
				None	More than 0, but 1 or Less	More than 1, but 2 or Less	More than 2, but 5 or Less	More than 5, but 10 or Less				More than 10
All	3.6	\$162	12.1 %	12.7 %	21.5 %	13.3 %	29.3 %	18.2 %	5.0 %	\$1,337	188,454	1,991,854
Age												
5 and younger	5.9	299	6.2	14.3	7.1	0.0	35.7	28.6	14.3	4,841	14	77
6-14	4.0	328	37.0	13.3	20.0	6.7	40.0	6.7	13.3	886	15	140
15-20	2.3	162	14.2	21.0	33.2	13.1	17.8	8.4	6.5	1,139	214	1,649
21-44	3.2	214	18.1	14.2	27.7	13.2	25.4	14.1	5.4	1,186	36,387	391,023
45-64	3.8	204	16.5	11.8	20.1	13.0	29.8	19.0	6.3	1,239	40,089	433,089
65-74	3.2	132	16.4	13.4	24.6	14.3	27.7	15.7	4.3	807	38,387	415,477
75-84	3.7	132	9.6	12.6	19.4	13.3	30.6	19.7	4.4	1,375	38,186	404,094
85 and older	4.0	121	5.4	11.5	15.5	12.7	33.2	22.8	4.3	2,223	35,161	346,300
Unknown	7.8	122	5.1	0.0	0.0	0.0	0.0	100.0	0.0	2,383	1	5
Basis of Eligibility												
Aged	3.6	125	7.7	13.4	19.6	13.1	30.1	19.5	4.3	1,617	88,683	908,508
Disabled	3.5	193	17.3	12.0	23.1	13.5	28.8	17.2	5.5	1,115	97,549	1,064,444
Adults	3.0	170	42.1	16.3	27.7	13.7	21.7	12.0	8.6	404	2,215	18,856
Children	2.5	513	78.3	42.9	0.0	0.0	57.1	0.0	0.0	656	7	46
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Gender												
Female	3.8	155	11.5	10.5	19.8	13.6	31.0	19.9	5.2	1,357	119,571	1,270,868
Male	3.2	173	13.3	16.5	24.5	12.8	26.3	15.4	4.5	1,303	68,883	720,986
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	3.6	162	11.9	12.3	21.2	13.3	29.6	18.6	5.0	1,356	151,632	1,621,575
African American	3.0	145	18.9	13.9	27.3	14.4	27.5	13.5	3.4	768	10,202	110,830
Other/unknown	3.6	171	11.7	14.3	21.0	12.8	28.4	18.2	5.4	1,462	26,620	259,449
Use of Nursing Facilities												
Entire year	5.1	173	5.3	5.7	10.3	10.1	34.3	31.2	8.3	3,243	33,300	337,136
Part year	4.5	163	6.4	13.9	11.9	10.4	30.7	26.2	6.9	2,566	16,737	158,577
None	3.1	159	20.5	14.2	25.3	14.4	27.9	14.1	3.9	778	138,417	1,496,141
Maintenance Assistance Status												
Cash	3.1	148	20.4	11.5	26.4	14.8	28.8	14.7	3.8	722	87,020	977,317
Medically needy	3.4	149	13.4	20.8	19.4	12.1	27.2	16.3	4.2	1,111	11,964	115,697
Poverty related	3.9	181	9.4	12.2	18.4	12.6	30.1	20.9	5.8	1,928	63,354	656,553
Other/unknown	4.4	174	7.5	14.4	13.5	10.5	30.0	24.5	7.1	2,326	26,116	242,287

Source: Data for this table are from the MAX 1999 file for Massachusetts, released by CMS in 12/2003. This table was produced on 06/25/2004.

Table 13

Dual Eligible Beneficiaries

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

TABLE 14
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, MASSACHUSETTS, 1999

Beneficiary Characteristics	All Rx		Patented Brand-Name Drugs		Off-Patent Brand-Name Drugs		Generic Drugs	
	No. of Rx	Rx \$	No. of Rx	Rx \$	No. of Rx	Rx \$	No. of Rx	Rx \$
All	3.6	\$162	1.3	\$105	0.5	\$29	1.7	\$21
Age								
5 and younger	5.9	299	2.2	200	0.4	15	2.8	41
6-14	4.0	328	1.1	113	1.2	191	1.5	15
15-20	2.3	162	1.0	111	0.4	36	0.9	12
21-44	3.2	214	1.3	149	0.4	38	1.4	22
45-64	3.8	204	1.5	137	0.5	35	1.7	24
65-74	3.2	132	1.2	84	0.4	23	1.5	19
75-84	3.7	132	1.2	81	0.5	23	1.8	21
85 and older	4.0	121	1.2	72	0.6	22	2.0	21
Unknown	7.8	122	2.4	66	1.6	36	3.8	21
Basis of Eligibility								
Aged	3.6	125	1.2	77	0.5	22	1.8	20
Disabled	3.5	193	1.4	129	0.5	34	1.6	23
Adults	3.0	170	1.2	120	0.3	27	1.4	17
Children	2.5	513	0.6	157	0.9	340	1.0	16
Unknown	0.0	0	0.0	0	0.0	0	0.0	0
Gender								
Female	3.8	155	1.3	99	0.5	28	1.8	22
Male	3.2	173	1.2	116	0.4	30	1.4	21
Unknown	0.0	0	0.0	0	0.0	0	0.0	0
Race								
White	3.6	162	1.3	104	0.5	29	1.7	22
African American	3.0	145	1.1	99	0.4	22	1.3	16
Other/unknown	3.6	171	1.3	116	0.5	28	1.7	21
Use of Nursing Facilities								
Entire year	5.1	173	1.6	109	0.7	30	2.6	29
Part year	4.5	163	1.5	106	0.6	26	2.2	25
None	3.1	159	1.2	105	0.4	29	1.4	19
Maintenance Assistance Status								
Cash	3.1	148	1.2	95	0.4	27	1.4	19
Medically needy	3.4	149	1.2	95	0.4	27	1.6	21
Poverty related	3.9	181	1.4	120	0.5	31	1.8	24
Other/unknown	4.4	174	1.5	113	0.6	31	2.1	25

Source: Data for this table are from the MAX 1999 file for Massachusetts, released by CMS in 12/2003. 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 Massachusetts, 4.2 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all combined. For information about this classification method, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).

