

STATISTICAL COMPENDIUM: MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 1999 RHODE ISLAND

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, RHODE ISLAND, 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	23,280	11,133	11,667	467	13	0	251,207	117,766	132,348	1,028	65	0
Age												
5 and younger	0	0	0	0	0	0		0	0	0	0	0
6-14	5	0	5	0	0	0	60	0	60	0	0	0
15-20	44	0	41	0	3	0	476	0	440	0	36	0
21-44	4,423	0	4,148	274	1	0	47,464	0	46,853	610	1	0
45-64	4,421	3	4,264	152	2	0	48,519	33	48,158	311	17	0
65-74	5,388	3,043	2,305	37	3	0	59,370	32,814	26,470	80	6	0
75-84	4,952	4,209	738	2	3	0	53,639	45,111	8,504	21	3	0
85 and older	4,047	3,878	166	2	1	0	41,679	39,808	1,863	6	2	0
Unknown	0	0	0	0	0	0		0	0	0	0	0
Gender												
Female	15,532	8,555	6,753	219	5	0	168,925	91,470	76,916	531	8	0
Male	7,748	2,578	4,914	248	8	0	82,282	26,296	55,432	497	57	0
Unknown	0	0	0	0	0	0		0	0	0	0	0
Race												
White	17,214	8,143	8,743	320	8	0	187,111	86,306	100,043	706	56	0
African American	1,273	342	894	37	0	0	13,803	3,781	9,939	83	0	0
Other/unknown	4,793	2,648	2,030	110	5	0	50,293	27,679	22,366	239	9	0
Use of Nursing Facilities												
All year	4,519	3,297	1,222	0	0	0	51,431	36,966	14,465	0	0	0
Part year	2,246	1,830	415	1	0	0	20,580	16,220	4,354	6	0	0
None	16,515	6,006	10,030	466	13	0	179,196	64,580	113,529	1,022	65	0
Maintenance Assistance Status												
Cash	14,325	4,994	9,313	12	6	0	162,315	55,770	106,510	21	14	0
Medically needy	307	172	135	0	0	0	3,209	1,783	1,426	0	0	0
Poverty-related	71	33	29	7	2	0	658	340	292	24	2	0
Other/unknown	8,577	5,934	2,190	448	5	0	85,025	59,873	24,120	983	49	0
Dual Medicare Status^c												
Full dual, all year	22,991	10,945	11,581	455	10	0	248,182	115,747	131,432	959	44	0
Full dual, part year	289	188	86	12	3	0	3,025	2,019	916	69	21	0
Managed Care Status												
FFS all year	22,773	11,128	11,578	54	13	0	249,766	117,737	131,768	196	65	0
FFS part year, with Rx claims	294	3	67	224	0	0	1,020	20	472	528	0	0
FFS part year, no Rx claims	213	2	22	189	0	0	421	9	108	304	0	0

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

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

Table 11

Dual Eligible Beneficiaries

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

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

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

TABLE 12
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BENEFICIARY CHARACTERISTIC^{a,b}
 DUAL ELIGIBLE BENEFICIARIES, RHODE ISLAND, 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	87.5 %	36.6	\$1,728	\$47	\$54,864	3.1 %	\$34	23,280
Age								
5 and younger	0.0	0.0	0	0	0	0.0	0	0
6-14	80.0	22.2	3,902	176	69,091	5.6	9	5
15-20	65.9	11.5	1,029	90	18,370	5.6	6	44
21-44	82.2	29.9	2,039	68	50,047	4.1	21	4,423
45-64	88.1	41.9	2,263	54	71,544	3.2	43	4,421
65-74	85.9	34.5	1,538	45	50,439	3.1	43	5,388
75-84	89.0	38.1	1,498	39	55,830	2.7	36	4,952
85 and older	93.4	39.4	1,344	34	46,992	2.9	23	4,047
Unknown	0.0	0.0	0	0	0	0.0	0	0
Basis of Eligibility								
Aged	88.6	36.0	1,376	38	48,322	2.8	31	11,133
Disabled	88.0	38.5	2,125	55	62,671	3.4	38	11,667
Adults	52.2	4.2	238	56	17,251	1.4	4	467
Children	23.1	4.2	470	113	1,409	33.3	0	13
Unknown	0.0	0.0	0	0	0	0.0	0	0
Gender								
Female	90.6	39.8	1,745	44	56,187	3.1	39	15,532
Male	81.3	30.1	1,696	56	52,211	3.2	23	7,748
Unknown	0.0	0.0	0	0	0	0.0	0	0
Race								
White	89.2	40.3	1,879	47	60,390	3.1	33	17,214
African American	85.5	32.2	1,738	54	48,911	3.6	47	1,273
Other/unknown	82.0	24.6	1,186	48	36,595	3.2	31	4,793
Use of Nursing Facilities								
Entire year	93.1	51.0	2,003	39	84,030	2.4	36	4,519
Part year	94.3	41.1	1,602	39	62,321	2.6	32	2,246
None	85.1	32.0	1,670	52	45,868	3.6	33	16,515
Maintenance Assistance Status								
Cash	87.5	34.2	1,733	51	55,336	3.1	34	14,325
Medically needy	89.9	38.9	1,957	50	50,710	3.9	29	307
Poverty related	66.2	13.6	618	45	10,843	5.7	21	71
Other/unknown	87.6	40.7	1,721	42	54,588	3.2	33	8,577

