

STATISTICAL COMPENDIUM: MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 1999 NEW JERSEY

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, NEW JERSEY, 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	140,403	76,360	63,509	518	16	0	1,431,763	734,848	692,853	3,915	147	0		
Age														
5 and younger	20	10	10	0	0	0	114	26	88	0	0	0		
6-14	27	4	20	0	3	0	252	18	215	0	19	0		
15-20	198	0	188	0	10	0	2,165	0	2,056	0	109	0		
21-44	19,334	0	18,996	335	3	0	209,708	0	207,300	2,389	19	0		
45-64	20,727	7	20,539	181	0	0	225,003	84	223,401	1,518	0	0		
65-74	36,968	19,683	17,283	2	0	0	387,779	197,528	190,243	8	0	0		
75-84	34,653	29,420	5,233	0	0	0	351,046	294,309	56,737	0	0	0		
85 and older	28,467	27,228	1,239	0	0	0	255,609	242,808	12,801	0	0	0		
Unknown	9	8	1	0	0	0	87	75	12	0	0	0		
Gender														
Female	96,461	58,612	37,577	261	11	0	982,729	567,158	413,727	1,729	115	0		
Male	43,942	17,748	25,932	257	5	0	449,034	167,690	279,126	2,186	32	0		
Unknown	0	0	0	0	0	0	0	0	0	0	0	0		
Race														
White	78,306	45,958	32,040	301	7	0	773,898	421,331	349,811	2,692	64	0		
African American	27,072	10,401	16,514	151	6	0	286,907	105,065	180,913	863	66	0		
Other/unknown	35,025	20,001	14,955	66	3	0	370,958	208,452	162,129	360	17	0		
Use of Nursing Facilities														
All year	27,366	23,076	4,289	1	0	0	241,196	199,937	41,251	8	0	0		
Part year	9,728	8,134	1,560	34	0	0	79,864	65,109	14,413	342	0	0		
None	103,309	45,150	57,660	483	16	0	1,110,703	469,802	637,189	3,565	147	0		
Maintenance Assistance Status														
Cash	70,393	30,164	40,115	114	0	0	772,384	327,304	444,645	435	0	0		
Medically needy	5	2	3	0	0	0	35	16	19	0	0	0		
Poverty-related	27,940	13,579	14,314	44	3	0	292,167	137,396	154,584	177	10	0		
Other/unknown	42,065	32,615	9,077	360	13	0	367,177	270,132	93,605	3,303	137	0		
Dual Medicare Status^c														
Full dual, all year	139,547	75,705	63,314	512	16	0	1,423,439	728,491	690,940	3,861	147	0		
Full dual, part year	856	655	195	6	0	0	8,324	6,357	1,913	54	0	0		
Managed Care Status														
FFS all year	120,628	60,491	59,762	361	14	0	1,271,379	606,405	661,543	3,292	139	0		
FFS part year, with Rx claims	18,982	15,294	3,579	107	2	0	156,433	125,352	30,576	497	8	0		
FFS part year, no Rx claims	793	575	168	50	0	0	3,951	3,091	734	126	0	0		

Source: Data for this table are from the MAX 1999 file for New Jersey, released by CMS in 1/2004. 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, NEW JERSEY, 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 Benes
All	88.9 %	42.9	\$2,014	\$47	\$14,602	13.8 %	\$61	140,403
Age								
5 and younger	75.0	24.5	2,016	82	9,320	21.6	30	20
6-14	85.2	53.9	9,874	183	20,500	48.2	75	27
15-20	75.3	22.9	1,684	73	9,901	17.0	36	198
21-44	84.3	37.0	2,726	74	13,032	20.9	58	19,334
45-64	90.5	50.8	2,842	56	14,891	19.1	107	20,727
65-74	87.4	40.6	1,797	44	9,069	19.8	76	36,968
75-84	89.7	44.0	1,783	41	14,818	12.0	50	34,653
85 and older	91.7	43.0	1,487	35	22,406	6.6	25	28,467
Unknown	100.0	48.1	2,029	42	31,152	6.5	0	9
Basis of Eligibility								
Aged	88.4	40.0	1,555	39	15,416	10.1	37	76,360
Disabled	89.5	46.5	2,564	55	13,606	18.8	91	63,509
Adults	73.9	25.3	2,387	94	16,547	14.4	46	518
Children	87.5	36.6	2,789	76	16,709	16.7	79	16
Unknown	0.0	0.0	0	0	0	0.0	0	0
Gender								
Female	90.5	45.0	1,965	44	14,882	13.2	59	96,461
Male	85.3	38.4	2,123	55	13,988	15.2	66	43,942
Unknown	0.0	0.0	0	0	0	0.0	0	0
Race								
White	89.3	45.8	2,046	45	18,295	11.2	38	78,306
African American	88.1	41.2	2,177	53	12,703	17.1	102	27,072
Other/unknown	88.4	37.7	1,817	48	7,813	23.3	83	35,025
Use of Nursing Facilities								
Entire year	96.9	57.4	2,004	35	34,148	5.9	0	27,366
Part year	92.9	45.9	1,818	40	22,110	8.2	15	9,728
None	86.4	38.8	2,035	53	8,717	23.3	82	103,309
Maintenance Assistance Status								
Cash	87.7	39.5	2,022	51	7,862	25.7	86	70,393
Medically needy	40.0	7.4	577	78	6,471	8.9	0	5
Poverty related	88.7	41.0	2,245	55	8,021	28.0	78	27,940
Other/unknown	91.0	49.9	1,848	37	30,253	6.1	10	42,065