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

TABLE 15

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, MASSACHUSETTS, 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	Generic	Total No. of Rx	Total Rx \$	No. Dual Benes	As % of Dual Benes	No. of Bene Mos		
																Generic	Patented Brand-Name
Anti-infective Agents	0.3	0.2	0.0	0.2	\$26	\$24	\$0	\$2	\$78	\$137	\$61	\$10	340,664	\$26,601,192	94,264	50.0 %	1,035,907
Biologics	0.1	0.1	0.0	0.1	40	6	13	22	295	90	1,656	351	1,289	380,565	846	0.4	9,451
Antineoplastic Agents	0.5	0.2	0.2	0.2	85	55	22	7	166	283	146	44	30,179	5,002,846	5,640	3.0	58,978
Endocrine/Metabolic Drugs	0.8	0.3	0.0	0.4	22	17	1	4	27	51	27	9	527,533	14,360,880	60,718	32.2	666,833
Cardiovascular Agents	1.4	0.4	0.3	0.7	43	23	13	7	30	54	43	10	1,520,618	46,081,151	98,981	52.5	1,078,439
Respiratory Agents	0.8	0.4	0.0	0.3	29	23	1	6	38	52	37	18	433,110	16,564,507	51,612	27.4	568,623
Gastrointestinal Agents	0.6	0.2	0.1	0.3	36	25	5	6	59	108	74	20	422,984	24,989,757	62,920	33.4	688,224
Genitourinary Agents	0.4	0.2	0.0	0.2	14	12	0	2	36	52	37	14	85,701	3,101,273	19,508	10.4	217,128
CNS Drugs	1.4	0.6	0.2	0.6	93	62	22	9	65	102	97	15	1,510,807	98,793,608	98,145	52.1	1,065,535
Stimulants/Anti-obesity/Anorexia	0.6	0.1	0.2	0.3	31	8	14	9	56	98	65	34	4,952	275,139	809	0.4	8,932
Miscellaneous Psychological/Neurological Agents	0.6	0.5	0.0	0.1	69	68	0	1	112	125	55	13	22,400	2,515,962	3,472	1.8	36,668
Analgesics and Anesthetics	0.6	0.1	0.1	0.4	22	14	4	4	37	99	68	10	513,135	18,894,266	78,422	41.6	852,330
Neuromuscular Agents	1.1	0.4	0.1	0.5	47	32	7	8	44	82	44	15	595,601	26,301,897	51,417	27.3	564,767
Nutritional Products	0.6	0.0	0.1	0.5	7	0	2	5	13	11	29	11	138,758	1,758,788	23,436	12.4	248,135
Hematological Agents	0.8	0.1	0.2	0.5	27	15	5	7	35	276	23	14	214,466	7,548,080	26,572	14.1	283,096
Topical Products	0.5	0.2	0.1	0.2	14	9	3	2	30	46	37	12	392,693	11,659,604	74,891	39.7	831,482
Miscellaneous Products	0.4	0.2	0.1	0.2	82	46	30	6	199	301	293	40	21,690	4,314,763	4,949	2.6	52,662
Unknown Therapeutic Category	0.5	0.0	0.0	0.0	19	0	0	0	40	0	0	0	326,123	13,166,202	61,555	32.7	679,423
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.	7,102,703	322,310,480	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 1999 file for Massachusetts, released by CMS in 12/2003. This table was produced on 06/25/2004.

- a. Table 15 includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 1999. A beneficiary who used drugs from two or more categories was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
- c. For information about these therapeutic categories, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).
- d. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In Massachusetts, 4.2 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).

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

TABLE 16

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP^{a, b, c}
DUAL ELIGIBLE BENEFICIARIES, MASSACHUSETTS, 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	\$50,279,360	52,710	28.0 %	588,768	0.8	\$102
ANTIDEPRESSANTS	35,118,671	88,159	46.8	979,673	0.6	55
ANTICONVULSANT	21,811,013	46,146	24.5	519,142	0.8	51
ULCER DRUGS	19,537,907	57,766	30.7	644,342	0.4	69
ANTIVIRAL	14,273,924	8,850	4.7	100,734	0.5	312
ANTHYPERLIPIDEMIC	13,223,333	25,170	13.4	288,248	0.6	78
ANTHYPERTENSIVE	11,877,566	47,990	25.5	535,911	0.6	36
ANTIDIABETIC	10,918,464	38,916	20.7	435,409	0.7	38
ANTIASTHMATIC	10,853,580	58,715	31.2	652,457	0.5	36
ANALGESICS - Narcotic	10,436,056	67,699	35.9	743,959	0.4	39

Source: Data for this table are from the MAX 1999 file for Massachusetts, released by CMS in 12/2003. This table was produced on 06/25/2004.