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

Table 12

Dual Eligible Beneficiaries

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

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

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

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

TABLE 13
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a,b}
 DUAL ELIGIBLE BENEFICIARIES, RHODE ISLAND, 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	3.4	\$160	3.1 %	12.5 %	21.7 %	13.8 %	31.4 %	17.7 %	2.9 %	\$5,084	23,280	251,207
Age												
5 and younger	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
6-14	1.9	325	5.6	20.0	20.0	20.0	40.0	0.0	0.0	5,758	5	60
15-20	1.1	95	5.6	34.1	36.4	15.9	11.4	2.3	0.0	1,698	44	476
21-44	2.8	190	4.1	17.8	28.1	12.9	25.8	13.1	2.3	4,664	4,423	47,464
45-64	3.8	206	3.2	11.9	19.3	12.9	31.1	20.3	4.5	6,519	4,421	48,519
65-74	3.1	140	3.1	14.1	24.9	14.6	27.9	15.5	2.9	4,578	5,388	59,370
75-84	3.5	138	2.7	11.0	19.2	14.3	33.8	18.7	2.9	5,154	4,952	53,639
85 and older	3.8	131	2.9	6.6	15.7	14.3	39.8	21.7	1.8	4,563	4,047	41,679
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Basis of Eligibility												
Aged	3.4	130	2.8	11.4	20.5	14.2	33.3	18.3	2.4	4,568	11,133	117,766
Disabled	3.4	187	3.4	12.0	23.0	13.6	30.4	17.5	3.5	5,525	11,667	132,348
Adults	1.9	108	1.4	47.8	16.3	10.5	12.8	10.7	1.9	7,837	467	1,028
Children	0.8	94	33.3	76.9	7.7	7.7	7.7	0.0	0.0	282	13	65
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Gender												
Female	3.7	160	3.1	9.4	19.8	14.2	33.9	19.6	3.2	5,166	15,532	168,925
Male	2.8	160	3.2	18.7	25.4	13.2	26.6	13.9	2.3	4,916	7,748	82,282
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	3.7	173	3.1	10.8	18.9	13.2	33.5	20.1	3.5	5,556	17,214	187,111
African American	3.0	160	3.6	14.5	24.7	15.6	28.4	14.5	2.4	4,511	1,273	13,803
Other/unknown	2.3	113	3.2	18.0	30.6	15.8	24.7	9.9	1.0	3,488	4,793	50,293
Use of Nursing Facilities												
Entire year	4.5	176	2.4	6.9	9.1	11.0	39.9	29.1	4.0	7,383	4,519	51,431
Part year	4.5	175	2.6	5.7	13.6	13.3	37.8	25.7	3.9	6,801	2,246	20,580
None	3.0	154	3.6	14.9	26.2	14.7	28.2	13.5	2.5	4,227	16,515	179,196
Maintenance Assistance Status												
Cash	3.0	153	3.1	12.5	25.8	15.0	30.0	14.4	2.4	4,884	14,325	162,315
Medically needy	3.7	187	3.9	10.1	17.9	16.3	30.9	21.2	3.6	4,851	307	3,209
Poverty related	1.5	67	5.7	33.8	39.4	5.6	16.9	4.2	0.0	1,170	71	658
Other/unknown	4.1	174	3.2	12.4	14.7	11.9	34.0	23.2	3.8	5,507	8,577	85,025

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

Table 13

Dual Eligible Beneficiaries

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

TABLE 14
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, RHODE ISLAND, 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	3.4	\$160	\$47	1.2	\$104	\$84	0.5	\$29	\$60	1.5	\$21	\$14
Age												
5 and younger	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
6-14	1.9	325	176	1.1	288	254	0.3	35	130	0.5	2	5
15-20	1.1	95	90	0.5	72	142	0.1	8	51	0.3	9	27
21-44	2.8	190	68	1.1	133	117	0.4	32	89	1.2	19	16
45-64	3.8	206	54	1.5	138	91	0.5	35	74	1.7	26	15
65-74	3.1	140	45	1.2	90	74	0.4	24	58	1.4	19	14
75-84	3.5	138	39	1.2	85	70	0.5	27	50	1.6	21	13
85 and older	3.8	131	34	1.2	78	67	0.6	26	43	1.9	22	12
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility												
Aged	3.4	130	38	1.2	81	70	0.5	25	47	1.6	20	13
Disabled	3.4	187	55	1.3	125	94	0.4	32	74	1.5	23	15
Adults	1.9	108	56	0.8	72	96	0.2	20	89	0.9	12	14
Children	0.8	94	113	0.7	89	126	0.0	4	75	0.1	1	17
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Gender												
Female	3.7	160	44	1.3	103	77	0.5	29	57	1.7	22	13
Male	2.8	160	56	1.1	107	101	0.4	28	70	1.3	19	15
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Race												
White	3.7	173	47	1.3	111	83	0.5	31	60	1.7	24	14
African American	3.0	160	54	1.1	109	96	0.4	27	65	1.3	18	14
Other/unknown	2.3	113	48	0.9	76	82	0.3	19	59	1.0	14	14
Use of Nursing Facilities												
Entire year	4.5	176	39	1.5	111	76	0.7	34	47	2.1	26	12
Part year	4.5	175	39	1.5	111	74	0.7	31	45	2.1	27	13
None	3.0	154	52	1.2	101	88	0.4	27	71	1.3	19	15
Maintenance Assistance Status												
Cash	3.0	153	51	1.2	100	86	0.4	27	68	1.3	20	15
Medically needy	3.7	187	50	1.4	126	91	0.5	32	61	1.7	26	15
Poverty related	1.5	67	45	0.6	46	81	0.2	10	62	0.7	8	11
Other/unknown	4.1	174	42	1.4	111	80	0.6	32	51	1.9	25	13

