

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

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TABLE 11

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

Beneficiary Characteristics	No. of Benefes						No. of Bene Mos					
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown
<b>All</b>	<b>66,137</b>	<b>32,755</b>	<b>32,956</b>	<b>405</b>	<b>21</b>	<b>0</b>	<b>609,653</b>	<b>254,495</b>	<b>352,353</b>	<b>2,637</b>	<b>168</b>	<b>0</b>
<b>Age</b>												
5 and younger	6	0	6	0	0	0	56	0	56	0	0	0
6-14	19	0	15	0	4	0	207	0	166	0	41	0
15-20	135	0	124	1	10	0	1,373	0	1,300	5	68	0
21-44	16,805	0	16,505	293	7	0	179,977	0	178,044	1,874	59	0
45-64	15,679	1	15,586	92	0	0	166,804	10	166,153	641	0	0
65-74	9,009	8,345	647	17	0	0	73,888	67,823	5,955	110	0	0
75-84	11,425	11,370	54	1	0	0	90,110	89,610	496	4	0	0
85 and older	13,059	13,039	19	1	0	0	97,238	97,052	183	3	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
<b>Gender</b>												
Female	39,896	23,638	15,991	256	11	0	361,519	186,912	172,891	1,638	78	0
Male	26,241	9,117	16,965	149	10	0	248,134	67,583	179,462	999	90	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
<b>Race</b>												
White	58,685	29,978	28,406	284	17	0	544,578	235,506	306,982	1,932	158	0
African American	3,276	611	2,591	72	2	0	30,361	4,100	25,866	388	7	0
Other/unknown	4,176	2,166	1,959	49	2	0	34,714	14,889	19,505	317	3	0
<b>Use of Nursing Facilities</b>												
All year	15,040	13,615	1,425	0	0	0	110,583	95,455	15,128	0	0	0
Part year	5,474	4,496	977	0	1	0	44,259	34,021	10,236	0	2	0
None	45,623	14,644	30,554	405	20	0	454,811	125,019	326,989	2,637	166	0
<b>Maintenance Assistance Status</b>												
Cash	24,202	6,421	17,655	123	3	0	253,396	54,184	198,479	707	26	0
Medically needy	9,588	4,745	4,840	0	3	0	88,994	40,850	48,135	0	9	0
Poverty-related	1,323	734	589	0	0	0	13,195	7,497	5,698	0	0	0
Other/unknown	31,024	20,855	9,872	282	15	0	254,068	151,964	100,041	1,930	133	0
<b>Dual Medicare Status<sup>c</sup></b>												
Full dual, all year	62,570	30,820	31,337	392	21	0	573,938	235,431	335,821	2,518	168	0
Full dual, part year	3,567	1,935	1,619	13	0	0	35,715	19,064	16,532	119	0	0
<b>Managed Care Status</b>												
FFS all year	56,258	23,633	32,366	242	17	0	564,163	213,255	348,738	2,024	146	0
FFS part year, with Rx claims	8,474	7,908	454	108	4	0	40,295	36,857	2,961	455	22	0
FFS part year, no Rx claims	1,405	1,214	136	55	0	0	5,195	4,383	654	158	0	0

Source: Data for this table are from the MAX 1999 file for Minnesota, 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, MINNESOTA, 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	85.6 %	34.1	\$1,683	\$49	\$17,642	9.5 %	\$56	66,137
<b>Age</b>								
5 and younger	100.0	31.3	879	28	6,470	13.6	40	6
6-14	89.5	55.2	2,812	51	15,119	18.6	68	19
15-20	74.1	23.5	1,617	69	16,052	10.1	27	135
21-44	86.1	31.6	2,298	73	18,949	12.1	37	16,805
45-64	87.0	42.7	2,373	56	20,063	11.8	69	15,679
65-74	75.5	27.3	1,098	40	11,204	9.8	50	9,009
75-84	84.7	32.1	1,094	34	14,815	7.4	58	11,425
85 and older	91.3	33.8	984	29	19,991	4.9	69	13,059
Unknown	0.0	0.0	0	0	0	0.0	0	0
<b>Basis of Eligibility</b>								
Aged	84.9	31.4	1,045	33	15,913	6.6	60	32,755
Disabled	86.5	37.1	2,326	63	19,528	11.9	53	32,956
Adults	73.6	16.0	1,077	67	4,297	25.1	18	405
Children	71.4	18.0	585	32	9,290	6.3	27	21
Unknown	0.0	0.0	0	0	0	0.0	0	0
<b>Gender</b>								
Female	88.1	36.9	1,622	44	16,884	9.6	62	39,896
Male	81.9	30.0	1,776	59	18,793	9.5	47	26,241
Unknown	0.0	0.0	0	0	0	0.0	0	0
<b>Race</b>								
White	86.9	35.6	1,747	49	18,641	9.4	58	58,685
African American	76.2	23.4	1,317	56	9,600	13.7	41	3,276
Other/unknown	75.3	21.7	1,079	50	9,907	10.9	44	4,176
<b>Use of Nursing Facilities</b>								
Entire year	94.5	42.7	1,444	34	26,780	5.4	96	15,040
Part year	90.8	40.2	1,537	38	21,211	7.2	75	5,474
None	82.1	30.6	1,780	58	14,201	12.5	41	45,623
<b>Maintenance Assistance Status</b>								
Cash	88.4	35.1	2,059	59	16,808	12.2	48	24,202
Medically needy	70.1	25.9	1,472	57	8,250	17.8	35	9,588
Poverty related	46.4	7.1	404	57	1,963	20.6	8	1,323
Other/unknown	89.9	37.1	1,510	41	21,863	6.9	71	31,024