Source: Data for this table are from the MAX 1999 file for New Jersey, released by CMS in 1/2004. 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, NEW JERSEY, 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	4.2	\$198	13.8 %	11.1 %	17.1 %	12.3 %	30.4 %	21.7 %	7.3 %	\$1,432	140,403	1,431,763
Age												
5 and younger	4.3	354	21.6	25.0	0.0	15.0	20.0	30.0	10.0	1,635	20	114
6-14	5.8	1,058	48.2	14.8	3.7	7.4	22.2	48.1	3.7	2,196	27	252
15-20	2.1	154	17.0	24.7	31.8	12.6	17.7	11.1	2.0	906	198	2,165
21-44	3.4	251	20.9	15.7	25.4	12.7	25.6	15.3	5.2	1,202	19,334	209,708
45-64	4.7	262	19.1	9.5	15.1	12.0	30.5	24.4	8.6	1,372	20,727	225,003
65-74	3.9	171	19.8	12.6	19.0	13.0	30.5	19.5	5.4	865	36,968	387,779
75-84	4.3	176	12.0	10.3	15.0	12.2	31.8	22.9	7.8	1,463	34,653	351,046
85 and older	4.8	166	6.6	8.3	12.9	11.2	31.8	25.8	9.9	2,495	28,467	255,609
Unknown	5.0	210	6.5	0.0	0.0	11.1	44.4	33.3	11.1	3,223	9	87
Basis of Eligibility												
Aged	4.2	162	10.1	11.6	16.3	12.4	30.7	21.4	7.6	1,602	76,360	734,848
Disabled	4.3	235	18.8	10.5	18.0	12.1	30.2	22.2	7.1	1,247	63,509	692,853
Adults	3.3	316	14.4	26.1	20.7	10.8	22.0	15.1	5.4	2,189	518	3,915
Children	4.0	304	16.7	12.5	18.8	12.5	18.8	31.3	6.3	1,819	16	147
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Gender												
Female	4.4	193	13.2	9.5	15.6	12.3	31.6	23.1	7.9	1,461	96,461	982,729
Male	3.8	208	15.2	14.7	20.4	12.3	27.7	18.7	6.2	1,369	43,942	449,034
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	4.6	207	11.2	10.7	14.7	11.2	29.9	23.9	9.6	1,851	78,306	773,898
African American	3.9	205	17.1	11.9	18.8	12.9	30.5	20.4	5.3	1,199	27,072	286,907
Other/unknown	3.6	172	23.3	11.6	21.1	14.3	31.3	17.9	3.8	738	35,025	370,958
Use of Nursing Facilities												
Entire year	6.5	227	5.9	3.1	8.2	8.6	29.8	31.9	18.3	3,874	27,366	241,196
Part year	5.6	222	8.2	7.1	10.9	10.5	30.5	27.1	13.9	2,693	9,728	79,864
None	3.6	189	23.3	13.6	20.0	13.4	30.6	18.6	3.8	811	103,309	1,110,703
Maintenance Assistance Status												
Cash	3.6	184	25.7	12.3	20.6	13.5	30.9	18.7	4.0	717	70,393	772,384
Medically needy	1.1	83	8.9	60.0	20.0	0.0	0.0	20.0	0.0	924	5	35
Poverty related	3.9	215	28.0	11.3	18.2	13.5	31.7	20.5	4.7	767	27,940	292,167
Other/unknown	5.7	212	6.1	9.0	10.5	9.4	28.8	27.6	14.7	3,466	42,065	367,177

Source: Data for this table are from the MAX 1999 file for New Jersey, released by CMS in 1/2004. 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, NEW JERSEY, 1999

Beneficiary Characteristics	All Rx			Patented Brand-Name Drugs			Off-Patent Brand-Name Drugs			Generic Drugs		
	No. of Rx	Rx \$	\$ per Rx	No. of Rx	Rx \$	\$ per Rx	No. of Rx	Rx \$	\$ per Rx	No. of Rx	Rx \$	\$ per Rx
All	4.2	\$198	\$47	1.6	\$124	\$79	0.7	\$38	\$53	1.7	\$29	\$17
Age												
5 and younger	4.3	354	82	1.5	278	181	1.0	38	39	1.6	33	21
6-14	5.8	1,058	183	2.6	927	353	1.0	69	69	1.8	48	26
15-20	2.1	154	73	0.9	105	120	0.4	35	82	0.7	12	17
21-44	3.4	251	74	1.4	178	129	0.5	43	80	1.3	25	19
45-64	4.7	262	56	1.9	173	94	0.8	48	63	1.8	33	18
65-74	3.9	171	44	1.6	106	68	0.7	34	51	1.4	25	18
75-84	4.3	176	41	1.6	104	65	0.8	36	47	1.8	30	17
85 and older	4.8	166	35	1.5	92	61	0.8	33	42	2.2	35	16
Unknown	5.0	210	42	1.8	155	85	0.2	12	60	2.4	34	14
Basis of Eligibility												
Aged	4.2	162	39	1.5	95	64	0.7	32	46	1.8	29	17
Disabled	4.3	235	55	1.7	154	93	0.7	44	61	1.7	30	18
Adults	3.3	316	94	1.4	250	174	0.5	31	64	1.3	27	21
Children	4.0	304	76	2.5	262	107	0.6	27	47	0.8	13	16
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Gender												
Female	4.4	193	44	1.6	119	72	0.7	37	51	1.8	30	17
Male	3.8	208	55	1.4	136	96	0.6	38	59	1.5	27	18
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Race												
White	4.6	207	45	1.7	126	77	0.8	40	54	2.0	34	17
African American	3.9	205	53	1.5	137	91	0.7	36	54	1.5	26	17
Other/unknown	3.6	172	48	1.5	110	75	0.6	34	52	1.3	22	18
Use of Nursing Facilities												
Entire year	6.5	227	35	2.1	129	63	1.0	40	42	3.2	51	16
Part year	5.6	222	40	1.9	135	71	0.8	37	45	2.6	43	16
None	3.6	189	53	1.4	122	85	0.6	37	58	1.3	24	18
Maintenance Assistance Status												
Cash	3.6	184	51	1.4	118	82	0.7	37	56	1.3	24	18
Medically needy	1.1	83	78	0.7	72	105	0.1	9	82	0.2	1	5
Poverty related	3.9	215	55	1.6	140	89	0.7	42	62	1.5	27	18
Other/unknown	5.7	212	37	1.9	124	67	0.8	37	43	2.7	43	16