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

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

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

Table 14

Dual Eligible Beneficiaries

c. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In Rhode Island, 4.1 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, RHODE ISLAND, 1999

Therapeutic Category	No. of Rx per Bene Mo among Users			\$ per Bene Mo among Users			Total No. of Rx			Total Rx \$	No. Dual Benes	As % of Dual Benes	No. of Bene Mos			
	Patented			Off-Patent			Patented							Off-Patent		
	Total	Brand-Name	Generic	Total	Brand-Name	Generic	Total	Brand-Name	Generic					Total	Brand-Name	Generic
Anti-infective Agents	0.3	0.2	0.0	\$20	\$19	\$0	\$1	\$68	\$112	\$52	\$11	40,007	\$2,725,083	11,866	51.0 %	134,210
Biologics	0.1	0.1	0.0	8	8	0	0	60	60	0	0	34	2,032	22	0.1	256
Antineoplastic Agents	0.5	0.3	0.1	78	54	19	4	169	201	178	54	2,628	445,129	529	2.3	5,726
Endocrine/Metabolic Drugs	0.7	0.3	0.1	23	19	1	3	33	58	24	10	63,782	2,115,119	8,057	34.6	90,906
Cardiovascular Agents	1.3	0.4	0.3	46	25	14	7	36	61	52	12	182,372	6,550,295	12,870	55.3	143,155
Respiratory Agents	0.7	0.4	0.0	26	21	1	4	36	51	25	16	66,689	2,401,436	7,991	34.3	90,838
Gastrointestinal Agents	0.6	0.3	0.1	43	30	6	7	66	111	77	22	58,758	3,903,552	8,167	35.1	91,798
Genitourinary Agents	0.4	0.2	0.0	13	11	0	2	35	49	37	15	11,073	382,930	2,535	10.9	28,824
CNS Drugs	1.2	0.5	0.2	81	54	19	8	66	110	111	14	167,843	11,067,520	12,215	52.5	136,463
Stimulants/Anti-obesity/Anorexia	0.4	0.1	0.1	24	7	8	8	59	94	71	40	414	24,581	90	0.4	1,043
Miscellaneous Psychological/Neurological Agents	0.6	0.5	0.0	64	62	0	1	105	125	0	14	3,034	319,684	453	1.9	5,013
Analgesics and Anesthetics	0.6	0.1	0.1	23	14	4	4	38	100	74	10	67,183	2,540,420	9,929	42.7	111,784
Neuromuscular Agents	1.0	0.3	0.1	46	32	6	8	48	98	43	16	61,313	2,942,625	5,665	24.3	64,053
Nutritional Products	0.6	0.0	0.2	11	1	6	5	20	29	26	15	18,220	363,603	2,947	12.7	32,368
Hematological Agents	0.6	0.1	0.2	27	15	6	6	45	187	29	18	21,497	960,362	3,269	14.0	36,063
Topical Products	0.5	0.2	0.1	14	9	3	2	31	45	36	13	51,070	1,571,488	9,542	41.0	108,878
Miscellaneous Products	0.3	0.2	0.0	40	28	9	3	145	183	199	37	2,419	350,405	795	3.4	8,830
Unknown Therapeutic Category	0.4	0.0	0.0	19	0	0	0	46	0	0	0	33,665	1,565,305	7,391	31.7	83,787
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.	852,001	40,231,569	n.a.	n.a.	n.a.

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

- a. Table 15 includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 1999. A beneficiary who used drugs from two or more categories was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
- c. For information about these therapeutic categories, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).
- d. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In Rhode Island, 4.1 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, RHODE ISLAND, 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	\$5,564,240	6,054	26.0 %	68,392	0.7	\$117
ANTIDEPRESSANTS	4,077,218	10,693	45.9	120,088	0.6	55
ULCER DRUGS	3,277,834	7,836	33.7	88,659	0.5	76
ANTICONVULSANT	2,504,400	4,897	21.0	55,673	0.8	57
ANTIHYPERTENSIVE	1,948,701	7,265	31.2	81,508	0.5	46
CALCIUM BLOCKERS	1,672,566	4,512	19.4	50,741	0.5	61
ANTHYPERLIPIDEMIC	1,635,605	3,253	14.0	37,379	0.6	70
ANTIDIABETIC	1,526,062	5,340	22.9	60,137	0.6	42
ANTIASTHMATIC	1,463,004	7,801	33.5	87,743	0.5	35
ANALGESICS - ANTI-INFLAMMATORY	1,226,606	7,017	30.1	81,573	0.3	48