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

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

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

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

TABLE 16A
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR TOP 10 DRUG GROUPS COMBINED
 AND FIRST AND SECOND GROUPS SEPARATELY, BY SEX, BOE, AND AGE^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, MASSACHUSETTS, 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 \$
All	3,241,345	\$198,329,874	52,710	28.0 %	588,768	0.8	\$85	88,159	46.8 %	979,673	0.6	\$36
Female	2,054,741	114,854,268	31,754	26.6	353,333	0.8	70	59,072	49.4	657,288	0.7	36
Disabled	1,079,778	68,530,491	16,539	32.0	191,453	0.9	89	31,388	60.7	361,463	0.6	38
5 and younger	1	1	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	52	1,503	0	0.0	0	0.0	0	1	20.0	12	2.8	66
15-20	571	35,166	19	19.4	188	0.7	61	32	32.7	265	0.6	40
21-44	320,324	23,746,567	6,843	46.4	79,091	0.9	100	10,972	74.4	126,229	0.6	41
45-64	463,626	29,341,985	6,645	33.2	77,329	0.9	91	14,074	70.4	162,148	0.6	40
65-74	210,132	11,208,635	1,976	17.1	22,833	0.8	68	4,446	38.5	51,518	0.6	30
75-84	67,785	3,403,644	750	18.6	8,714	0.7	61	1,370	33.9	15,880	0.6	28
85 and older	17,287	792,990	306	24.7	3,298	0.6	42	493	39.7	5,411	0.7	33
Other Eligibles	974,956	46,323,717	15,215	22.4	161,880	0.6	47	27,684	40.8	295,825	0.7	33
5 and younger	73	1,782	0	0.0	0	0.0	0	5	62.5	34	0.6	20
6-14	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	50	2,237	2	33.3	19	0.5	8	1	16.7	12	1.0	63
21-44	11,624	720,994	243	27.9	2,620	0.6	50	544	62.5	5,575	0.6	37
45-64	5,958	359,528	96	24.1	1,037	0.8	75	219	54.9	2,253	0.7	43
65-74	204,505	10,840,477	2,315	16.6	25,824	0.7	66	4,518	32.4	50,410	0.6	31
75-84	378,055	18,190,843	5,464	22.4	58,800	0.6	48	9,983	41.0	107,951	0.7	33
85 and older	374,691	16,207,856	7,095	25.0	73,580	0.6	39	12,414	43.8	129,590	0.7	34
Male	1,186,604	83,475,606	20,956	30.4	235,435	1.0	109	29,087	42.2	322,385	0.6	36
Disabled	873,476	68,093,353	16,084	35.1	185,844	1.0	123	20,931	45.6	238,898	0.6	36
5 and younger	47	2,064	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	28	1,096	0	0.0	0	0.0	0	2	33.3	24	0.2	3
15-20	662	54,899	17	15.9	149	0.9	154	19	17.8	155	1.0	53
21-44	382,647	34,573,749	8,967	44.6	103,679	1.1	129	10,374	51.6	118,689	0.6	37
45-64	388,231	28,201,732	6,123	32.1	70,854	1.1	123	8,922	46.8	101,794	0.6	37
65-74	82,932	4,302,309	720	13.5	8,260	0.8	77	1,287	24.1	14,624	0.6	29
75-84	16,087	819,270	203	19.9	2,350	0.8	69	256	25.1	2,898	0.7	31
85 and older	2,842	138,234	54	24.3	552	0.6	56	71	32.0	714	0.7	31
Other Eligibles	313,128	15,382,253	4,872	21.2	49,591	0.7	55	8,156	35.4	83,487	0.7	33
5 and younger	6	437	0	0.0	0	0.0	0	1	50.0	1	2.0	124
6-14	3	11	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	6	269	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	7,212	562,845	107	16.1	1,114	0.8	94	285	42.8	2,853	0.6	35
45-64	8,904	569,157	126	20.2	1,362	0.9	91	227	36.3	2,420	0.6	36
65-74	100,128	5,206,348	1,313	17.3	14,021	0.7	68	2,040	26.9	21,894	0.6	34
75-84	126,669	5,991,533	1,926	21.9	19,514	0.6	50	3,289	37.5	33,643	0.7	33
85 and older	70,200	3,051,653	1,400	26.1	13,580	0.6	40	2,314	43.1	22,676	0.7	32
Unknown	7	60	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 Massachusetts, released by CMS in 12/2003. This table was produced on 06/25/2004.

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

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

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

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

TABLE 16B
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR THIRD TO FIFTH TOP DRUG GROUPS
 SEPARATELY, BY SEX, BOE, AND AGE^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, MASSACHUSETTS, 1999

Beneficiary Characteristics	ANTICONVULSANT					ULCER DRUGS					ANTIVIRAL				
	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
All	46,146	24.5 %	519,142	0.8	\$42	57,766	30.7 %	644,342	0.4	\$30	8,850	4.7 %	100,734	0.5	\$142
Female	27,146	22.7	304,972	0.8	39	39,518	33.1	441,635	0.4	31	3,406	2.8	39,139	0.3	91
Disabled	17,286	33.4	199,256	0.8	45	17,558	34.0	202,745	0.4	29	2,430	4.7	28,233	0.4	117
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	4	80.0	48	0.1	5	1	20.0	12	0.1	3
15-20	22	22.4	195	0.9	51	4	4.1	29	0.4	45	0	0.0	0	0.0	0
21-44	7,558	51.2	86,929	0.8	50	3,713	25.2	42,848	0.4	28	1,362	9.2	15,746	0.4	133
45-64	7,258	36.3	84,005	0.8	44	7,363	36.8	84,887	0.4	31	817	4.1	9,541	0.4	117
65-74	1,749	15.1	20,191	0.7	30	4,419	38.3	51,204	0.4	28	176	1.5	2,079	0.2	43
75-84	553	13.7	6,364	0.7	26	1,576	39.0	18,473	0.4	29	58	1.4	669	0.1	10
85 and older	146	11.8	1,572	0.7	23	479	38.6	5,256	0.5	30	16	1.3	186	0.1	8
Other Eligibles	9,860	14.5	105,716	0.8	27	21,959	32.3	238,885	0.5	31	976	1.4	10,906	0.2	22
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	2	33.3	19	0.5	10	2	33.3	24	0.5	46	0	0.0	0	0.0	0
21-44	314	36.1	3,286	0.7	36	142	16.3	1,454	0.3	30	75	8.6	772	0.4	113
45-64	127	31.8	1,282	0.9	41	99	24.8	1,016	0.4	32	19	4.8	220	0.3	75
65-74	2,212	15.9	24,545	0.8	31	4,321	31.0	48,900	0.4	28	179	1.3	2,070	0.2	24
75-84	3,813	15.7	41,221	0.8	27	8,206	33.7	90,710	0.5	31	298	1.2	3,395	0.1	12
85 and older	3,392	12.0	35,363	0.7	24	9,189	32.4	96,781	0.6	34	405	1.4	4,449	0.1	9
Male	19,000	27.6	214,170	0.9	47	18,248	26.5	202,707	0.4	30	5,444	7.9	61,595	0.5	174
Disabled	14,994	32.7	172,747	0.9	50	11,140	24.3	127,419	0.4	30	5,141	11.2	58,321	0.5	180
5 and younger	0	0.0	0	0.0	0	2	100.0	16	0.8	45	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	3	50.0	36	0.4	20	1	16.7	12	0.1	3
15-20	16	15.0	154	1.2	60	11	10.3	132	0.4	32	1	0.9	12	0.6	485
21-44	8,051	40.1	92,880	0.9	54	3,737	18.6	42,942	0.4	30	3,396	16.9	38,353	0.5	179
45-64	6,017	31.6	69,297	0.9	48	5,245	27.5	59,624	0.4	30	1,655	8.7	18,961	0.5	188
65-74	727	13.6	8,377	0.8	32	1,714	32.1	19,709	0.4	28	74	1.4	817	0.4	68
75-84	151	14.8	1,713	0.8	28	366	35.8	4,272	0.4	29	12	1.2	142	0.4	65
85 and older	32	14.4	326	0.6	24	62	27.9	688	0.5	34	2	0.9	24	0.1	2
Other Eligibles	4,006	17.4	41,423	0.8	33	7,108	30.9	75,288	0.5	31	303	1.3	3,274	0.3	71
5 and younger	1	50.0	1	1.0	221	1	50.0	1	1.0	82	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	1	33.3	12	0.1	2	0	0.0	0	0.0	0
21-44	163	24.5	1,664	0.8	44	103	15.5	1,070	0.3	30	62	9.3	616	0.4	160
45-64	153	24.5	1,623	0.9	45	135	21.6	1,466	0.5	33	23	3.7	234	0.6	210
65-74	1,326	17.5	14,203	0.8	38	2,221	29.3	24,511	0.4	28	77	1.0	861	0.2	50
75-84	1,549	17.6	15,897	0.8	29	2,898	33.0	30,808	0.5	31	95	1.1	1,040	0.2	36
85 and older	814	15.1	8,035	0.8	28	1,749	32.6	17,420	0.5	34	46	0.9	523	0.1	7
Unknown	0	0.0	0	0.0	0	1	100.0	5	1.0	10	0	0.0	0	0.0	0