Source: Data for this table are from the MAX 1999 file for New Jersey, released by CMS in 1/2004. 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 New Jersey, 6.4 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, NEW JERSEY, 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	0.1	\$32	\$30	\$0	\$2	\$90	\$127	\$59	\$15	293,261	\$26,517,163	76,551	54.5 %	818,698
Biologics	0.1	0.1	0.0	0.1	10	4	4	2	88	62	3,315	37	5,875	517,743	5,248	3.7	52,633
Antineoplastic Agents	0.6	0.2	0.2	0.1	90	51	32	7	156	235	135	55	36,711	5,732,410	6,516	4.6	63,873
Endocrine/Metabolic Drugs	0.9	0.4	0.0	0.4	31	24	2	5	35	57	35	11	454,655	15,775,517	48,304	34.4	514,659
Cardiovascular Agents	1.6	0.5	0.4	0.7	57	28	18	11	35	51	44	16	1,441,783	50,938,986	84,748	60.4	889,768
Respiratory Agents	0.7	0.3	0.0	0.3	25	17	1	7	36	50	40	21	430,808	15,517,077	58,123	41.4	632,587
Gastrointestinal Agents	0.7	0.3	0.1	0.3	50	33	10	7	69	104	75	27	437,785	30,353,759	57,465	40.9	609,243
Genitourinary Agents	0.4	0.2	0.0	0.1	16	12	0	4	44	52	37	31	65,430	2,890,447	16,429	11.7	175,775
CNS Drugs	1.2	0.5	0.2	0.5	76	51	17	9	62	95	88	17	846,442	52,122,749	64,955	46.3	684,823
Stimulants/Anti-obesity/Anorexia	0.5	0.1	0.1	0.3	19	5	6	7	38	83	52	23	3,000	112,993	571	0.4	6,024
Miscellaneous Psychological/Neurological Agents	0.5	0.4	0.0	0.0	49	45	2	2	98	105	104	32	35,971	3,537,708	6,902	4.9	71,992
Analgesics and Anesthetics	0.6	0.2	0.1	0.3	30	19	7	4	49	91	66	14	417,193	20,485,714	62,568	44.6	679,002
Neuromuscular Agents	1.0	0.3	0.2	0.5	44	24	8	12	43	75	44	23	335,940	14,296,428	30,554	21.8	326,956
Nutritional Products	0.6	0.0	0.2	0.4	8	0	4	4	14	19	19	11	254,121	3,599,528	41,844	29.8	442,091
Hematological Agents	0.7	0.1	0.1	0.4	48	35	5	7	68	274	37	17	188,167	12,830,657	26,144	18.6	269,393
Topical Products	0.6	0.3	0.1	0.2	20	13	5	3	34	46	38	14	442,921	15,106,186	69,368	49.4	739,997
Miscellaneous Products	0.4	0.2	0.1	0.1	68	38	26	4	165	239	243	30	19,204	3,160,776	4,573	3.3	46,441
Unknown Therapeutic Category	0.5	0.0	0.0	0.0	15	0	0	0	30	0	0	0	313,794	9,317,810	58,379	41.6	626,793
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.	6,023,061	282,813,651	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 1999 file for New Jersey, released by CMS in 1/2004. 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 New Jersey, 6.4 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, NEW JERSEY, 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	\$26,831,009	31,226	22.2 %	334,971	0.8	\$101
ULCER DRUGS	24,410,037	57,732	41.1	629,109	0.5	86
ANTIDEPRESSANTS	15,066,954	40,154	28.6	427,584	0.6	57
CALCIUM BLOCKERS	13,447,387	35,150	25.0	381,761	0.7	49
ANTIVIRAL	12,984,236	8,311	5.9	91,866	0.4	319
ANTIHYPERTENSIVE	12,926,655	51,105	36.4	555,781	0.6	38
ANALGESICS - ANTI-INFLAMMATORY	10,968,783	54,990	39.2	622,664	0.3	59
ANTIDIABETIC	10,398,641	35,162	25.0	386,728	0.7	41
ANTIHYPERTENSIVE	10,150,120	21,014	15.0	236,570	0.6	74
ANTICONVULSANT	9,842,405	22,026	15.7	238,400	0.9	46

Source: Data for this table are from the MAX 1999 file for New Jersey, released by CMS in 1/2004. 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, NEW JERSEY, 1999