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

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

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

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

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

TABLE 16A
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR TOP 10 DRUG GROUPS COMBINED
 AND FIRST AND SECOND GROUPS SEPARATELY, BY SEX, BOE, AND AGE^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, RHODE ISLAND, 1999

Beneficiary Characteristics	All Top 10 Drug Groups					ANTIPSYCHOTICS					ANTIDEPRESSANTS						
	No. of Rx	Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
All	406,376	\$24,896,236	6,054	26.0 %	68,392	0.7	\$81	10,693	45.9 %	120,088	0.6	\$34					
Female																	
Disabled																	
5 and younger	288,050	16,795,763	3,910	25.2	44,157	0.6	67	7,793	50.2	87,816	0.6	33					
6-14	148,361	9,490,480	1,988	29.4	23,188	0.7	86	4,103	60.8	47,789	0.6	38					
15-20	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
21-44	12	936	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
45-64	92	11,211	4	22.2	42	0.4	84	7	38.9	81	0.4	46					
65-74	35,527	2,580,098	766	42.1	8,984	0.8	99	1,310	72.0	15,241	0.6	41					
75-84	60,165	3,878,289	722	29.4	8,447	0.8	89	1,770	72.0	20,606	0.6	39					
85 and older	38,245	2,213,826	321	18.9	3,701	0.7	63	745	43.8	8,688	0.6	30					
Other Eligibles																	
5 and younger	12,065	686,739	141	23.4	1,640	0.6	56	222	36.9	2,607	0.6	28					
6-14	2,255	119,381	34	22.5	374	0.5	56	49	32.5	566	0.6	31					
15-20	139,689	7,305,283	1,922	21.9	20,969	0.5	45	3,690	42.0	40,027	0.6	28					
21-44	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
45-64	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
65-74	336	17,659	19	11.9	70	0.5	47	41	25.8	132	0.8	51					
75-84	65	4,269	1	2.3	12	0.2	8	8	18.2	47	0.4	33					
85 and older	33,476	1,932,766	301	14.5	3,320	0.6	61	699	33.6	7,925	0.6	29					
Male																	
Disabled																	
5 and younger	55,210	2,941,004	721	22.7	8,067	0.5	48	1,380	43.4	15,162	0.6	29					
6-14	50,602	2,409,585	880	26.6	9,500	0.5	37	1,562	47.2	16,761	0.6	26					
15-20	118,326	8,100,473	2,144	27.7	24,235	0.8	108	2,900	37.4	32,272	0.6	36					
21-44	82,952	6,294,956	1,669	34.0	19,487	0.9	123	2,016	41.0	23,316	0.6	40					
45-64	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
65-74	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
75-84	143	13,998	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
85 and older	35,349	3,060,285	963	41.4	11,253	0.9	131	1,043	44.8	12,089	0.6	40					
Other Eligibles																	
5 and younger	34,484	2,487,715	576	31.9	6,771	0.9	121	789	43.7	9,146	0.6	41					
6-14	10,439	604,007	96	15.9	1,079	0.8	87	154	25.5	1,752	0.6	29					
15-20	2,377	121,859	31	22.8	351	0.7	45	26	19.1	289	0.7	36					
21-44	160	7,092	3	20.0	33	0.2	3	1	6.7	12	0.8	4					
45-64	35,374	1,805,517	475	16.8	4,748	0.5	47	884	31.2	8,956	0.6	27					
65-74	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
85 and older	12	2,446	1	33.3	12	0.9	199	1	33.3	12	0.1	5					
Unknown																	
5 and younger	140	9,317	8	6.9	24	0.6	104	17	14.7	66	0.6	30					
6-14	275	17,355	4	3.5	26	0.7	102	18	15.9	90	0.7	46					
15-20	11,904	659,986	130	13.0	1,383	0.6	62	229	22.9	2,475	0.6	26					
21-44	15,195	757,288	199	19.3	2,020	0.5	44	355	34.4	3,747	0.6	27					
45-64	7,848	359,125	133	23.4	1,283	0.4	31	264	46.4	2,566	0.6	29					
65-74	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					