Table 16B

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 1999 file for Massachusetts, released by CMS in 12/2003. This table was produced on 06/25/2004.

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

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

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

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

TABLE 16C
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR SIXTH TO EIGHTH TOP DRUG GROUPS
 SEPARATELY, BY SEX, BOE, AND AGE^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, MASSACHUSETTS, 1999

Beneficiary Characteristics	ANTHYPERLIPIDEMIC					ANTHYPERTENSIVE					ANTIDIABETIC				
	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
All	25,170	13.4 %	288,248	0.6	\$46	47,990	25.5 %	535,911	0.6	\$22	38,916	20.7 %	435,409	0.7	\$25
Female	16,683	14.0	191,763	0.6	47	31,429	26.3	351,508	0.6	22	26,315	22.0	295,510	0.7	25
Disabled	8,666	16.8	100,384	0.6	47	11,892	23.0	137,075	0.6	22	12,257	23.7	140,740	0.7	29
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	20.0	4	0.3	1	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	3	3.1	24	0.5	7	2	2.0	24	0.1	5
21-44	637	4.3	7,394	0.6	37	1,217	8.3	13,941	0.5	16	1,251	8.5	14,396	0.7	30
45-64	3,871	19.4	44,578	0.6	47	4,460	22.3	51,049	0.6	21	5,239	26.2	59,939	0.7	30
65-74	3,282	28.4	38,094	0.6	49	4,299	37.2	49,834	0.6	23	4,239	36.7	48,726	0.7	29
75-84	796	19.7	9,396	0.6	48	1,531	37.9	17,943	0.6	24	1,275	31.5	14,871	0.6	25
85 and older	80	6.4	922	0.6	41	381	30.7	4,280	0.7	22	251	20.2	2,784	0.6	18
Other Eligibles	8,017	11.8	91,379	0.6	47	19,536	28.8	214,428	0.7	22	14,058	20.7	154,770	0.7	22
5 and younger	0	0.0	0	0.0	0	1	12.5	7	0.9	24	1	12.5	2	3.0	52
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	29	3.3	264	0.5	39	55	6.3	558	0.4	15	51	5.9	530	0.7	30
45-64	31	7.8	336	0.6	46	50	12.5	530	0.6	25	71	17.8	742	0.7	31
65-74	3,166	22.7	36,391	0.6	47	4,429	31.8	50,383	0.6	23	3,957	28.4	44,614	0.6	25
75-84	3,710	15.2	42,440	0.6	47	7,731	31.8	86,533	0.6	23	6,087	25.0	67,437	0.7	22
85 and older	1,081	3.8	11,948	0.6	44	7,270	25.7	76,417	0.7	22	3,891	13.7	41,445	0.7	16
Male	8,487	12.3	96,485	0.6	44	16,561	24.0	184,403	0.6	22	12,601	18.3	139,899	0.7	25
Disabled	5,987	13.1	68,614	0.6	44	9,267	20.2	105,818	0.6	22	7,825	17.1	89,029	0.7	28
5 and younger	0	0.0	0	0.0	0	1	50.0	4	1.5	8	0	0.0	0	0.0	0
6-14	1	16.7	12	0.4	20	1	16.7	12	0.2	3	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	8	7.5	85	0.7	23	2	1.9	15	1.0	57
21-44	1,301	6.5	15,069	0.6	38	1,943	9.7	22,408	0.6	19	1,483	7.4	17,104	0.7	30
45-64	3,331	17.5	37,931	0.6	46	4,756	24.9	53,834	0.6	22	4,396	23.1	49,776	0.7	29
65-74	1,185	22.2	13,619	0.6	47	2,076	38.9	23,926	0.6	24	1,625	30.4	18,495	0.6	26
75-84	154	15.1	1,809	0.6	46	422	41.3	4,877	0.6	22	268	26.2	3,075	0.6	22
85 and older	15	6.8	174	0.4	31	60	27.0	672	0.6	25	51	23.0	564	0.6	14
Other Eligibles	2,500	10.9	27,871	0.6	44	7,294	31.7	78,585	0.6	23	4,776	20.7	50,870	0.6	21
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	1	33.3	12	0.4	21	0	0.0	0	0.0	0
21-44	41	6.2	423	0.5	29	51	7.7	507	0.6	21	53	8.0	548	0.7	31
45-64	106	17.0	1,097	0.6	44	129	20.6	1,379	0.6	21	131	21.0	1,394	0.6	29
65-74	1,201	15.9	13,538	0.5	43	2,574	34.0	28,634	0.6	22	1,704	22.5	18,676	0.6	24
75-84	968	11.0	10,864	0.6	45	3,004	34.2	32,549	0.6	23	2,029	23.1	21,612	0.6	19
85 and older	184	3.4	1,949	0.6	39	1,535	28.6	15,504	0.7	22	859	16.0	8,640	0.7	16
Unknown	0	0.0	0	0.0	0	1	100.0	5	0.4	2	0	0.0	0	0.0	0