Beneficiary Characteristics	All Top 10 Drug Groups				ANTIPSYCHOTICS				ULCER DRUGS			
	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	2,265,392	\$147,026,227	31,226	22.2 %	334,971	0.8	\$80	57,732	41.1 %	629,109	0.5	\$39
Female	1,578,277	95,241,231	19,357	20.1	204,908	0.7	66	42,253	43.8	461,300	0.5	39
Disabled	775,004	52,830,669	10,731	28.6	121,229	0.8	81	19,065	50.7	218,131	0.4	38
5 and younger	24	1,012	0	0.0	0	0.0	0	1	25.0	12	0.9	49
6-14	82	8,514	0	0.0	0	0.0	0	3	37.5	36	0.3	13
15-20	693	56,219	15	19.2	159	0.6	58	24	30.8	262	0.3	23
21-44	143,548	12,785,828	3,721	46.1	42,650	0.8	98	2,645	32.8	30,435	0.4	36
45-64	270,363	18,973,351	3,752	31.5	42,386	0.8	83	6,513	54.7	74,489	0.4	39
65-74	262,533	15,564,218	2,126	17.4	23,943	0.7	64	7,098	58.1	81,599	0.4	37
75-84	80,691	4,546,347	884	21.0	9,601	0.7	53	2,217	52.6	25,064	0.5	41
85 and older	17,070	895,180	233	21.9	2,490	0.6	37	564	52.9	6,234	0.5	41
Other Eligibles	803,191	42,406,445	8,624	14.6	83,663	0.6	43	23,187	39.4	243,157	0.5	40
5 and younger	36	1,387	0	0.0	0	0.0	0	3	30.0	7	1.0	104
6-14	43	7,491	0	0.0	0	0.0	0	1	20.0	12	0.1	4
15-20	124	10,850	2	28.6	24	0.8	168	0	0.0	0	0.0	0
21-44	1,279	156,638	24	12.6	218	0.6	66	29	15.3	287	0.4	30
45-64	1,015	89,764	19	24.1	201	0.5	54	30	38.0	266	0.3	35
65-74	181,065	10,221,199	1,063	8.1	10,990	0.6	46	5,439	41.5	59,858	0.4	34
75-84	344,961	18,503,838	3,282	14.8	32,606	0.7	46	9,443	42.5	102,212	0.5	40
85 and older	274,668	13,415,278	4,234	18.2	39,624	0.6	39	8,242	35.5	80,515	0.6	45
Male	687,115	51,784,996	11,869	27.0	130,063	0.9	103	15,479	35.2	167,809	0.4	38
Disabled	471,856	40,244,870	9,590	37.0	108,364	0.9	115	8,855	34.1	99,337	0.4	39
5 and younger	34	2,566	0	0.0	0	0.0	0	2	33.3	24	0.5	35
6-14	196	18,828	0	0.0	0	0.0	0	5	41.7	60	0.4	26
15-20	710	56,680	20	18.2	198	0.6	64	14	12.7	168	0.2	18
21-44	189,366	19,608,686	5,412	49.5	61,732	1.0	126	2,581	23.6	29,450	0.4	37
45-64	173,026	14,366,748	3,085	35.8	34,814	1.0	109	3,391	39.3	38,096	0.4	40
65-74	89,881	5,183,008	820	16.2	8,976	0.8	70	2,328	45.9	25,843	0.4	39
75-84	16,398	887,277	207	20.4	2,150	0.8	63	454	44.7	4,812	0.5	41
85 and older	2,245	121,077	46	26.6	494	0.6	47	80	46.2	884	0.4	34
Other Eligibles	215,155	11,530,931	2,273	12.6	21,627	0.6	46	6,623	36.8	68,460	0.5	38
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	5	1,481	0	0.0	0	0.0	0	1	50.0	2	1.0	23
15-20	175	11,441	4	133.3	42	1.2	142	1	33.3	10	0.1	1
21-44	1,540	202,266	33	22.3	336	0.7	98	31	20.9	291	0.4	60
45-64	1,569	191,999	19	17.4	204	0.7	62	33	30.3	307	0.5	37
65-74	75,874	4,119,759	520	7.9	5,157	0.7	49	2,238	34.0	23,898	0.4	35
75-84	94,341	4,975,479	1,024	14.3	9,966	0.6	48	2,895	40.3	30,538	0.5	38
85 and older	41,651	2,028,506	673	16.9	5,922	0.6	37	1,424	35.7	13,414	0.6	44
Unknown	186	13,312	8	88.9	88	0.8	70	2	22.2	24	1.0	107

Source: Data for this table are from the MAX 1999 file for New Jersey, released by CMS in 1/2004. 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, NEW JERSEY, 1999