Source: Data for this table are from the MAX 1999 file for Minnesota, 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, MINNESOTA, 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	3.7	\$183	9.5 %	14.4 %	20.2 %	11.6 %	28.0 %	20.6 %	5.2 %	\$1,914	66,137	609,653
<b>Age</b>												
5 and younger	3.4	94	13.6	0.0	16.7	16.7	66.7	0.0	0.0	693	6	56
6-14	5.1	258	18.6	10.5	0.0	5.3	42.1	42.1	0.0	1,388	19	207
15-20	2.3	159	10.1	25.9	29.6	11.1	20.0	11.1	2.2	1,578	135	1,373
21-44	2.9	215	12.1	13.9	30.5	13.4	26.0	13.4	2.9	1,769	16,805	179,977
45-64	4.0	223	11.8	13.0	19.9	11.7	27.8	21.7	6.0	1,886	15,679	166,804
65-74	3.3	134	9.8	24.5	19.8	11.0	22.4	17.0	5.3	1,366	9,009	73,888
75-84	4.1	139	7.4	15.3	15.3	10.4	28.6	23.6	6.8	1,878	11,425	90,110
85 and older	4.5	132	4.9	8.7	11.9	10.7	34.2	28.5	5.9	2,685	13,059	97,238
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<b>Basis of Eligibility</b>												
Aged	4.0	135	6.6	15.1	15.1	10.7	29.3	23.9	6.1	2,048	32,755	254,495
Disabled	3.5	218	11.9	13.5	25.2	12.6	26.8	17.5	4.5	1,827	32,956	352,353
Adults	2.5	165	25.1	26.4	32.8	11.1	19.3	9.1	1.2	660	405	2,637
Children	2.3	73	6.3	28.6	33.3	4.8	19.0	9.5	4.8	1,161	21	168
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<b>Gender</b>												
Female	4.1	179	9.6	11.9	17.9	11.6	29.6	22.9	6.1	1,863	39,896	361,519
Male	3.2	188	9.5	18.1	23.6	11.7	25.5	17.0	4.0	1,987	26,241	248,134
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<b>Race</b>												
White	3.8	188	9.4	13.1	19.0	11.6	29.0	21.7	5.5	2,009	58,685	544,578
African American	2.5	142	13.7	23.8	30.9	11.5	19.0	11.8	3.0	1,036	3,276	30,361
Other/unknown	2.6	130	10.9	24.7	28.2	11.3	20.6	12.5	2.8	1,192	4,176	34,714
<b>Use of Nursing Facilities</b>												
Entire year	5.8	196	5.4	5.5	7.7	8.6	32.6	34.5	11.1	3,642	15,040	110,583
Part year	5.0	190	7.2	9.2	13.0	10.5	31.5	26.6	9.2	2,623	5,474	44,259
None	3.1	179	12.5	17.9	25.2	12.8	26.0	15.3	2.8	1,425	45,623	454,811
<b>Maintenance Assistance Status</b>												
Cash	3.4	197	12.2	11.6	25.7	13.4	28.7	17.3	3.4	1,605	24,202	253,396
Medically needy	2.8	159	17.8	29.9	21.8	10.9	20.9	13.2	3.4	889	9,588	88,994
Poverty related	0.7	41	20.6	53.6	30.0	6.9	7.7	1.4	0.5	197	1,323	13,195
Other/unknown	4.5	184	6.9	10.1	15.0	10.7	30.5	26.3	7.4	2,670	31,024	254,068

Source: Data for this table are from the MAX 1999 file for Minnesota, 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, MINNESOTA, 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>3.7</b>	<b>\$183</b>	<b>\$49</b>	<b>1.3</b>	<b>\$112</b>	<b>\$87</b>	<b>0.6</b>	<b>\$38</b>	<b>\$58</b>	<b>1.6</b>	<b>\$27</b>	<b>\$17</b>
<b>Age</b>												
5 and younger	3.4	94	28	1.2	65	53	0.6	12	20	1.5	17	11
6-14	5.1	258	51	1.4	132	95	1.2	95	82	2.3	28	12
15-20	2.3	159	69	0.9	105	113	0.3	29	89	1.0	20	20
21-44	2.9	215	73	1.1	139	122	0.5	48	89	1.2	23	20
45-64	4.0	223	56	1.5	140	94	0.6	45	70	1.7	31	18
65-74	3.3	134	40	1.2	79	68	0.5	24	45	1.5	24	17
75-84	4.1	139	34	1.3	78	60	0.7	27	37	1.9	28	15
85 and older	4.5	132	29	1.2	69	56	0.9	27	31	2.2	29	13
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Basis of Eligibility</b>												
Aged	4.0	135	33	1.2	75	60	0.7	26	36	1.9	27	15
Disabled	3.5	218	63	1.3	139	106	0.6	46	78	1.4	27	19
Adults	2.5	165	67	1.0	116	113	0.3	25	85	1.0	19	18
Children	2.3	73	32	0.6	29	51	0.6	35	59	0.9	8	8
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Gender</b>												
Female	4.1	179	44	1.4	109	78	0.7	35	50	1.8	28	16
Male	3.2	188	59	1.1	116	105	0.6	41	71	1.3	25	19
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Race</b>												
White	3.8	188	49	1.3	115	87	0.7	39	58	1.7	28	17
African American	2.5	142	56	0.9	92	100	0.4	27	68	1.1	17	16
Other/unknown	2.6	130	50	1.0	84	85	0.4	24	59	1.1	18	16
<b>Use of Nursing Facilities</b>												
Entire year	5.8	196	34	1.7	109	65	1.0	38	36	2.8	40	14
Part year	5.0	190	38	1.6	115	71	0.8	34	40	2.3	35	15
None	3.1	179	58	1.1	112	98	0.5	38	71	1.3	23	18
<b>Maintenance Assistance Status</b>												
Cash	3.4	197	59	1.2	124	100	0.6	42	73	1.4	25	18
Medically needy	2.8	159	57	1.0	99	94	0.5	33	68	1.1	22	19
Poverty related	0.7	41	57	0.3	26	96	0.1	9	71	0.3	5	16
Other/unknown	4.5	184	41	1.4	109	75	0.8	37	45	2.1	32	16