Table 16C

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 1999 file for Massachusetts, released by CMS in 12/2003. This table was produced on 06/25/2004.

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

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

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

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

TABLE 16D
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR NINTH AND TENTH TOP DRUG GROUPS
 SEPARATELY, BY SEX, BOE, AND AGE^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, MASSACHUSETTS, 1999

Beneficiary Characteristics	ANTI-ASTHMATIC				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 Benes	No. of Bene Mos
All	58,715	31.2 %	652,457	0.5	\$17	67,699	35.9 %	743,959	0.4	\$14	188,454	1,991,854
Female	39,857	33.3	444,478	0.4	16	44,438	37.2	487,808	0.4	13	119,570	1,270,863
Disabled	20,798	40.2	239,426	0.4	16	24,196	46.8	278,049	0.4	14	51,687	569,880
5 and younger	0	0.0	0	0.0	0	1	50.0	12	0.1	0	2	13
6-14	2	40.0	24	0.4	19	0	0.0	0	0.0	0	5	52
15-20	13	13.3	105	0.4	12	25	25.5	213	0.2	2	98	774
21-44	4,721	32.0	54,315	0.3	12	7,622	51.7	87,593	0.4	17	14,749	161,299
45-64	8,971	44.9	103,244	0.4	18	10,221	51.1	117,593	0.4	14	20,002	218,753
65-74	5,099	44.2	58,769	0.5	19	4,531	39.2	52,244	0.3	9	11,548	128,900
75-84	1,646	40.7	19,201	0.5	17	1,407	34.8	16,314	0.3	10	4,042	46,756
85 and older	346	27.9	3,768	0.4	16	389	31.3	4,080	0.4	11	1,241	13,333
Other Eligibles	19,059	28.1	205,052	0.5	16	20,242	29.8	209,759	0.4	12	67,883	700,983
5 and younger	4	50.0	33	0.9	14	1	12.5	1	2.0	8	8	45
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	26
15-20	1	16.7	7	0.1	1	3	50.0	31	0.2	1	6	49
21-44	185	21.3	1,931	0.4	14	495	56.9	5,070	0.4	15	870	7,509
45-64	89	22.3	920	0.5	17	159	39.8	1,638	0.4	11	399	3,554
65-74	4,258	30.6	47,696	0.5	19	4,159	29.9	46,429	0.3	10	13,926	149,540
75-84	7,436	30.5	80,680	0.5	17	7,105	29.2	75,951	0.4	13	24,346	258,390
85 and older	7,086	25.0	73,785	0.4	14	8,320	29.4	80,639	0.4	12	28,325	281,870
Male	18,858	27.4	207,979	0.5	17	23,261	33.8	256,151	0.4	16	68,883	720,986
Disabled	11,456	25.0	130,907	0.5	17	17,182	37.5	194,969	0.4	18	45,862	494,564
5 and younger	5	250.0	60	0.4	22	1	50.0	4	0.8	4	2	16
6-14	0	0.0	0	0.0	0	2	33.3	24	0.1	0	6	50
15-20	17	15.9	163	0.3	10	15	14.0	138	0.1	1	107	804
21-44	3,313	16.5	38,236	0.4	13	7,605	37.8	86,674	0.4	19	20,102	216,416
45-64	5,413	28.4	61,424	0.5	19	7,661	40.2	86,679	0.4	18	19,063	204,948
65-74	2,183	40.9	25,032	0.6	22	1,542	28.9	17,494	0.3	8	5,339	58,365
75-84	441	43.2	5,053	0.5	18	293	28.7	3,307	0.3	11	1,021	11,624
85 and older	84	37.8	939	0.4	16	63	28.4	649	0.4	14	222	2,341
Other Eligibles	7,402	32.2	77,072	0.5	17	6,079	26.4	61,182	0.3	11	23,021	226,422
5 and younger	0	0.0	0	0.0	0	1	50.0	1	2.0	10	2	3
6-14	0	0.0	0	0.0	0	2	200.0	24	0.1	1	1	12
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	22
21-44	106	15.9	1,130	0.4	11	315	47.3	3,196	0.5	32	666	5,799
45-64	161	25.8	1,708	0.5	18	199	31.8	2,094	0.4	18	625	5,834
65-74	2,260	29.8	24,509	0.5	18	1,972	26.0	21,414	0.3	7	7,574	78,672
75-84	3,105	35.4	32,291	0.5	18	2,162	24.6	21,848	0.3	10	8,777	87,324
85 and older	1,770	32.9	17,434	0.5	15	1,428	26.6	12,605	0.4	12	5,373	48,756
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	5

Table 16D

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 1999 file for Massachusetts, released by CMS in 12/2003. This table was produced on 06/25/2004.