Beneficiary Characteristics	ANTIDEPRESSANTS					CALCIUM BLOCKERS					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	40,154	28.6 %	427,584	0.6	\$35	35,150	25.0 %	381,761	0.7	\$35	8,311	5.9 %	91,366	0.4	\$141
Female	28,896	30.0	306,700	0.6	35	26,508	27.5	288,545	0.7	35	3,817	4.0	42,480	0.4	103
Disabled	14,659	39.0	165,914	0.6	35	10,222	27.2	116,622	0.7	36	2,656	7.1	30,219	0.4	135
5 and younger	0	0.0	0	0.0	0	2	50.0	24	0.5	18	0	0.0	0	0.0	0
6-14	1	12.5	12	0.2	11	5	62.5	60	0.7	47	3	37.5	36	0.4	124
15-20	15	19.2	155	0.7	55	11	14.1	124	0.5	51	6	7.7	72	0.3	58
21-44	3,954	49.0	44,929	0.6	42	649	8.0	7,333	0.6	35	1,283	15.9	14,543	0.5	160
45-64	5,907	49.6	66,900	0.6	37	3,142	26.4	35,672	0.7	37	889	7.5	10,130	0.5	149
65-74	3,529	28.9	40,195	0.5	28	4,524	37.0	51,913	0.7	36	365	3.0	4,217	0.2	52
75-84	1,009	23.9	11,109	0.6	28	1,540	36.5	17,614	0.7	36	81	1.9	905	0.1	9
85 and older	244	22.9	2,614	0.6	28	349	32.7	3,882	0.7	35	29	2.7	316	0.1	9
Other Eligibles	14,235	24.2	140,770	0.7	34	16,286	27.7	171,923	0.8	35	1,161	2.0	12,261	0.2	25
5 and younger	2	20.0	8	0.9	23	3	30.0	11	1.6	30	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	1	20.0	12	0.8	43	4	80.0	48	0.5	135
15-20	2	28.6	24	0.9	50	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	47	24.7	320	0.5	31	12	6.3	94	0.5	30	48	25.3	444	0.7	208
45-64	27	34.2	269	0.5	29	13	16.5	120	0.6	19	27	34.2	240	0.5	139
65-74	2,480	18.9	26,293	0.5	28	3,913	29.9	42,836	0.7	34	258	2.0	2,880	0.2	32
75-84	5,549	24.9	56,401	0.7	34	6,839	30.7	74,427	0.7	35	398	1.8	4,416	0.1	9
85 and older	6,128	26.4	57,455	0.8	37	5,505	23.7	54,423	0.8	34	426	1.8	4,233	0.1	9
Male	11,258	25.6	120,884	0.6	36	8,642	19.7	93,216	0.7	35	4,494	10.2	49,386	0.5	174
Disabled	7,867	30.3	88,249	0.6	38	4,494	17.3	49,856	0.7	37	4,056	15.6	45,112	0.5	184
5 and younger	0	0.0	0	0.0	0	2	33.3	13	0.6	21	1	16.7	12	0.1	6
6-14	1	8.3	12	0.2	14	8	66.7	93	0.7	39	4	33.3	48	0.8	208
15-20	14	12.7	138	0.4	30	17	15.5	188	0.5	31	7	6.4	80	0.4	150
21-44	3,915	35.8	44,462	0.6	40	899	8.2	10,139	0.6	40	2,468	22.6	27,435	0.5	177
45-64	2,733	31.7	30,494	0.6	37	1,787	20.7	19,771	0.7	37	1,400	16.2	15,508	0.6	206
65-74	991	19.5	10,840	0.6	31	1,467	28.9	16,240	0.7	35	148	2.9	1,726	0.3	107
75-84	183	18.0	2,010	0.6	33	276	27.2	3,004	0.7	35	26	2.6	279	0.2	48
85 and older	30	17.3	293	0.5	25	38	22.0	408	0.8	39	2	1.2	24	0.1	12
Other Eligibles	3,390	18.8	32,623	0.6	33	4,148	23.0	43,360	0.7	32	438	2.4	4,274	0.3	77
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	2	0.5	67	1	50.0	2	1.0	651
15-20	3	100.0	34	2.5	90	1	33.3	3	1.0	72	0	0.0	0	0.0	0
21-44	39	26.4	364	0.6	48	7	4.7	53	0.3	15	70	47.3	555	0.5	166
45-64	36	33.0	318	0.7	55	9	8.3	91	0.7	31	61	56.0	553	0.6	214
65-74	921	14.0	9,378	0.5	30	1,536	23.3	16,577	0.7	32	130	2.0	1,339	0.3	66
75-84	1,429	19.9	13,902	0.6	32	1,832	25.5	19,343	0.7	33	108	1.5	1,172	0.1	21
85 and older	962	24.1	8,627	0.7	36	762	19.1	7,291	0.7	31	68	1.7	653	0.1	8
Unknown	3	33.3	28	0.8	35	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Dual Eligible Beneficiaries

Table 16B

Source: Data for this table are from the MAX 1999 file for New Jersey, released by CMS in 1/2004. 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, NEW JERSEY, 1999