Source: Data for this table are from the MAX 1999 file for Minnesota, 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 Minnesota, 4.3 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all 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, MINNESOTA, 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
Anti-infective Agents	0.4	0.2	0.0	0.2	\$19	\$17	\$0	\$2	\$54	\$96	\$40	\$12	112,987	\$6,086,929	30,825	46.6 %	315,101
Biologics	0.1	0.1	0.0	0.0	17	1	6	11	151	13	5,215	286	2,783	419,404	2,346	3.5	24,619
Antineoplastic Agents	0.6	0.3	0.1	0.2	116	97	8	10	202	347	108	46	6,803	1,373,029	1,254	1.9	11,865
Endocrine/Metabolic Drugs	0.8	0.3	0.2	0.3	22	15	4	3	26	43	19	12	180,037	4,689,091	21,868	33.1	212,341
Cardiovascular Agents	1.5	0.4	0.3	0.7	41	21	11	8	28	49	35	11	427,006	11,801,264	31,641	47.8	289,616
Respiratory Agents	0.8	0.5	0.0	0.3	33	25	1	8	40	54	33	23	133,928	5,417,126	16,090	24.3	163,942
Gastrointestinal Agents	0.7	0.3	0.1	0.3	46	30	8	9	65	106	76	27	132,174	8,646,808	19,051	28.8	187,045
Genitourinary Agents	0.5	0.2	0.0	0.3	16	11	0	5	34	53	32	20	34,483	1,171,451	7,212	10.9	72,529
CNS Drugs	1.4	0.6	0.3	0.5	119	75	34	10	83	126	116	18	475,853	39,381,030	33,876	51.2	331,699
Stimulants/Anti-obesity/Anorexia	0.5	0.1	0.1	0.3	28	9	8	11	54	78	64	39	4,479	239,892	800	1.2	8,486
Miscellaneous Psychological/Neurological Agents	0.5	0.4	0.0	0.1	51	48	2	1	108	126	89	20	7,332	792,826	1,645	2.5	15,512
Analgesics and Anesthetics	0.7	0.2	0.1	0.4	27	15	6	6	39	89	71	14	171,250	6,662,498	24,693	37.3	244,636
Neuromuscular Agents	1.1	0.5	0.2	0.5	66	47	8	11	57	101	42	22	214,532	12,287,100	17,979	27.2	186,787
Nutritional Products	0.7	0.0	0.2	0.4	13	1	6	6	18	15	26	14	78,093	1,435,748	11,968	18.1	110,274
Hematological Agents	0.8	0.1	0.3	0.4	30	15	9	6	40	254	29	15	61,154	2,440,487	8,808	13.3	80,054
Topical Products	0.5	0.1	0.1	0.2	13	7	3	3	28	45	34	14	107,893	3,005,203	23,261	35.2	238,167
Miscellaneous Products	0.6	0.2	0.2	0.3	101	59	30	12	162	299	196	43	9,851	1,599,130	1,562	2.4	15,890
Unknown Therapeutic Category	0.5	0.0	0.0	0.0	19	0	0	0	40	0	0	0	97,711	3,877,041	20,579	31.1	208,891
<b>TOTAL NO. OF RX AND RX \$</b>	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	2,258,349	111,326,057	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 1999 file for Minnesota, 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 Minnesota, 4.3 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).
- Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Center for Medicare and Medicaid Services; CNS = Central Nervous System; MAX = Medicaid Analytic Extract; n.a. = not applicable; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE 16

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, MINNESOTA, 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	\$23,887,449	18,885	28.6 %	196,125	0.9	\$134	\$122
ANTIDEPRESSANTS	12,171,994	30,856	46.7	308,610	0.7	59	39
ANTICONVULSANT	10,506,685	15,788	23.9	169,258	0.9	67	62
ULCER DRUGS	7,013,590	18,385	27.8	183,873	0.5	72	38
ANALGESICS - Narcotic	3,606,281	22,729	34.4	228,592	0.4	36	16
ANTIASTHMATIC	3,451,855	16,380	24.8	162,672	0.5	40	21
ANTIHYPERTENSIVE	3,396,995	15,234	23.0	141,627	0.7	36	24
ANTIDIABETIC	2,989,483	11,460	17.3	109,250	0.7	37	27
ANTIANSIETY AGENTS	2,805,233	13,148	19.9	133,670	0.5	39	21
ANTHYPERLIPIDEMIC	2,692,509	5,885	8.9	60,884	0.6	72	44

Source: Data for this table are from the MAX 1999 file for Minnesota, 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, MINNESOTA, 1999

Beneficiary Characteristics	All Top 10 Drug Groups				ANTIPSYCHOTICS				ANTIDEPRESSANTS			
	No. of Rx	Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
<b>All</b>	<b>1,109,429</b>	<b>\$72,522,074</b>	<b>18,885</b>	<b>28.6 %</b>	<b>196,125</b>	<b>0.9</b>	<b>\$122</b>	<b>30,856</b>	<b>46.7 %</b>	<b>308,610</b>	<b>0.7</b>	<b>\$39</b>
<b>Female</b>	683,252	40,374,520	10,163	25.5	104,664	0.8	100	20,765	52.0	206,777	0.7	39
<b>Disabled</b>	366,413	26,640,417	6,452	40.3	72,764	0.9	122	11,164	69.8	124,877	0.6	43
5 and younger	3	43	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	58	1,043	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	655	46,711	13	25.0	155	0.6	84	33	63.5	385	0.4	29
21-44	148,871	12,069,853	3,182	43.5	36,177	0.9	129	5,253	71.8	59,036	0.6	43
45-64	209,151	14,123,738	3,161	38.7	35,556	0.9	117	5,703	69.7	63,679	0.6	42
65-74	7,154	369,353	91	23.5	816	0.8	69	168	43.3	1,703	0.7	35
75-84	334	21,693	4	11.8	48	0.9	136	6	17.6	62	0.9	60
85 and older	187	7,983	1	9.1	12	0.6	44	1	9.1	12	1.3	13
<b>Other Eligibles</b>	316,839	13,734,103	3,711	15.5	31,900	0.7	51	9,601	40.2	81,900	0.7	32
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	9	85	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	10	112	0	0.0	0	0.0	0	1	12.5	7	0.1	4
21-44	1,381	83,935	27	13.1	231	0.4	50	94	45.6	777	0.5	37
45-64	654	55,317	8	17.8	89	1.1	261	29	64.4	299	0.6	31
65-74	74,194	3,626,194	746	14.2	6,707	0.8	72	1,916	36.4	17,408	0.6	31
75-84	114,632	4,986,880	1,318	16.3	11,083	0.7	51	3,428	42.3	29,135	0.7	32
85 and older	125,959	4,981,580	1,612	15.7	13,790	0.6	40	4,133	40.2	34,274	0.8	33
<b>Male</b>	426,177	32,147,554	8,722	33.2	91,461	1.0	146	10,091	38.5	101,833	0.7	41
<b>Disabled</b>	318,898	27,318,295	7,106	41.9	79,065	1.1	160	7,119	42.0	78,284	0.6	44
5 and younger	15	277	1	25.0	6	0.2	6	0	0.0	0	0.0	0
6-14	96	2,044	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	723	52,887	20	27.8	222	0.7	104	25	34.7	272	0.6	39
21-44	160,501	15,321,630	4,219	45.9	47,020	1.1	169	4,018	43.7	44,417	0.6	45
45-64	153,158	11,692,959	2,808	37.9	31,194	1.0	149	3,010	40.6	32,960	0.7	43
65-74	4,213	238,865	54	20.8	575	0.8	70	62	23.9	601	0.7	29
75-84	155	8,205	3	15.0	36	0.5	16	2	10.0	24	0.9	65
85 and older	37	1,428	1	12.5	12	1.0	49	2	25.0	10	1.0	42
<b>Other Eligibles</b>	107,279	4,829,259	1,616	17.4	12,396	0.7	59	2,972	32.0	23,549	0.7	33
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	18	558	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	1	64	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	885	63,025	11	11.7	84	0.6	120	38	40.4	349	0.6	38
45-64	454	31,209	4	8.3	43	0.7	87	23	47.9	176	0.6	31
65-74	33,281	1,699,059	444	14.3	3,590	0.8	84	813	26.2	6,804	0.6	31
75-84	40,887	1,788,217	663	20.3	5,049	0.7	56	1,166	35.7	9,081	0.8	34
85 and older	31,753	1,247,127	494	17.9	3,630	0.7	37	932	33.7	7,139	0.8	34
<b>Unknown</b>	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