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

TABLE 17
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BENEFICIARY CHARACTERISTIC^{a, b}
 DUAL ELIGIBLE BENEFICIARIES, MASSACHUSETTS, 1999

Beneficiary Characteristics	Rx \$ per Bene Mo	No. of Rx per Bene Mo	No. of All-Year NF Residents	Bene Mos among All-Year NF Residents
All	\$173	5.1	33,300	337,136
Age				
0-64	296	6.2	1,542	17,222
65-74	249	6.3	3,269	34,552
75-84	185	5.4	10,306	104,880
85 and older	140	4.7	18,182	180,477
Unknown	122	7.8	1	5
Gender				
Female	164	5.0	25,881	264,577
Male	207	5.5	7,419	72,559
Unknown	0	0.0	0	0
Race				
White	174	5.1	26,684	272,022
African American	197	5.2	482	5,199
Other/unknown	167	5.1	6,134	59,915
Basis of Eligibility				
Aged	164	5.1	30,455	306,068
Disabled	257	5.9	2,844	31,067
Adults	145	2.0	1	1
Children	0	0.0	0	0
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 1999 file for Massachusetts, released by CMS in 12/2003. 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 16,737 beneficiaries who were in nursing facilities for part of their enrollment and their 158,577 benefit months were excluded from the analysis. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

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

TABLE 18

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d, e}
 DUAL ELIGIBLE BENEFICIARIES, MASSACHUSETTS, 1999

Therapeutic Category	No. of Rx per Bene Mo among Users			\$ per Bene Mo among Users			\$ per Rx			Users						
	Total	Patented	Off-Patent	Brand-Name	Off-Patent	Brand-Name	Total	Patented	Off-Patent	Brand-Name	Generic	Total # of Rx	Total Rx \$	No.	As % of Dual All-Year NF Residents	No. of Bene Mos
Anti-infective Agents	0.3	0.2	0.0	0.2	\$13	\$0	\$1	\$42	\$71	\$41	\$9	75,501	\$3,151,846	21,053	63.2 %	224,003
Biologics	0.1	0.0	0.0	0.1	2	0	2	22	80	0	20	276	6,054	257	0.8	2,867
Antineoplastic Agents	0.5	0.1	0.3	0.1	70	27	37	134	243	138	38	8,575	1,148,508	1,624	4.9	16,476
Endocrine/Metabolic Drugs	1.0	0.3	0.0	0.7	17	12	0	17	41	21	6	110,141	1,866,849	10,500	31.5	110,985
Cardiovascular Agents	1.8	0.4	0.5	1.0	34	14	12	19	38	26	8	376,931	7,098,399	20,337	61.1	210,800
Respiratory Agents	0.8	0.3	0.0	0.4	24	15	1	31	48	32	19	71,795	2,225,237	8,825	26.5	93,475
Gastrointestinal Agents	0.9	0.3	0.1	0.5	42	28	5	48	93	57	20	132,778	6,337,770	14,195	42.6	149,640
Genitourinary Agents	0.5	0.2	0.0	0.3	16	12	0	31	50	36	14	26,576	820,882	4,705	14.1	51,291
CNS Drugs	1.5	0.7	0.2	0.6	83	62	15	55	85	76	10	351,608	19,188,276	22,036	66.2	232,305
Stimulants/Anti-obesity/Anorexia	0.4	0.0	0.1	0.3	7	0	3	17	44	28	13	420	7,058	87	0.3	951
Miscellaneous Psychological/Neurological Agents	0.7	0.7	0.0	0.0	75	75	0	104	106	0	6	8,940	928,949	1,196	3.6	12,327
Analgesics and Anesthetics	0.7	0.2	0.1	0.4	20	14	3	31	81	49	8	74,048	2,303,737	11,367	34.1	113,292
Neuromuscular Agents	1.2	0.4	0.2	0.6	47	28	9	39	66	43	18	129,104	5,081,128	10,062	30.2	107,878
Nutritional Products	0.7	0.0	0.1	0.6	8	0	1	12	12	23	11	55,609	658,493	8,102	24.3	83,474
Hematological Agents	1.1	0.1	0.3	0.7	20	9	5	18	177	15	8	104,189	1,853,069	9,099	27.3	94,994
Topical Products	0.6	0.2	0.1	0.3	17	10	4	29	46	39	11	123,390	3,521,144	19,177	57.6	208,087
Miscellaneous Products	0.3	0.0	0.0	0.2	10	4	1	40	103	220	24	3,359	133,904	1,265	3.8	12,810
Unknown Therapeutic Category	0.5	0.0	0.0	0.0	14	0	0	25	0	0	0	78,140	1,986,481	13,657	41.0	145,509
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.	1,731,380	58,317,784	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 1999 file for Massachusetts, released by CMS in 12/2003. 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 16,737 beneficiaries who were in nursing facilities for part of their enrollment and their 158,577 benefit months were excluded from the analysis.
- b. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 1999. A beneficiary who used drugs from two or more categories was counted as a user for each category. Therefore, the sum of users across categories may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- c. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
- d. For information about these therapeutic categories, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).
- e. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. For information about this classification method, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003). In Massachusetts, 4.2 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.

Table 18

Dual Eligible Beneficiaries

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

APPENDIX TABLE A.3
 CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY^{a, b}
 DUAL ELIGIBLE BENEFICIARIES, MASSACHUSETTS, 1999