Beneficiary Characteristics	ANTIHYPERTENSIVE					ANALGESICS - ANTI-INFLAMMATORY					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	51,105	36.4 %	555,781	0.6	\$23	54,990	39.2 %	622,664	0.3	\$18	35,162	25.0 %	386,728	0.7	\$27
Female	36,179	37.5	394,610	0.6	23	41,173	42.7	467,473	0.3	19	25,567	26.5	282,588	0.7	27
Disabled	14,606	38.9	166,552	0.6	23	20,962	55.8	242,938	0.3	19	12,976	34.5	148,449	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	3	37.5	36	0.2	9	1	12.5	12	0.1	1	0	0.0	0	0.0	0
15-20	13	16.7	145	0.4	16	15	19.2	177	0.2	1	1	1.3	12	0.7	48
21-44	1,049	13.0	11,865	0.5	19	3,079	38.1	35,416	0.3	13	912	11.3	10,384	0.6	28
45-64	4,729	39.7	53,809	0.6	23	7,115	59.7	82,227	0.3	19	4,715	39.6	53,846	0.6	31
65-74	6,362	52.1	72,957	0.6	23	8,070	66.1	93,955	0.3	20	5,696	46.6	65,420	0.7	29
75-84	2,008	47.6	22,815	0.6	23	2,201	52.2	25,622	0.3	21	1,452	34.4	16,581	0.7	25
85 and older	442	41.5	4,925	0.6	23	481	45.1	5,529	0.4	20	200	18.8	2,206	0.7	21
Other Eligibles	21,572	36.6	228,046	0.7	24	20,211	34.3	224,535	0.3	19	12,590	21.4	134,131	0.7	25
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	10.0	4	0.3	4
6-14	1	20.0	12	0.8	37	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	18	9.5	170	0.4	17	35	18.4	294	0.3	11	18	9.5	160	0.7	34
45-64	18	22.8	170	0.6	20	22	27.8	248	0.2	9	16	20.3	150	0.7	30
65-74	5,454	41.6	59,531	0.6	22	6,241	47.6	70,055	0.3	18	4,094	31.3	44,353	0.6	27
75-84	9,246	41.6	100,880	0.6	24	8,903	40.0	100,869	0.3	20	5,717	25.7	62,432	0.7	25
85 and older	6,835	29.4	67,283	0.7	25	5,010	21.6	53,069	0.4	20	2,744	11.8	27,032	0.7	21
Male	14,926	34.0	161,171	0.6	23	13,817	31.4	155,191	0.3	14	9,595	21.8	104,140	0.6	27
Disabled	7,749	29.9	86,230	0.6	23	8,691	33.5	98,956	0.3	13	5,558	21.4	61,984	0.6	28
5 and younger	0	0.0	0	0.0	0	2	33.3	24	0.5	58	0	0.0	0	0.0	0
6-14	9	75.0	108	0.6	31	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	28	25.5	288	0.5	25	5	4.5	60	0.6	19	1	0.9	12	0.1	4
21-44	1,634	15.0	18,483	0.5	20	2,930	26.8	33,436	0.2	9	971	8.9	11,104	0.7	29
45-64	3,038	35.2	33,804	0.6	23	3,149	36.5	35,866	0.3	14	2,329	27.0	26,019	0.6	29
65-74	2,528	49.9	28,041	0.6	24	2,183	43.1	24,852	0.3	16	1,956	38.6	21,652	0.7	28
75-84	443	43.6	4,842	0.6	24	380	37.4	4,238	0.3	16	273	26.9	2,921	0.7	24
85 and older	69	39.9	664	0.7	24	42	24.3	480	0.3	21	28	16.2	276	1.1	36
Other Eligibles	7,177	39.9	74,941	0.6	24	5,126	28.5	56,235	0.3	16	4,037	22.4	42,156	0.6	24
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	33.3	3	1.0	23
21-44	10	6.8	83	0.4	16	29	19.6	218	0.3	9	6	4.1	61	1.0	71
45-64	31	28.4	288	0.5	17	21	19.3	207	0.4	16	22	20.2	157	0.6	21
65-74	2,864	43.5	30,424	0.6	23	2,177	33.1	24,144	0.3	15	1,784	27.1	18,971	0.6	25
75-84	3,045	42.4	32,347	0.6	24	2,143	29.9	23,689	0.3	17	1,689	23.5	17,796	0.7	25
85 and older	1,227	30.8	11,799	0.7	25	756	19.0	7,977	0.3	17	535	13.4	5,168	0.7	18
Unknown	1	11.1	12	0.8	22	0	0.0	0	0.0	0	1	11.1	8	0.9	5

Source: Data for this table are from the MAX 1999 file for New Jersey, released by CMS in 1/2004. 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, NEW JERSEY, 1999

Beneficiary Characteristics	ANTIHYPERTENSIVE				ANTICONVULSANT				No. of Bene Mos			
	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users		Mean No. of Rx	Mean Rx \$	
All	21,014	15.0 %	236,570	0.6	\$43	22,026	15.7 %	238,400	0.9	\$41	140,403	1,431,763
Female	15,357	15.9	173,754	0.6	43	13,295	13.8	142,975	0.9	38	96,456	982,690
Disabled	7,551	20.1	87,016	0.6	44	8,507	22.6	95,495	0.9	43	37,577	413,727
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	4	38
6-14	1	12.5	12	0.5	28	0	0.0	0	0.0	0	8	81
15-20	5	6.4	60	0.6	47	21	26.9	230	0.8	70	78	869
21-44	497	6.2	5,707	0.5	36	3,146	39.0	35,685	0.9	53	8,073	88,618
45-64	2,653	22.3	30,292	0.6	44	3,105	26.1	34,955	0.9	44	11,917	130,678
65-74	3,492	28.6	40,493	0.6	44	1,627	13.3	18,145	0.8	30	12,213	135,974
75-84	811	19.2	9,441	0.6	46	531	12.6	5,660	0.8	27	4,218	46,306
85 and older	92	8.6	1,011	0.6	42	77	7.2	820	0.9	26	1,066	11,163
Other Eligibles	7,805	13.3	86,730	0.6	43	4,787	8.1	47,472	0.9	27	58,879	568,963
5 and younger	2	20.0	6	0.5	21	0	0.0	0	0.0	0	10	26
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	5	30
15-20	0	0.0	0	0.0	0	6	85.7	72	1.2	78	7	84
21-44	8	4.2	84	0.5	37	36	18.9	344	0.7	40	190	1,136
45-64	13	16.5	133	0.4	26	24	30.4	239	0.7	53	79	688
65-74	3,114	23.8	34,499	0.6	42	920	7.0	9,472	0.8	27	13,100	133,114
75-84	3,642	16.4	41,063	0.6	44	2,082	9.4	21,089	0.9	27	22,244	224,978
85 and older	1,026	4.4	10,945	0.6	42	1,719	7.4	16,256	0.9	25	23,244	208,907
Male	5,657	12.9	62,816	0.6	42	8,731	19.9	95,425	0.9	47	43,938	448,986
Disabled	3,507	13.5	39,561	0.6	42	7,034	27.1	78,881	1.0	50	25,931	279,114
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	6	50
6-14	1	8.3	12	0.1	7	1	8.3	12	0.1	1	12	134
15-20	1	0.9	12	0.2	10	25	22.7	277	0.7	38	110	1,187
21-44	817	7.5	9,464	0.6	38	3,776	34.6	42,986	0.9	54	10,923	118,682
45-64	1,426	16.5	16,141	0.6	43	2,327	27.0	25,868	1.0	49	8,622	92,723
65-74	1,116	22.0	12,328	0.6	43	740	14.6	8,010	0.9	34	5,070	54,269
75-84	133	13.1	1,467	0.6	48	148	14.6	1,552	1.0	30	1,015	10,431
85 and older	13	7.5	137	0.4	32	17	9.8	176	0.9	27	173	1,638
Other Eligibles	2,150	11.9	23,255	0.6	42	1,693	9.4	16,496	0.9	31	18,007	169,872
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	2	7
15-20	0	0.0	0	0.0	0	2	66.7	22	1.5	97	3	25
21-44	6	4.1	57	0.3	24	60	40.5	609	0.8	54	148	1,272
45-64	11	10.1	98	0.4	23	39	35.8	376	0.8	42	109	914
65-74	1,080	16.4	11,744	0.5	40	496	7.5	5,039	0.9	31	6,585	64,422
75-84	864	12.0	9,499	0.6	44	748	10.4	7,321	0.9	29	7,176	69,331
85 and older	189	4.7	1,857	0.6	38	348	8.7	3,129	0.9	27	3,984	33,901
Unknown	1	11.1	8	1.1	58	5	55.6	56	0.7	50	9	87