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

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

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

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

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

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

Beneficiary Characteristics	ULCER DRUGS					ANTICONVULSANT					ANTIHYPERTENSIVE				
	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
All	7,836	33.7 %	88,659	0.5	\$37	4,897	21.0 %	55,673	0.8	\$45	7,265	31.2 %	81,508	0.5	\$24
Female	5,732	36.9	65,232	0.5	37	3,028	19.5	34,451	0.8	40	5,227	33.7	58,954	0.5	24
Disabled	2,667	39.5	31,165	0.4	35	2,022	29.9	23,566	0.8	46	1,985	29.4	23,062	0.5	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	1	50.0	12	0.3	26
15-20	0	0.0	0	0.0	0	3	16.7	36	1.0	106	1	5.6	12	0.1	2
21-44	545	29.9	6,368	0.4	32	844	46.4	9,909	0.8	53	147	8.1	1,723	0.5	20
45-64	1,059	43.1	12,343	0.4	35	834	33.9	9,669	0.8	46	721	29.3	8,317	0.5	24
65-74	755	44.4	8,865	0.4	36	251	14.8	2,890	0.8	31	765	45.0	8,920	0.5	25
75-84	244	40.5	2,873	0.5	38	77	12.8	906	0.7	26	290	48.2	3,394	0.5	26
85 and older	64	42.4	716	0.5	35	13	8.6	156	0.5	14	60	39.7	684	0.5	22
Other Eligibles	3,065	34.9	34,067	0.5	38	1,006	11.5	10,885	0.7	28	3,242	36.9	35,892	0.6	24
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	12	7.5	57	0.4	20	18	11.3	46	1.0	28	2	1.3	11	1.6	126
45-64	2	4.5	10	0.6	39	2	4.5	13	0.7	20	1	2.3	5	0.6	65
65-74	644	30.9	7,376	0.5	35	218	10.5	2,467	0.7	30	856	41.1	9,708	0.5	23
75-84	1,154	36.3	13,043	0.5	38	426	13.4	4,747	0.7	28	1,257	39.5	14,046	0.6	24
85 and older	1,253	37.8	13,581	0.6	39	342	10.3	3,612	0.7	27	1,126	34.0	12,122	0.6	23
Male	2,104	27.2	23,427	0.5	38	1,869	24.1	21,222	0.8	53	2,038	26.3	22,554	0.5	24
Disabled	1,250	25.4	14,509	0.5	38	1,541	31.4	17,984	0.9	57	1,038	21.1	11,932	0.5	26
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	2	8.7	24	0.5	60	8	34.8	96	0.9	115	0	0.0	0	0.0	0
21-44	449	19.3	5,259	0.4	35	814	35.0	9,471	0.8	59	253	10.9	2,936	0.5	23
45-64	525	29.1	6,052	0.5	41	592	32.8	6,972	0.9	56	482	26.7	5,493	0.5	26
65-74	215	35.6	2,496	0.5	37	100	16.6	1,140	0.8	39	239	39.6	2,794	0.5	27
75-84	52	38.2	603	0.6	38	24	17.6	278	0.7	34	60	44.1	670	0.6	28
85 and older	7	46.7	75	0.5	40	3	20.0	27	0.6	10	4	26.7	39	0.4	22
Other Eligibles	854	30.1	8,918	0.5	38	328	11.6	3,238	0.7	32	1,000	35.3	10,622	0.5	23
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	6	5.2	10	0.6	32	16	13.8	45	1.0	78	5	4.3	5	2.0	79
45-64	14	12.4	61	0.5	44	3	2.7	22	0.3	21	14	12.4	46	0.6	31
65-74	264	26.4	2,920	0.4	35	114	11.4	1,257	0.7	37	365	36.5	4,148	0.4	23
75-84	362	35.1	3,849	0.5	40	129	12.5	1,295	0.7	29	428	41.5	4,505	0.6	23
85 and older	208	36.6	2,078	0.6	40	66	11.6	619	0.6	25	188	33.0	1,918	0.6	21
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Table 16B

Dual Eligible Beneficiaries

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

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

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

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

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

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

Beneficiary Characteristics	CALCIUM BLOCKERS					ANTIHYPERLIPIDEMIC					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	4,512	19.4 %	50,741	0.5	\$33	3,253	14.0 %	37,379	0.6	\$44	5,340	22.9 %	60,137	0.6	\$25
Female	3,506	22.6	39,586	0.5	33	2,398	15.4	27,692	0.6	45	3,975	25.6	44,999	0.6	26
Disabled	1,269	18.8	14,778	0.5	34	1,319	19.5	15,400	0.6	46	1,779	26.3	20,679	0.6	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	2	100.0	24	0.2	25	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	82	4.5	946	0.4	24	103	5.7	1,195	0.6	39	186	10.2	2,200	0.6	28
45-64	428	17.4	4,972	0.4	33	564	22.9	6,566	0.6	45	695	28.3	8,019	0.6	32
65-74	532	31.3	6,210	0.5	36	521	30.6	6,090	0.7	48	695	40.9	8,147	0.6	32
75-84	192	31.9	2,251	0.6	37	122	20.3	1,455	0.7	47	185	30.7	2,129	0.6	23
85 and older	33	21.9	375	0.5	29	9	6.0	94	0.6	37	18	11.9	184	0.5	14
Other Eligibles	2,237	25.5	24,808	0.6	32	1,079	12.3	12,292	0.6	44	2,196	25.0	24,320	0.6	22
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	3	1.9	13	0.8	39	1	0.6	1	1.0	52	4	2.5	4	1.3	69
45-64	2	4.5	9	0.2	7	2	4.5	7	0.7	60	3	6.8	5	1.2	76
65-74	546	26.2	6,200	0.5	32	494	23.7	5,681	0.6	44	708	34.0	8,043	0.6	26
75-84	866	27.2	9,672	0.6	33	456	14.3	5,178	0.6	45	905	28.4	10,107	0.6	23
85 and older	820	24.8	8,914	0.7	31	126	3.8	1,425	0.6	40	576	17.4	6,161	0.6	15
Male	1,006	13.0	11,155	0.5	34	855	11.0	9,687	0.6	40	1,365	17.6	15,138	0.6	24
Disabled	493	10.0	5,722	0.5	37	570	11.6	6,624	0.6	41	724	14.7	8,304	0.6	28
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	97	4.2	1,132	0.5	38	156	6.7	1,813	0.6	37	181	7.8	2,075	0.7	32
45-64	216	12.0	2,484	0.5	37	290	16.1	3,364	0.6	41	342	18.9	3,917	0.6	29
65-74	147	24.3	1,740	0.5	38	112	18.5	1,312	0.6	45	167	27.6	1,911	0.5	22
75-84	31	22.8	351	0.5	33	12	8.8	135	0.5	27	32	23.5	377	0.6	21
85 and older	2	13.3	15	0.3	41	0	0.0	0	0.0	0	2	13.3	24	0.1	3
Other Eligibles	513	18.1	5,433	0.6	31	285	10.1	3,063	0.6	38	641	22.6	6,834	0.6	19
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	0	0.0	0	0.0	0	2	1.7	3	0.7	44	2	1.7	2	2.5	116
45-64	11	9.7	30	0.7	47	12	10.6	24	0.8	47	15	13.3	53	0.7	29
65-74	163	16.3	1,789	0.5	33	142	14.2	1,608	0.6	37	243	24.3	2,726	0.5	23
75-84	222	21.5	2,405	0.6	32	108	10.5	1,194	0.7	42	252	24.4	2,717	0.6	19
85 and older	117	20.6	1,209	0.7	26	21	3.7	234	0.5	30	129	22.7	1,336	0.5	14
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Table 16C