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

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

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

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

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

TABLE 16B  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR THIRD TO FIFTH TOP DRUG GROUPS  
 SEPARATELY, BY SEX, BOE, AND AGE<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, MINNESOTA, 1999

Beneficiary Characteristics	ANTICONVULSANT					ULCER DRUGS					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>15,788</b>	<b>23.9 %</b>	<b>169,258</b>	<b>0.9</b>	<b>\$62</b>	<b>18,385</b>	<b>27.8 %</b>	<b>183,873</b>	<b>0.5</b>	<b>\$38</b>	<b>22,729</b>	<b>34.4 %</b>	<b>228,592</b>	<b>0.4</b>	<b>\$16</b>
<b>Female</b>	8,605	21.6	91,493	0.9	55	12,101	30.3	120,372	0.5	38	15,602	39.1	156,883	0.5	15
<b>Disabled</b>	6,246	39.1	70,781	0.9	63	5,084	31.8	57,404	0.5	38	7,381	46.2	82,904	0.4	14
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	4	66.7	41	0.8	9	1	16.7	12	0.1	0
15-20	17	32.7	200	0.9	73	9	17.3	106	0.5	25	23	44.2	259	0.2	2
21-44	3,089	42.2	35,313	0.9	67	1,845	25.2	21,042	0.4	35	3,215	43.9	36,356	0.3	11
45-64	3,059	37.4	34,487	0.9	58	3,073	37.6	34,653	0.5	40	3,991	48.8	44,774	0.4	17
65-74	77	19.8	741	0.9	37	142	36.6	1,444	0.4	37	139	35.8	1,379	0.4	14
75-84	2	5.9	24	0.4	12	7	20.6	77	0.6	61	9	26.5	88	0.2	2
85 and older	2	18.2	16	1.8	29	4	36.4	41	0.9	41	3	27.3	36	0.3	4
<b>Other Eligibles</b>	2,359	9.9	20,712	0.8	29	7,017	29.4	62,968	0.6	38	8,221	34.4	73,779	0.5	16
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	2	25.0	12	0.2	2
21-44	38	18.4	309	0.4	25	19	9.2	172	0.3	33	74	35.9	670	0.4	13
45-64	6	13.3	72	0.6	58	17	37.8	147	0.4	34	30	66.7	306	0.2	3
65-74	717	13.6	6,593	0.8	35	1,465	27.9	13,884	0.5	35	1,753	33.3	16,676	0.5	17
75-84	840	10.4	7,391	0.8	28	2,462	30.4	22,293	0.6	38	2,725	33.6	24,996	0.5	16
85 and older	758	7.4	6,347	0.8	25	3,054	29.7	26,472	0.6	38	3,637	35.4	31,119	0.6	17
<b>Male</b>	7,183	27.4	77,765	1.0	70	6,284	23.9	63,501	0.5	39	7,127	27.2	71,909	0.4	17
<b>Disabled</b>	6,112	36.0	68,839	1.0	75	3,847	22.7	42,956	0.5	39	4,721	27.8	51,463	0.4	18
5 and younger	0	0.0	0	0.0	0	2	50.0	18	0.6	10	2	50.0	12	0.2	2
6-14	1	11.1	12	1.2	50	2	22.2	24	0.5	13	2	22.2	24	0.1	1
15-20	20	27.8	233	0.6	38	12	16.7	131	0.6	29	14	19.4	161	0.2	2
21-44	3,306	36.0	37,337	1.0	74	1,767	19.2	19,912	0.5	38	2,443	26.6	26,792	0.4	22
45-64	2,727	36.8	30,665	1.0	75	1,968	26.6	21,907	0.5	41	2,195	29.6	23,840	0.4	14
65-74	55	21.2	556	1.2	86	90	34.7	910	0.5	40	62	23.9	598	0.3	9
75-84	2	10.0	24	0.9	53	6	30.0	54	0.7	40	3	15.0	36	0.1	1
85 and older	1	12.5	12	0.9	23	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Other Eligibles</b>	1,071	11.5	8,926	0.9	39	2,437	26.3	20,545	0.6	37	2,406	25.9	20,446	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	1	50.0	12	0.3	3	2	100.0	24	0.2	1
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	25	26.6	217	0.6	80	15	16.0	144	0.3	32	51	54.3	474	0.4	17
45-64	14	29.2	129	0.4	39	10	20.8	82	0.3	38	17	35.4	123	0.6	46
65-74	427	13.8	3,700	0.9	48	741	23.9	6,497	0.5	35	733	23.6	6,510	0.4	12
75-84	373	11.4	3,016	0.9	34	866	26.5	7,287	0.6	38	825	25.3	6,824	0.5	15
85 and older	232	8.4	1,864	0.8	24	804	29.1	6,523	0.6	40	778	28.1	6,491	0.5	14
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Dual Eligible Beneficiaries

Table 16B

Dual Eligible Beneficiaries

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

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

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

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

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

TABLE 16C  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR SIXTH TO EIGHTH TOP DRUG GROUPS  
 SEPARATELY, BY SEX, BOE, AND AGE<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, MINNESOTA, 1999