Table 16D

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 1999 file for New Jersey, released by CMS in 1/2004. 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, NEW JERSEY, 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	\$227	6.5	27,366	241,196
Age				
0-64	378	9.1	1,438	13,671
65-74	292	7.8	3,025	28,089
75-84	242	6.7	8,318	74,095
85 and older	188	5.8	14,580	125,298
Unknown	81	3.6	5	43
Gender				
Female	219	6.4	21,692	191,787
Male	259	6.8	5,674	49,409
Unknown	0	0.0	0	0
Race				
White	227	6.6	22,640	197,503
African American	229	6.2	2,920	27,171
Other/unknown	235	6.5	1,806	16,522
Basis of Eligibility				
Aged	213	6.2	23,076	199,937
Disabled	299	7.8	4,289	41,251
Adults	134	2.4	1	8
Children	0	0.0	0	0
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 1999 file for New Jersey, released by CMS in 1/2004. 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 9,728 beneficiaries who were in nursing facilities for part of their enrollment and their 79,864 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, NEW JERSEY, 1999

Therapeutic Category	No. of Rx per Bene Mo among Users			\$ per Bene Mo among Users			Total # of Rx			Total Rx \$			Users				
	Total	Patented	Off-Patent	Total	Patented	Off-Patent	Total	Patented	Off-Patent	Generic	Total	Patented	Off-Patent	Generic	No. of Bene Mos		
		Brand-Name	Brand-Name		Brand-Name	Brand-Name		Brand-Name	Brand-Name	Brand-Name		Brand-Name	Brand-Name	Brand-Name	As % of Dual All-Year NF Residents		
Anti-infective Agents	0.4	0.2	0.0	0.1	\$18	\$16	\$0	\$2	\$47	\$65	\$50	\$15	60,619	\$2,859,060	17,297	63.2 %	158,885
Biologics	0.1	0.1	0.0	0.1	1	0	0	1	10	7	0	14	3,575	36,274	3,333	12.2	32,618
Antineoplastic Agents	0.7	0.2	0.4	0.1	83	30	45	7	116	159	118	52	13,820	1,601,850	2,225	8.1	19,349
Endocrine/Metabolic Drugs	1.3	0.5	0.0	0.8	25	18	1	6	20	40	51	7	107,319	2,101,381	9,237	33.8	83,481
Cardiovascular Agents	2.2	0.4	0.5	1.3	55	17	17	22	25	37	33	17	367,313	9,000,338	18,285	66.8	163,317
Respiratory Agents	0.9	0.3	0.0	0.6	25	13	1	12	28	42	37	20	77,099	2,185,160	9,396	34.3	86,027
Gastrointestinal Agents	1.2	0.4	0.2	0.6	65	37	13	15	53	86	60	26	135,544	7,204,788	12,299	44.9	111,476
Genitourinary Agents	0.6	0.2	0.0	0.3	23	12	0	11	42	50	31	35	22,027	919,911	4,233	15.5	39,432
CNS Drugs	1.7	0.9	0.2	0.6	82	64	11	8	49	71	69	12	232,670	11,342,042	15,236	55.7	138,552
Stimulants/Anti-obesity/Anorexia	0.7	0.0	0.1	0.6	12	2	1	9	16	59	21	14	842	13,764	128	0.5	1,148
Miscellaneous Psychological/Neurological Agents	0.9	0.9	0.0	0.0	89	89	0	0	102	104	103	21	13,417	1,373,835	1,737	6.3	15,368
Analgesics and Anesthetics	0.9	0.3	0.1	0.5	33	23	4	5	37	77	50	10	69,112	2,571,683	8,696	31.8	78,637
Neuromuscular Agents	1.6	0.3	0.3	1.0	59	21	13	25	37	60	43	27	101,794	3,754,988	6,821	24.9	63,390
Nutritional Products	0.9	0.0	0.3	0.5	11	1	5	5	12	20	16	10	69,743	870,990	9,014	32.9	80,571
Hematological Agents	1.1	0.2	0.2	0.8	49	35	5	9	43	190	27	12	70,582	3,042,036	6,988	25.5	62,587
Topical Products	0.8	0.3	0.2	0.3	23	14	6	3	28	42	33	10	139,663	3,896,688	17,881	65.3	166,017
Miscellaneous Products	0.3	0.1	0.0	0.2	6	2	0	4	22	28	64	19	3,640	79,008	1,515	5.5	13,512
Unknown Therapeutic Category	0.7	0.0	0.0	0.0	17	0	0	0	24	0	0	0	82,500	1,993,277	12,966	47.4	119,975
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.	1,571,279	54,847,073	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 1999 file for New Jersey, released by CMS in 1/2004. 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 9,728 beneficiaries who were in nursing facilities for part of their enrollment and their 79,864 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 New Jersey, 6.4 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, NEW JERSEY, 1999