Dual Eligible Beneficiaries

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

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

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

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

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

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

Beneficiary Characteristics	ANTI-ASTHMATIC				ANALGESICS - ANTI-INFLAMMATORY							
	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	
All	7,801	33.5 %	87,743	0.5	\$17	7,017	30.1 %	81,573	0.3	\$15	23,280	251,207
Female	5,608	36.1	63,577	0.5	16	5,235	33.7	60,997	0.3	17	15,532	168,925
Disabled	3,028	44.8	35,212	0.5	16	3,003	44.5	35,367	0.3	15	6,753	76,916
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	3	0	0.0	0	0.0	0	2	24
15-20	0	0.0	0	0.0	0	4	22.2	48	0.1	2	18	197
21-44	613	33.7	7,163	0.4	12	738	40.5	8,660	0.3	9	1,820	20,576
45-64	1,221	49.7	14,184	0.5	18	1,211	49.2	14,238	0.3	18	2,459	27,873
65-74	870	51.1	10,102	0.5	18	783	46.0	9,243	0.3	15	1,701	19,559
75-84	257	42.7	3,020	0.4	13	229	38.0	2,737	0.4	22	602	6,972
85 and older	66	43.7	731	0.5	20	38	25.2	441	0.3	17	151	1,715
Other Eligibles	2,580	29.4	28,365	0.5	16	2,232	25.4	25,630	0.3	19	8,779	92,009
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
21-44	13	8.2	79	0.8	29	15	9.4	75	0.4	9	159	401
45-64	2	4.5	11	0.2	6	7	15.9	29	0.3	25	44	96
65-74	678	32.6	7,583	0.5	18	683	32.8	7,929	0.3	19	2,082	22,633
75-84	954	30.0	10,550	0.5	17	904	28.4	10,461	0.3	18	3,182	34,480
85 and older	933	28.2	10,142	0.4	14	623	18.8	7,136	0.4	20	3,312	34,399
Male	2,193	28.3	24,166	0.5	18	1,782	23.0	20,576	0.3	10	7,748	82,282
Disabled	1,242	25.3	14,342	0.5	18	1,279	26.0	15,003	0.3	9	4,914	55,432
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	3	36
15-20	3	13.0	36	0.6	19	2	8.7	20	0.5	4	23	243
21-44	415	17.8	4,848	0.5	16	567	24.4	6,648	0.2	6	2,328	26,277
45-64	498	27.6	5,761	0.5	18	484	26.8	5,666	0.3	11	1,805	20,285
65-74	247	40.9	2,845	0.6	20	199	32.9	2,352	0.3	10	604	6,911
75-84	69	50.7	750	0.6	23	25	18.4	293	0.4	15	136	1,532
85 and older	10	66.7	102	0.6	17	2	13.3	24	0.3	20	15	148
Other Eligibles	951	33.6	9,824	0.5	18	503	17.7	5,573	0.3	12	2,834	26,850
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	36
21-44	5	4.3	21	0.5	11	7	6.0	14	0.6	5	116	210
45-64	21	18.6	104	0.3	11	12	10.6	38	0.5	20	113	265
65-74	328	32.8	3,567	0.5	19	214	21.4	2,483	0.3	10	1,001	10,267
75-84	385	37.3	3,980	0.5	18	194	18.8	2,229	0.3	11	1,032	10,655
85 and older	212	37.3	2,152	0.5	16	76	13.4	809	0.4	18	569	5,417
Unknown	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 Rhode Island, released by CMS in 12/2003. This table was produced on 06/25/2004.