Beneficiary Characteristics	ANTI-ASTHMATIC					ANTI-HYPERTENSIVE					ANTI-DIABETIC				
	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>16,380</b>	<b>24.8 %</b>	<b>162,672</b>	<b>0.5</b>	<b>\$21</b>	<b>15,234</b>	<b>23.0 %</b>	<b>141,627</b>	<b>0.7</b>	<b>\$24</b>	<b>11,460</b>	<b>17.3 %</b>	<b>109,250</b>	<b>0.7</b>	<b>\$27</b>
<b>Female</b>	10,830	27.1	108,548	0.5	21	9,816	24.6	90,616	0.7	24	7,751	19.4	73,791	0.7	27
<b>Disabled</b>	5,082	31.8	56,684	0.5	19	2,349	14.7	26,101	0.6	24	2,627	16.4	29,166	0.7	31
5 and younger	2	100.0	24	0.1	1	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	3	50.0	29	0.7	10	0	0.0	0	0.0	0
15-20	8	15.4	96	0.2	18	5	9.6	60	0.6	23	2	3.8	24	0.7	9
21-44	1,811	24.7	20,427	0.4	13	485	6.6	5,483	0.6	23	674	9.2	7,589	0.7	31
45-64	3,089	37.8	34,409	0.5	22	1,741	21.3	19,361	0.6	24	1,798	22.0	20,055	0.7	31
65-74	158	40.7	1,580	0.6	24	102	26.3	1,049	0.6	23	151	38.9	1,484	0.7	31
75-84	8	23.5	76	0.2	6	12	35.3	107	0.6	15	2	5.9	14	0.1	2
85 and older	6	54.5	72	1.0	62	1	9.1	12	0.1	2	0	0.0	0	0.0	0
<b>Other Eligibles</b>	5,748	24.0	51,864	0.6	23	7,467	31.2	64,515	0.7	24	5,124	21.4	44,625	0.7	24
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	2	100.0	24	0.4	4	0	0.0	0	0.0	0
15-20	1	12.5	2	0.5	4	0	0.0	0	0.0	0	2	25.0	4	1.5	13
21-44	45	21.8	397	0.5	17	8	3.9	52	0.4	18	7	3.4	53	1.5	68
45-64	16	35.6	166	0.5	27	9	20.0	86	0.4	27	13	28.9	102	0.5	24
65-74	1,670	31.7	16,133	0.6	24	1,518	28.9	13,987	0.6	22	1,542	29.3	14,048	0.7	28
75-84	2,109	26.0	18,880	0.6	24	2,759	34.0	24,482	0.7	24	2,071	25.5	18,177	0.7	23
85 and older	1,907	18.6	16,286	0.6	21	3,171	30.9	25,884	0.8	24	1,489	14.5	12,241	0.8	22
<b>Male</b>	5,550	21.2	54,124	0.6	22	5,418	20.6	51,011	0.7	24	3,709	14.1	35,459	0.8	28
<b>Disabled</b>	2,774	16.4	30,587	0.5	20	2,489	14.7	27,029	0.6	25	1,907	11.2	20,675	0.8	31
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	5	55.6	60	0.9	17	0	0.0	0	0.0	0
15-20	16	22.2	187	0.6	23	5	6.9	51	0.8	19	1	1.4	12	0.3	12
21-44	1,080	11.8	12,034	0.4	14	831	9.0	9,080	0.6	25	548	6.0	6,007	0.8	31
45-64	1,578	21.3	17,312	0.6	23	1,558	21.0	16,956	0.6	25	1,299	17.5	14,083	0.7	31
65-74	96	37.1	1,006	0.7	30	88	34.0	866	0.6	25	58	22.4	568	0.8	29
75-84	4	20.0	48	0.8	42	1	5.0	4	0.8	19	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	1	12.5	12	0.1	3	1	12.5	5	0.6	23
<b>Other Eligibles</b>	2,776	29.9	23,537	0.6	25	2,929	31.6	23,982	0.7	24	1,802	19.4	14,784	0.7	25
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	1	50.0	12	0.2	4	2	100.0	24	0.3	11	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	1	33.3	12	0.1	5	0	0.0	0	0.0	0
21-44	22	23.4	204	0.3	12	7	7.4	77	0.6	16	9	9.6	94	0.6	22
45-64	9	18.8	92	0.5	18	12	25.0	99	0.4	16	8	16.7	48	0.9	30
65-74	860	27.7	7,715	0.6	25	919	29.6	7,963	0.6	23	620	20.0	5,349	0.7	28
75-84	1,073	32.9	8,729	0.7	27	1,089	33.4	8,793	0.7	24	726	22.3	5,926	0.7	25
85 and older	811	29.3	6,785	0.6	24	899	32.5	7,014	0.8	24	439	15.9	3,367	0.8	22
<b>Unknown</b>	0	0.0	0	0.0	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 Minnesota, released by CMS in 11/2003. This table was produced on 06/25/2004.

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

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

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

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

TABLE 16D  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR NINTH AND TENTH TOP DRUG GROUPS  
 SEPARATELY, BY SEX, BOE, AND AGE<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, MINNESOTA, 1999