Beneficiary Characteristics	No. of Benes					No. of Bene Mos					
	All	Aged	Disabled	Adults	Children	All	Aged	Disabled	Adults	Children	Unknown
All	190,694	88,688	99,507	2,490	9	2,068,145	910,887	1,131,030	26,146	82	0
Age											
5 and younger	14	10	4	0	0	85	48	37	0	0	0
6-14	16	1	11	0	4	163	12	113	0	38	0
15-20	243	2	231	6	4	2,765	24	2,630	70	41	0
21-44	37,569	134	35,838	1,596	1	425,262	1,484	406,903	16,872	3	0
45-64	40,987	327	39,886	774	0	461,518	3,303	450,027	8,188	0	0
65-74	38,517	21,405	17,011	101	0	427,946	229,757	197,259	930	0	0
75-84	38,186	33,110	5,063	13	0	404,101	345,628	58,387	86	0	0
85 and older	35,161	33,698	1,463	0	0	346,300	330,626	15,674	0	0	0
Unknown	1	1	0	0	5	0	5	0	0	0	0
Gender											
Female	120,619	66,747	52,576	1,291	5	1,309,912	693,089	603,085	13,697	41	0
Male	70,075	21,941	46,931	1,199	4	758,233	217,798	527,945	12,449	41	0
Unknown	0	0	0	0	0	0	0	0	0	0	0
Race											
White	153,366	74,515	77,588	1,259	4	1,678,375	775,052	889,839	13,443	41	0
African American	10,399	2,935	7,213	251	0	117,541	32,450	82,422	2,669	0	0
Other/unknown	26,929	11,238	14,706	980	5	272,229	103,385	158,769	10,034	41	0
Use of Nursing Facilities											
All year	33,301	30,455	2,845	1	0	337,229	306,077	31,151	1	0	0
Part year	16,755	13,508	3,239	8	0	159,782	123,925	35,767	90	0	0
None	140,638	44,725	93,423	2,481	9	1,571,134	480,885	1,064,112	26,055	82	0
Maintenance Assistance Status											
Cash	88,468	30,617	57,594	257	0	1,020,033	346,335	671,059	2,639	0	0
Medically needy	12,155	7,323	4,832	0	0	120,150	71,609	48,541	0	0	0
Poverty related	63,732	31,313	32,146	265	8	678,396	318,058	357,545	2,716	77	0
Other/unknown	26,339	19,435	4,935	1,968	1	249,566	174,885	53,885	20,791	5	0
Dual Status^c											
Full dual, all year	189,033	87,150	99,389	2,485	9	2,049,673	893,781	1,129,716	26,094	82	0
Full dual, part year	1,661	1,538	118	5	0	18,472	17,106	1,314	52	0	0
Managed Care Status											
FFS all year	178,573	88,271	88,877	1,420	5	1,933,991	906,075	1,012,962	14,911	43	0
FFS part year, with Rx claims	8,739	353	7,694	692	0	99,894	4,114	88,036	7,744	0	0
FFS part year, no Rx claims	1,142	59	978	103	2	11,559	647	9,851	1,046	15	0
MC all year, with Rx claims	1,610	2	1,402	205	1	17,636	15	15,614	1,995	12	0
MC all year, no Rx claims	630	3	556	70	1	5,065	36	4,567	450	12	0

Source: Data for this table are from the MAX 1999 file for Massachusetts, released by CMS in 12/2003. 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, MASSACHUSETTS, 1999

Beneficiary Characteristics	Bene Mos in Cell F of Table 1		Included in Cell G of Table 1		Excluded from Cell G of Table 1	
	No. of Benes	No. of Bene Mos	No. of Benes	No. of Bene Mos	No. of Benes	No. of Bene Mos
All	190,694	2,068,145	188,454	1,991,854	2,240	76,291
FFS all year	178,573	1,933,991	178,573	1,933,991	0	0
FFS part year, with Rx claims	8,739	99,894	8,739	51,847	0	48,047
FFS part year, with no Rx claims	1,142	11,559	1,142	6,016	0	5,543
MC all year, with Rx claims	1,610	17,636	0	0	1,610	17,636
MC all year, with no Rx claims	630	5,065	0	0	630	5,065

Source: Data for this table are from the MAX 1999 file for Massachusetts, released by CMS in 12/2003. This table was produced on 06/25/2004.

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

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

Total Number of Dual Eligible Beneficiaries 188,454
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries \$322,310,480
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary \$1,710

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	23,948	12.7 %	\$0	0.0 %
1-500	47,664	25.3	9,679,913	3.0
501-1,000	27,024	14.3	19,973,275	6.2
1,001-1,500	20,448	10.9	25,324,977	7.9
1,501-2,000	15,386	8.2	26,762,456	8.3
2,001-2,500	11,664	6.2	26,117,335	8.1
2,501-3,000	8,962	4.8	24,567,204	7.6
3,001-3,500	6,901	3.7	22,348,634	6.9
3,501-4,000	5,241	2.8	19,612,684	6.1
4,001-4,500	4,015	2.1	17,027,914	5.3
4,501-5,000	3,036	1.6	14,369,598	4.5
5,001-5,500	2,416	1.3	12,657,487	3.9
5,501-6,000	2,001	1.1	11,494,934	3.6
6,001-6,500	1,552	0.8	9,679,848	3.0
6,501-7,000	1,347	0.7	9,086,993	2.8
7,001-7,500	1,074	0.6	7,777,751	2.4
7,501-8,000	845	0.4	6,536,222	2.0
8,001-8,500	672	0.4	5,536,644	1.7
8,501-9,000	604	0.3	5,278,937	1.6
9,001-9,500	472	0.3	4,361,349	1.4
9,501-10,000	401	0.2	3,910,120	1.2
10,001+	2,781	1.5	40,206,205	12.5

Source: Data for this table are from the MAX 1999 file for Massachusetts, released by CMS in 12/2003. This table was produced on 10/26/2004.

a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 1999.

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

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

Total Number of Disabled Dual Eligible Beneficiaries, Age < 65 74,136
 Total Pharmacy Reimbursement for Disabled Dual Eligible Beneficiaries, Age < 65 \$168,477,781
 Mean Pharmacy Reimbursement per Disabled Dual Eligible Beneficiary, Age < 65 \$2,273