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

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

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

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

TABLE 17
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BENEFICIARY CHARACTERISTIC^{a, b}
 DUAL ELIGIBLE BENEFICIARIES, RHODE ISLAND, 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	\$176	4.5	4,519	51,431
Age				
0-64	190	3.7	937	11,128
65-74	227	5.2	515	5,920
75-84	190	5.0	1,232	13,885
85 and older	144	4.4	1,835	20,498
Unknown	0	0.0	0	0
Gender				
Female	174	4.7	3,238	36,944
Male	180	4.0	1,281	14,487
Unknown	0	0.0	0	0
Race				
White	177	4.5	4,014	46,031
African American	183	4.6	74	838
Other/unknown	162	4.2	431	4,562
Basis of Eligibility				
Aged	168	4.7	3,297	36,966
Disabled	197	4.0	1,222	14,465
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 Rhode Island, released by CMS in 12/2003. This table was produced on 06/25/2004.

a. Table 17 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their 1999 Medicaid enrollment. A total of 2,246 beneficiaries who were in nursing facilities for part of their enrollment and their 20,580 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, RHODE ISLAND, 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	As % of Dual All-Year NF Residents		
		Brand-Name	Brand-Name		Brand-Name	Brand-Name		Brand-Name	Brand-Name	Brand-Name		Brand-Name	Brand-Name	Brand-Name				
Anti-infective Agents	0.3	0.1	0.0	0.1	\$12	\$11	\$0	\$1	\$42	\$72	\$39	\$9	\$9	9,392	2,810	\$397,468	62.2 %	32,430
Biologics	0.1	0.1	0.0	0.0	4	4	0	0	53	53	0	0	5	5	263	0.1	60	
Antineoplastic Agents	0.4	0.2	0.1	0.1	68	39	27	3	176	200	203	50	460	460	81,141	2.3	1,188	
Endocrine/Metabolic Drugs	0.9	0.3	0.0	0.6	19	14	1	4	20	44	20	7	16,809	1,551	332,651	34.3	17,727	
Cardiovascular Agents	1.8	0.4	0.4	1.0	39	16	14	9	22	43	33	9	54,175	2,712	1,184,261	60.0	30,693	
Respiratory Agents	0.8	0.4	0.1	0.3	29	21	1	6	38	51	21	23	10,921	1,259	418,580	27.9	14,445	
Gastrointestinal Agents	0.9	0.3	0.1	0.4	51	35	6	10	59	104	68	22	17,913	1,827	1,053,445	40.4	20,840	
Genitourinary Agents	0.5	0.2	0.0	0.3	16	12	0	4	32	51	43	14	3,753	655	119,605	14.5	7,508	
CNS Drugs	1.3	0.6	0.2	0.6	81	57	18	6	61	100	103	10	45,812	2,999	2,796,300	66.4	34,436	
Stimulants/Anti-obesity/Anorexia	0.4	0.0	0.1	0.2	8	0	6	3	23	0	41	12	34	8	790	0.2	96	
Miscellaneous Psychological/Neurological Agents	0.7	0.7	0.0	0.0	76	76	0	0	108	114	0	11	1,243	157	134,387	3.5	1,769	
Analgesics and Anesthetics	0.6	0.2	0.1	0.4	23	16	3	3	38	89	57	9	9,948	1,457	378,195	32.2	16,549	
Neuromuscular Agents	1.2	0.4	0.2	0.5	63	43	10	10	53	101	44	19	18,001	1,328	958,040	29.4	15,309	
Nutritional Products	0.7	0.0	0.2	0.4	11	0	5	5	17	11	25	13	6,947	919	115,347	20.3	10,496	
Hematological Agents	0.8	0.1	0.3	0.4	24	11	7	5	30	143	25	12	8,530	955	257,909	21.1	10,942	
Topical Products	0.6	0.2	0.1	0.2	17	10	5	3	29	43	36	11	17,798	2,671	519,891	59.1	31,013	
Miscellaneous Products	0.1	0.1	0.0	0.1	7	6	0	1	53	84	0	16	335	207	17,691	4.6	2,378	
Unknown Therapeutic Category	0.4	0.0	0.0	0.0	15	0	0	0	34	0	0	0	8,346	1,646	286,124	36.4	19,030	
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.	230,422	n.a.	9,052,088	n.a.	n.a.	n.a.

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

a. Table 18 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 1999. A total of 2,246 beneficiaries who were in nursing facilities for part of their enrollment and their 20,580 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 Rhode Island, 4.1 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.