Beneficiary Characteristics	ANTI-ANXIETY AGENTS				ANTI-HYPERTENSIVES							
	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 Bene Mos	
<b>All</b>	<b>13,148</b>	<b>19.9 %</b>	<b>133,670</b>	<b>0.5</b>	<b>\$21</b>	<b>5,885</b>	<b>8.9 %</b>	<b>60,884</b>	<b>0.6</b>	<b>\$44</b>	<b>66,137</b>	<b>609,653</b>
<b>Female</b>	8,712	21.8	87,828	0.5	20	3,830	9.6	39,371	0.6	45	39,896	361,519
<b>Disabled</b>	4,328	27.1	49,167	0.5	24	1,733	10.8	19,406	0.6	47	15,991	172,891
5 and younger	1	50.0	12	0.1	1	0	0.0	0	0.0	0	2	18
6-14	0	0.0	0	0.0	0	1	16.7	12	0.4	31	6	65
15-20	9	17.3	104	0.4	12	3	5.8	36	0.3	13	52	574
21-44	1,916	26.2	21,964	0.5	25	368	5.0	4,128	0.6	41	7,320	79,960
45-64	2,332	28.5	26,406	0.5	23	1,282	15.7	14,417	0.6	49	8,178	88,238
65-74	59	15.2	559	0.6	19	75	19.3	774	0.7	46	388	3,615
75-84	10	29.4	110	0.7	36	3	8.8	27	0.3	10	34	313
85 and older	1	9.1	12	0.3	12	1	9.1	12	1.1	34	11	108
<b>Other Eligibles</b>	4,384	18.3	38,661	0.6	16	2,097	8.8	19,965	0.6	43	23,905	188,628
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	17
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	8	53
21-44	38	18.4	311	0.6	31	2	1.0	12	0.4	49	206	1,261
45-64	8	17.8	85	0.4	30	4	8.9	28	0.5	27	45	342
65-74	807	15.3	7,437	0.6	18	914	17.4	8,794	0.6	44	5,260	43,731
75-84	1,589	19.6	14,097	0.6	15	897	11.1	8,580	0.6	44	8,109	65,558
85 and older	1,942	18.9	16,731	0.6	16	280	2.7	2,551	0.7	41	10,275	77,666
<b>Male</b>	4,436	16.9	45,842	0.5	23	2,055	7.8	21,513	0.6	43	26,241	248,134
<b>Disabled</b>	3,112	18.3	34,981	0.5	25	1,436	8.5	16,006	0.6	44	16,965	179,462
5 and younger	1	25.0	6	0.2	7	0	0.0	0	0.0	0	4	38
6-14	0	0.0	0	0.0	0	1	11.1	12	0.9	9	9	101
15-20	4	5.6	46	0.7	21	0	0.0	0	0.0	0	72	726
21-44	1,635	17.8	18,508	0.5	26	500	5.4	5,693	0.6	39	9,185	98,084
45-64	1,431	19.3	16,041	0.5	24	897	12.1	9,912	0.6	46	7,408	77,915
65-74	38	14.7	354	0.5	11	38	14.7	389	0.6	51	259	2,340
75-84	3	15.0	26	0.4	20	0	0.0	0	0.0	0	20	183
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	8	75
<b>Other Eligibles</b>	1,324	14.3	10,861	0.6	15	619	6.7	5,507	0.6	39	9,276	68,672
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
6-14	1	50.0	12	0.3	15	0	0.0	0	0.0	0	2	24
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	20
21-44	13	13.8	123	0.5	27	2	2.1	22	0.8	36	94	672
45-64	3	6.3	10	0.6	47	7	14.6	59	0.6	55	48	309
65-74	327	10.5	2,779	0.5	16	345	11.1	3,086	0.6	42	3,102	24,202
75-84	506	15.5	4,181	0.6	15	207	6.3	1,864	0.6	37	3,262	24,056
85 and older	474	17.1	3,756	0.6	15	58	2.1	476	0.6	28	2,765	19,389
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0

Table 16D

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 1999 file for Minnesota, 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, MINNESOTA, 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>\$196</b>	<b>5.8</b>	<b>15,040</b>	<b>110,583</b>
<b>Age</b>				
0-64	378	7.5	1,343	14,469
65-74	248	6.7	1,273	9,041
75-84	188	5.9	4,208	28,944
85 and older	147	5.2	8,216	58,129
Unknown	0	0.0	0	0
<b>Gender</b>				
Female	186	5.8	10,737	79,271
Male	224	5.8	4,303	31,312
Unknown	0	0.0	0	0
<b>Race</b>				
White	195	5.8	14,341	105,770
African American	347	7.3	157	1,164
Other/unknown	187	5.2	542	3,649
<b>Basis of Eligibility</b>				
Aged	168	5.5	13,615	95,455
Disabled	375	7.5	1,425	15,128
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 Minnesota, 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 5,474 beneficiaries who were in nursing facilities for part of their enrollment and their 44,259 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, MINNESOTA, 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	Generic	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	0.4	0.2	0.0	0.2	\$0	\$2	\$40	\$66	\$25	\$10	30,335	\$1,200,049	8,440	56.1 %	74,081
Biologicals	0.1	0.1	0.0	0.1	3	3	27	11	0	43	978	26,428	836	5.6	7,583
Antineoplastic Agents	0.8	0.3	0.1	0.3	105	12	135	244	98	36	1,819	244,959	302	2.0	2,331
Endocrine/Metabolic Drugs	1.1	0.4	0.3	0.4	21	4	19	36	12	10	46,708	895,474	5,413	36.0	42,033
Cardiovascular Agents	1.9	0.4	0.5	1.0	36	15	19	35	25	10	146,183	2,752,833	10,051	66.8	75,697
Respiratory Agents	1.0	0.5	0.0	0.5	38	23	37	48	22	28	31,181	1,158,652	3,564	23.7	30,271
Gastrointestinal Agents	0.9	0.3	0.1	0.4	50	31	54	92	64	24	38,728	2,109,242	5,144	34.2	42,114
Genitourinary Agents	0.6	0.2	0.0	0.4	18	11	31	48	31	20	12,153	379,003	2,364	15.7	20,808
CNS Drugs	1.5	0.7	0.2	0.6	86	58	56	86	87	14	109,418	6,145,858	9,042	60.1	71,824
Stimulants/Anti-obesity/Anorexia	0.7	0.0	0.2	0.5	19	0	26	112	41	19	649	16,611	98	0.7	882
Miscellaneous Psychological/Neurological Agents	0.8	0.8	0.0	0.0	87	86	108	111	69	16	2,709	292,078	455	3.0	3,363
Analgesics and Anesthetics	0.9	0.2	0.1	0.6	29	17	32	73	46	13	45,547	1,457,793	6,102	40.6	50,284
Neuromuscular Agents	1.3	0.4	0.3	0.6	53	27	42	76	44	22	43,255	1,811,903	3,924	26.1	34,336
Nutritional Products	0.9	0.0	0.3	0.6	14	0	16	14	24	12	33,843	524,897	4,740	31.5	37,870
Hematological Agents	1.1	0.1	0.4	0.6	27	11	26	147	20	14	27,634	706,978	3,292	21.9	25,747
Topical Products	0.6	0.2	0.1	0.3	15	7	24	39	33	13	37,504	911,499	7,056	46.9	62,093
Miscellaneous Products	0.4	0.0	0.0	0.3	19	6	49	132	109	27	1,584	78,399	465	3.1	4,237
Unknown Therapeutic Category	0.6	0.0	0.0	0.0	19	0	32	0	0	0	31,816	1,004,757	6,053	40.2	52,486
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.	642,044	21,717,413	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 1999 file for Minnesota, 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 5,474 beneficiaries who were in nursing facilities for part of their enrollment and their 44,259 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 Minnesota, 4.3 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.