Beneficiary Characteristics	No. of Benes					No. of Bene Mos					
	All	Aged	Disabled	Adults	Children	All	Aged	Disabled	Adults	Children	Unknown
All	143,104	77,146	65,149	790	19	1,512,138	782,377	722,758	6,810	193	0
Age											
5 and younger	20	10	10	0	0	120	30	90	0	0	0
6-14	28	4	21	0	3	271	18	227	0	26	0
15-20	212	0	198	1	13	2,358	0	2,198	12	148	0
21-44	20,230	0	19,741	486	3	222,032	0	217,840	4,173	19	0
45-64	21,363	7	21,065	291	0	235,357	84	232,740	2,533	0	0
65-74	37,521	19,923	17,587	11	0	400,346	203,309	196,957	80	0	0
75-84	35,029	29,743	5,286	0	0	369,699	310,499	59,200	0	0	0
85 and older	28,692	27,451	1,240	1	0	281,857	268,351	13,494	12	0	0
Unknown	9	8	1	0	0	98	86	12	0	0	0
Gender											
Female	98,322	59,198	38,673	437	14	1,043,063	605,722	433,519	3,675	147	0
Male	44,782	17,948	26,476	353	5	469,075	176,655	289,239	3,135	46	0
Unknown	0	0	0	0	0	0	0	0	0	0	0
Race											
White	79,444	46,392	32,641	403	8	825,202	458,088	363,343	3,688	83	0
African American	27,910	10,518	17,130	254	8	303,322	110,323	190,835	2,078	86	0
Other/unknown	35,750	20,236	15,378	133	3	383,614	213,966	168,580	1,044	24	0
Use of Nursing Facilities											
All year	27,652	23,343	4,308	1	0	280,733	232,682	48,040	11	0	0
Part year	9,762	8,166	1,562	34	0	90,226	73,758	16,093	375	0	0
None	105,690	45,637	59,279	755	19	1,141,179	475,937	658,625	6,424	193	0
Maintenance Assistance Status											
Cash	72,108	30,511	41,267	329	1	797,289	333,355	461,323	2,603	8	0
Medically needy	5	2	3	0	0	35	16	19	0	0	0
Poverty related	28,459	13,694	14,706	54	5	300,831	140,364	160,096	323	48	0
Other/unknown	42,532	32,939	9,173	407	13	413,983	308,642	101,320	3,884	137	0
Dual Status^c											
Full dual, all year	142,248	76,491	64,954	784	19	1,503,516	775,795	720,780	6,748	193	0
Full dual, part year	856	655	195	6	0	8,622	6,582	1,978	62	0	0
Managed Care Status											
FFS all year	120,628	60,491	59,762	361	14	1,271,379	606,405	661,543	3,292	139	0
FFS part year, with Rx claims	18,982	15,294	3,579	107	2	207,400	165,369	40,996	1,013	22	0
FFS part year, no Rx claims	793	575	168	50	0	6,580	4,486	1,695	399	0	0
MC all year, with Rx claims	282	242	40	0	0	1,027	711	316	0	0	0
MC all year, no Rx claims	2,419	544	1,600	272	3	25,752	5,406	18,208	2,106	32	0

Source: Data for this table are from the MAX 1999 file for New Jersey, released by CMS in 1/2004. 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, NEW JERSEY, 1999

Beneficiary Characteristics	Benees and				Included in Cell G of Table 1		Excluded from Cell G of Table 1	
	Bene Mos in Cell F of Table 1	No. of Bene Mos	No. of Bene Mos	No. of Bene Mos	No. of Bene Mos	No. of Bene Mos	No. of Bene Mos	No. of Bene Mos
All	143,104	1,512,138	140,403	1,431,763	2,701	80,375		
FFS all year	120,628	1,271,379	120,628	1,271,379	0	0		
FFS part year, with Rx claims	18,982	207,400	18,982	156,433	0	50,967		
FFS part year, with no Rx claims	793	6,580	793	3,951	0	2,629		
MC all year, with Rx claims	282	1,027	0	0	282	1,027		
MC all year, with no Rx claims	2,419	25,752	0	0	2,419	25,752		

Source: Data for this table are from the MAX 1999 file for New Jersey, released by CMS in 1/2004. 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.

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

Total Number of Dual Eligible Beneficiaries, Age 85+ 28,467
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 85+ \$42,334,995
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 85+ \$1,487

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 85+ 8.3 %	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	2,365		0	0.0 %
1-500	6,670	23.4	1,548,331	3.7
501-1,000	4,853	17.0	3,588,043	8.5
1,001-1,500	3,862	13.6	4,808,526	11.4
1,501-2,000	2,943	10.3	5,125,007	12.1
2,001-2,500	2,258	7.9	5,041,085	11.9
2,501-3,000	1,611	5.7	4,415,134	10.4
3,001-3,500	1,115	3.9	3,608,593	8.5
3,501-4,000	811	2.8	3,030,952	7.2
4,001-4,500	600	2.1	2,546,572	6.0
4,501-5,000	388	1.4	1,837,869	4.3
5,001-5,500	294	1.0	1,537,246	3.6
5,501-6,000	177	0.6	1,018,364	2.4
6,001-6,500	127	0.4	792,376	1.9
6,501-7,000	111	0.4	748,895	1.8
7,001-7,500	75	0.3	542,359	1.3
7,501-8,000	45	0.2	347,601	0.8
8,001-8,500	24	0.1	196,851	0.5
8,501-9,000	34	0.1	297,809	0.7
9,001-9,500	16	0.1	147,927	0.3
9,501-10,000	11	0.0	107,290	0.3
10,001+	77	0.3	1,048,165	2.5

Source: Data for this table are from the MAX 1999 file for New Jersey, released by CMS in 1/2004. 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.