Annual Pharmacy Reimbursement per Beneficiary \$0	Number of Beneficiaries	Percent of Dual Beneficiaries, Age < 65		Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
		12.9 %	24.1 %		
1-500	9,533	12.9	24.1	0	0.0
501-1,000	17,830	11.6	11.6	3,356,235	2.0
1,001-1,500	8,590	8.8	8.8	6,355,325	3.8
1,501-2,000	6,527	6.8	6.8	8,089,861	4.8
2,001-2,500	5,078	5.5	5.5	8,841,210	5.2
2,501-3,000	4,055	4.6	4.6	9,088,004	5.4
3,001-3,500	3,420	3.9	3.9	9,383,703	5.6
3,501-4,000	2,902	3.3	3.3	9,403,181	5.6
4,001-4,500	2,431	2.7	2.7	9,103,032	5.4
4,501-5,000	1,994	2.1	2.1	8,464,176	5.0
5,001-5,500	1,588	1.9	1.9	7,524,126	4.5
5,501-6,000	1,388	1.7	1.7	7,275,076	4.3
6,001-6,500	1,255	1.4	1.4	7,209,669	4.3
6,501-7,000	1,026	1.3	1.3	6,399,523	3.8
7,001-7,500	932	1.1	1.1	6,288,336	3.7
7,501-8,000	779	0.9	0.9	5,645,598	3.4
8,001-8,500	640	0.7	0.7	4,951,601	2.9
8,501-9,000	523	0.6	0.6	4,308,985	2.6
9,001-9,500	473	0.5	0.5	4,134,800	2.5
9,501-10,000	383	0.5	0.5	3,537,700	2.1
10,001+	335	0.5	0.5	3,266,138	1.9
	2,454	3.3	3.3	35,851,502	21.3

Source: Data for this table are from the MAX 1999 file for Massachusetts, released by CMS in 12/2003. This table was produced on 10/26/2004.

a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 1999.

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

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

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

Total Number of Dual Eligible Beneficiaries, Age 65-74 38,387
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65-74 \$54,931,311
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65-74 \$1,431

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 65-74	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	5,161	13.4 %	0	0.0
1-500	9,831	25.6	2,040,571	3.7
501-1,000	5,836	15.2	4,309,449	7.8
1,001-1,500	4,362	11.4	5,401,458	9.8
1,501-2,000	3,360	8.8	5,830,718	10.6
2,001-2,500	2,535	6.6	5,673,153	10.3
2,501-3,000	1,871	4.9	5,125,664	9.3
3,001-3,500	1,377	3.6	4,446,982	8.1
3,501-4,000	992	2.6	3,714,138	6.8
4,001-4,500	706	1.8	2,995,681	5.5
4,501-5,000	575	1.5	2,720,453	5.0
5,001-5,500	413	1.1	2,164,159	3.9
5,501-6,000	317	0.8	1,822,426	3.3
6,001-6,500	235	0.6	1,464,409	2.7
6,501-7,000	203	0.5	1,368,873	2.5
7,001-7,500	133	0.3	960,610	1.7
7,501-8,000	95	0.2	733,743	1.3
8,001-8,500	81	0.2	667,294	1.2
8,501-9,000	59	0.2	515,204	0.9
9,001-9,500	44	0.1	407,877	0.7
9,501-10,000	32	0.1	311,344	0.6
10,001+	169	0.4	2,257,105	4.1

Source: Data for this table are from the MAX 1999 file for Massachusetts, released by CMS in 12/2003. 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^{a, b}
 MASSACHUSETTS, 1999

Total Number of Dual Eligible Beneficiaries, Age 75-84 38,186
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 75-84 \$53,136,646
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 75-84 \$1,392

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 75-84	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	4,815	12.6 %	0	0.0 %
1-500	9,262	24.3	1,985,656	3.7
501-1,000	6,003	15.7	4,442,202	8.4
1,001-1,500	4,773	12.5	5,919,196	11.1
1,501-2,000	3,563	9.3	6,201,707	11.7
2,001-2,500	2,694	7.1	6,038,869	11.4
2,501-3,000	1,993	5.2	5,459,124	10.3
3,001-3,500	1,428	3.7	4,628,781	8.7
3,501-4,000	1,021	2.7	3,815,762	7.2
4,001-4,500	811	2.1	3,430,565	6.5
4,501-5,000	518	1.4	2,443,952	4.6
5,001-5,500	368	1.0	1,925,420	3.6
5,501-6,000	250	0.7	1,438,461	2.7
6,001-6,500	183	0.5	1,142,899	2.2
6,501-7,000	126	0.3	850,265	1.6
7,001-7,500	105	0.3	759,675	1.4
7,501-8,000	67	0.2	518,278	1.0
8,001-8,500	41	0.1	337,950	0.6
8,501-9,000	54	0.1	470,876	0.9
9,001-9,500	25	0.1	231,445	0.4
9,501-10,000	16	0.0	156,882	0.3
10,001+	70	0.2	938,681	1.8

Source: Data for this table are from the MAX 1999 file for Massachusetts, released by CMS in 12/2003. This table was produced on 10/26/2004.

a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 1999.

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

SUPPLEMENTAL TABLE 1D
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 85 AND OLDER^{a, b}
 MASSACHUSETTS, 1999

Total Number of Dual Eligible Beneficiaries, Age 85+ 35,161
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 85+ \$41,717,305
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 85+ \$1,187

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 85+	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	4,034	11.5 %	0	0.0 %
1-500	9,925	28.2	2,154,502	5.2
501-1,000	6,268	17.8	4,627,471	11.1
1,001-1,500	4,566	13.0	5,641,430	13.5
1,501-2,000	3,209	9.1	5,584,123	13.4
2,001-2,500	2,249	6.4	5,023,498	12.0
2,501-3,000	1,587	4.5	4,347,315	10.4
3,001-3,500	1,108	3.2	3,590,050	8.6
3,501-4,000	749	2.1	2,798,996	6.7
4,001-4,500	464	1.3	1,968,975	4.7
4,501-5,000	317	0.9	1,500,794	3.6
5,001-5,500	218	0.6	1,142,047	2.7
5,501-6,000	150	0.4	856,698	2.1
6,001-6,500	87	0.2	540,818	1.3
6,501-7,000	65	0.2	438,025	1.0
7,001-7,500	46	0.1	332,719	0.8
7,501-8,000	30	0.1	231,421	0.6
8,001-8,500	17	0.0	139,384	0.3
8,501-9,000	12	0.0	105,410	0.3
9,001-9,500	12	0.0	110,366	0.3
9,501-10,000	12	0.0	116,964	0.3
10,001+	36	0.1	466,299	1.1

Source: Data for this table are from the MAX 1999 file for Massachusetts, released by CMS in 12/2003. 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.