Table 18

Dual Eligible Beneficiaries

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

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

Beneficiary Characteristics	No. of Benes					No. of Bene Mos					
	All	Aged	Disabled	Adults	Children	All	Aged	Disabled	Adults	Children	Unknown
<b>All</b>	<b>89,946</b>	<b>55,814</b>	<b>33,248</b>	<b>845</b>	<b>39</b>	<b>923,146</b>	<b>557,759</b>	<b>357,893</b>	<b>7,179</b>	<b>315</b>	<b>0</b>
<b>Age</b>											
5 and younger	6	0	6	0	0	62	0	62	0	0	0
6-14	20	0	15	0	5	219	0	166	0	53	0
15-20	145	0	125	1	19	1,536	0	1,362	5	169	0
21-44	17,065	0	16,542	508	15	183,900	0	179,447	4,360	93	0
45-64	15,880	1	15,616	263	0	169,203	10	166,925	2,268	0	0
65-74	15,514	14,615	829	70	0	162,970	153,745	8,702	523	0	0
75-84	19,005	18,916	87	2	0	191,280	190,336	932	12	0	0
85 and older	22,311	22,282	28	1	0	213,976	213,668	297	11	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0
<b>Gender</b>											
Female	57,546	40,898	16,166	463	19	594,185	413,757	176,298	3,993	137	0
Male	32,400	14,916	17,082	382	20	328,961	144,002	181,595	3,186	178	0
Unknown	0	0	0	0	0	0	0	0	0	0	0
<b>Race</b>											
White	78,714	49,443	28,638	602	31	807,243	490,634	311,266	5,062	281	0
African American	4,208	1,478	2,612	114	4	42,925	15,436	26,416	1,048	25	0
Other/unknown	7,024	4,893	1,998	129	4	72,978	51,689	20,211	1,069	9	0
<b>Use of Nursing Facilities</b>											
All year	26,727	25,267	1,460	0	0	255,633	240,033	15,600	0	0	0
Part year	7,053	6,062	990	0	1	70,496	60,060	10,434	0	2	0
None	56,166	24,485	30,798	845	38	597,017	257,666	331,859	7,179	313	0
<b>Maintenance Assistance Status</b>											
Cash	34,369	16,326	17,853	187	3	387,198	183,648	201,882	1,641	27	0
Medically needy	9,614	4,763	4,848	0	3	90,322	41,915	48,398	0	9	0
Poverty related	1,324	734	590	0	0	13,744	7,879	5,865	0	0	0
Other/unknown	44,639	33,991	9,957	658	33	431,882	324,317	101,748	5,538	279	0
<b>Dual Status<sup>c</sup></b>											
Full dual, all year	86,375	53,878	31,628	831	38	885,517	537,077	341,106	7,031	303	0
Full dual, part year	3,571	1,936	1,620	14	1	37,629	20,682	16,787	148	12	0
<b>Managed Care Status</b>											
FFS all year	56,258	23,633	32,366	242	17	564,163	213,255	348,738	2,024	146	0
FFS part year, with Rx claims	8,474	7,908	454	108	4	88,379	82,423	4,834	1,090	32	0
FFS part year, no Rx claims	1,405	1,214	136	55	0	13,637	11,863	1,304	470	0	0
MC all year, with Rx claims	20	17	3	0	0	148	129	19	0	0	0
MC all year, no Rx claims	23,789	23,042	289	440	18	256,819	250,089	2,998	3,595	137	0

Source: Data for this table are from the MAX 1999 file for Minnesota, 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, MINNESOTA, 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
<b>All</b>	<b>89,946</b>	<b>923,146</b>	<b>66,137</b>	<b>609,653</b>	<b>23,809</b>	<b>313,493</b>
FFS all year	56,258	564,163	56,258	564,163	0	0
FFS part year, with Rx claims	8,474	88,379	8,474	40,295	0	48,084
FFS part year, with no Rx claims	1,405	13,637	1,405	5,195	0	8,442
MC all year, with Rx claims	20	148	0	0	20	148
MC all year, with no Rx claims	23,789	256,819	0	0	23,789	256,819

Source: Data for this table are from the MAX 1999 file for Minnesota, 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>  
 MINNESOTA, 1999

Total Number of Dual Eligible Beneficiaries 66,137  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries \$111,326,057  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary \$1,683

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	9,496	14.4 %	\$0	0.0 %
1-500	19,742	29.9	3,945,858	3.5
501-1,000	8,911	13.5	6,487,320	5.8
1,001-1,500	6,006	9.1	7,439,790	6.7
1,501-2,000	4,424	6.7	7,700,579	6.9
2,001-2,500	3,279	5.0	7,327,398	6.6
2,501-3,000	2,533	3.8	6,938,708	6.2
3,001-3,500	2,018	3.1	6,542,228	5.9
3,501-4,000	1,661	2.5	6,221,052	5.6
4,001-4,500	1,275	1.9	5,401,272	4.9
4,501-5,000	1,029	1.6	4,884,857	4.4
5,001-5,500	829	1.3	4,341,269	3.9
5,501-6,000	731	1.1	4,194,912	3.8
6,001-6,500	600	0.9	3,746,848	3.4
6,501-7,000	534	0.8	3,599,956	3.2
7,001-7,500	438	0.7	3,166,571	2.8
7,501-8,000	364	0.6	2,821,677	2.5
8,001-8,500	325	0.5	2,675,867	2.4
8,501-9,000	267	0.4	2,336,391	2.1
9,001-9,500	244	0.4	2,256,773	2.0
9,501-10,000	211	0.3	2,057,833	1.8
10,001+	1,220	1.8	17,238,898	15.5

Source: Data for this table are from the MAX 1999 file for Minnesota, released by CMS in 11/2003. This table was produced on 10/26/2004.

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

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

SUPPLEMENTAL TABLE 1A  
 MEDICAID PHARMACY REIMBURSEMENT FOR DISABLED DUAL ELIGIBLE BENEFICIARIES UNDER AGE 65<sup>a, b, c</sup>  
 MINNESOTA, 1999

Total Number of Disabled Dual Eligible Beneficiaries, Age < 65                      32,236  
 Total Pharmacy Reimbursement for Disabled Dual Eligible Beneficiaries, Age < 65        \$75,648,523  
 Mean Pharmacy Reimbursement per Disabled Dual Eligible Beneficiary, Age < 65        \$2,347

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age < 65	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	4,294	13.3 %	0	0.0 %
1-500	7,991	24.8	1,535,161	2.0
501-1,000	3,590	11.1	2,635,043	3.5
1,001-1,500	2,655	8.2	3,297,850	4.4
1,501-2,000	2,055	6.4	3,578,057	4.7
2,001-2,500	1,635	5.1	3,659,465	4.8
2,501-3,000	1,324	4.1	3,628,629	4.8
3,001-3,500	1,164	3.6	3,777,716	5.0
3,501-4,000	1,018	3.2	3,813,823	5.0
4,001-4,500	856	2.7	3,628,734	4.8
4,501-5,000	716	2.2	3,403,130	4.5
5,001-5,500	623	1.9	3,261,828	4.3
5,501-6,000	581	1.8	3,336,100	4.4
6,001-6,500	490	1.5	3,059,591	4.0
6,501-7,000	448	1.4	3,020,149	4.0
7,001-7,500	379	1.2	2,738,976	3.6
7,501-8,000	322	1.0	2,496,491	3.3
8,001-8,500	291	0.9	2,397,541	3.2
8,501-9,000	240	0.7	2,099,827	2.8
9,001-9,500	226	0.7	2,089,201	2.8
9,501-10,000	190	0.6	1,852,476	2.4
10,001+	1,148	3.6	16,338,735	21.6

Source: Data for this table are from the MAX 1999 file for Minnesota, released by CMS in 11/2003. This table was produced on 10/26/2004.

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

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

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<sup>a, b</sup>  
 MINNESOTA, 1999

Total Number of Dual Eligible Beneficiaries, Age 65-74      9,009  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65-74      \$9,891,782  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65-74      \$1,098

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 65-74	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	2,205	24.5 %	0	0.0
1-500	2,725	30.2	528,098	5.3
501-1,000	1,133	12.6	818,382	8.3
1,001-1,500	757	8.4	937,087	9.5
1,501-2,000	533	5.9	928,316	9.4
2,001-2,500	366	4.1	818,887	8.3
2,501-3,000	283	3.1	775,338	7.8
3,001-3,500	216	2.4	701,100	7.1
3,501-4,000	201	2.2	756,282	7.6
4,001-4,500	146	1.6	615,635	6.2
4,501-5,000	91	1.0	429,676	4.3
5,001-5,500	75	0.8	393,763	4.0
5,501-6,000	61	0.7	349,003	3.5
6,001-6,500	43	0.5	268,676	2.7
6,501-7,000	33	0.4	223,241	2.3
7,001-7,500	23	0.3	166,605	1.7
7,501-8,000	22	0.2	169,857	1.7
8,001-8,500	17	0.2	139,758	1.4
8,501-9,000	17	0.2	148,738	1.5
9,001-9,500	7	0.1	65,371	0.7
9,501-10,000	11	0.1	107,853	1.1
10,001+	44	0.5	550,116	5.6

Source: Data for this table are from the MAX 1999 file for Minnesota, released by CMS in 11/2003. This table was produced on 10/26/2004.

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

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

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

Total Number of Dual Eligible Beneficiaries, Age 75-84    11,425  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 75-84                    \$12,496,921  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 75-84                    \$1,094

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 75-84	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	1,749	15.3 %	0	0.0 %
1-500	3,776	33.1	787,367	6.3
501-1,000	1,726	15.1	1,253,882	10.0
1,001-1,500	1,164	10.2	1,437,648	11.5
1,501-2,000	852	7.5	1,478,825	11.8
2,001-2,500	598	5.2	1,335,278	10.7
2,501-3,000	454	4.0	1,243,697	10.0
3,001-3,500	337	2.9	1,092,097	8.7
3,501-4,000	221	1.9	826,906	6.6
4,001-4,500	153	1.3	647,901	5.2
4,501-5,000	124	1.1	588,459	4.7
5,001-5,500	73	0.6	382,062	3.1
5,501-6,000	56	0.5	320,576	2.6
6,001-6,500	36	0.3	223,773	1.8
6,501-7,000	33	0.3	222,624	1.8
7,001-7,500	22	0.2	159,890	1.3
7,501-8,000	13	0.1	101,402	0.8
8,001-8,500	10	0.1	81,895	0.7
8,501-9,000	3	0.0	26,228	0.2
9,001-9,500	4	0.0	37,137	0.3
9,501-10,000	5	0.0	48,656	0.4
10,001+	16	0.1	200,618	1.6

Source: Data for this table are from the MAX 1999 file for Minnesota, released by CMS in 11/2003. This table was produced on 10/26/2004.

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

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

SUPPLEMENTAL TABLE 1D  
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 85 AND OLDER<sup>a, b</sup>  
 MINNESOTA, 1999

Total Number of Dual Eligible Beneficiaries, Age 85+ 13,059  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 85+ \$12,847,140  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 85+ \$984

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 85+	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	1,141	8.7 %	0	0.0 %
1-500	5,077	38.9	1,068,539	8.3
501-1,000	2,428	18.6	1,756,221	13.7
1,001-1,500	1,414	10.8	1,748,654	13.6
1,501-2,000	965	7.4	1,682,201	13.1
2,001-2,500	672	5.1	1,495,824	11.6
2,501-3,000	465	3.6	1,271,866	9.9
3,001-3,500	294	2.3	948,737	7.4
3,501-4,000	216	1.7	805,289	6.3
4,001-4,500	117	0.9	496,319	3.9
4,501-5,000	94	0.7	444,192	3.5
5,001-5,500	56	0.4	293,373	2.3
5,501-6,000	31	0.2	177,529	1.4
6,001-6,500	30	0.2	188,645	1.5
6,501-7,000	20	0.2	133,942	1.0
7,001-7,500	13	0.1	93,626	0.7
7,501-8,000	5	0.0	38,570	0.3
8,001-8,500	3	0.0	24,290	0.2
8,501-9,000	4	0.0	35,378	0.3
9,001-9,500	7	0.1	65,064	0.5
9,501-10,000	3	0.0	29,226	0.2
10,001+	4	0.0	49,655	0.4

Source: Data for this table are from the MAX 1999 file for Minnesota, released by CMS in 11/2003. This table was produced on 10/26/2004.

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

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