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, RHODE ISLAND, 1999

Beneficiary Characteristics	No. of Benes					No. of Bene Mos					
	All	Aged	Disabled	Adults	Children	All	Aged	Disabled	Adults	Children	Unknown
All	23,474	11,135	11,672	654	13	256,830	117,814	132,818	6,133	65	0
Age											
5 and younger	0	0	0	0	0	0	0	0	0	0	0
6-14	5	0	5	0	0	60	0	60	0	0	0
15-20	44	0	41	0	3	476	0	440	0	36	0
21-44	4,538	0	4,151	386	1	50,932	0	47,214	3,717	1	0
45-64	4,488	3	4,266	217	2	50,324	33	48,263	2,011	17	0
65-74	5,398	3,045	2,305	45	3	59,700	32,858	26,474	362	6	0
75-84	4,953	4,209	738	3	3	53,651	45,115	8,504	29	3	0
85 and older	4,048	3,878	166	3	1	41,687	39,808	1,863	14	2	0
Unknown	0	0	0	0	0	0	0	0	0	0	0
Gender											
Female	15,620	8,556	6,756	303	5	171,477	91,494	77,131	2,844	8	0
Male	7,854	2,579	4,916	351	8	85,353	26,320	55,687	3,289	57	0
Unknown	0	0	0	0	0	0	0	0	0	0	0
Race											
White	17,350	8,144	8,746	452	8	190,987	86,321	100,322	4,288	56	0
African American	1,283	342	894	47	0	14,209	3,781	9,982	446	0	0
Other/unknown	4,841	2,649	2,032	155	5	51,634	27,712	22,514	1,399	9	0
Use of Nursing Facilities											
All year	4,519	3,297	1,222	0	0	51,431	36,966	14,465	0	0	0
Part year	2,246	1,830	415	1	0	20,596	16,220	4,367	9	0	0
None	16,709	6,008	10,035	653	13	184,803	64,628	113,986	6,124	65	0
Maintenance Assistance Status											
Cash	14,356	4,996	9,318	36	6	163,026	55,811	106,911	290	14	0
Medically needy	307	172	135	0	0	3,246	1,787	1,459	0	0	0
Poverty related	72	33	29	8	2	691	343	292	54	2	0
Other/unknown	8,739	5,934	2,190	610	5	89,867	59,873	24,156	5,789	49	0
Dual Status^c											
Full dual, all year	23,185	10,947	11,586	642	10	253,734	115,792	131,896	6,002	44	0
Full dual, part year	289	188	86	12	3	3,096	2,022	922	131	21	0
Managed Care Status											
FFS all year	22,773	11,128	11,578	54	13	249,766	117,737	131,768	196	65	0
FFS part year, with Rx claims	294	3	67	224	0	3,179	36	769	2,374	0	0
FFS part year, no Rx claims	213	2	22	189	0	1,999	17	221	1,761	0	0
MC all year, with Rx claims	34	0	3	31	0	319	0	36	283	0	0
MC all year, no Rx claims	160	2	2	156	0	1,567	24	24	1,519	0	0

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

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

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

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

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

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

Beneficiary Characteristics	Bene Mos in Cell F of Table 1		Included in Cell G of Table 1		Excluded from Cell G of Table 1	
	No. of Benes	No. of Bene Mos	No. of Benes	No. of Bene Mos	No. of Benes	No. of Bene Mos
All	23,474	256,830	23,280	251,207	194	5,623
FFS all year	22,773	249,766	22,773	249,766	0	0
FFS part year, with Rx claims	294	3,179	294	1,020	0	2,159
FFS part year, with no Rx claims	213	1,999	213	421	0	1,578
MC all year, with Rx claims	34	319	0	0	34	319
MC all year, with no Rx claims	160	1,567	0	0	160	1,567

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

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

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

Total Number of Dual Eligible Beneficiaries 23,280
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries \$40,231,569
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary \$1,728

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	2,901	12.5 %	\$0	0.0 %
1-500	5,446	23.4	1,133,354	2.8
501-1,000	3,424	14.7	2,540,277	6.3
1,001-1,500	2,570	11.0	3,193,372	7.9
1,501-2,000	1,989	8.5	3,463,156	8.6
2,001-2,500	1,605	6.9	3,577,509	8.9
2,501-3,000	1,225	5.3	3,356,230	8.3
3,001-3,500	882	3.8	2,854,647	7.1
3,501-4,000	656	2.8	2,452,426	6.1
4,001-4,500	536	2.3	2,271,291	5.6
4,501-5,000	395	1.7	1,870,903	4.7
5,001-5,500	302	1.3	1,579,530	3.9
5,501-6,000	244	1.0	1,399,060	3.5
6,001-6,500	179	0.8	1,114,511	2.8
6,501-7,000	134	0.6	905,296	2.3
7,001-7,500	115	0.5	830,159	2.1
7,501-8,000	109	0.5	843,911	2.1
8,001-8,500	85	0.4	699,510	1.7
8,501-9,000	61	0.3	533,184	1.3
9,001-9,500	56	0.2	519,722	1.3
9,501-10,000	55	0.2	535,650	1.3
10,001+	311	1.3	4,557,871	11.3

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

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

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

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

Total Number of Disabled Dual Eligible Beneficiaries, Age < 65 8,458
 Total Pharmacy Reimbursement for Disabled Dual Eligible Beneficiaries, Age < 65 \$18,970,419
 Mean Pharmacy Reimbursement per Disabled Dual Eligible Beneficiary, Age < 65 \$2,243

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age < 65	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	1,128	13.3 %	0	0.0 %
1-500	1,938	22.9	366,276	1.9
501-1,000	970	11.5	720,450	3.8
1,001-1,500	768	9.1	951,055	5.0
1,501-2,000	634	7.5	1,106,382	5.8
2,001-2,500	494	5.8	1,106,220	5.8
2,501-3,000	407	4.8	1,117,475	5.9
3,001-3,500	329	3.9	1,065,381	5.6
3,501-4,000	263	3.1	984,359	5.2
4,001-4,500	230	2.7	977,828	5.2
4,501-5,000	183	2.2	866,682	4.6
5,001-5,500	170	2.0	890,852	4.7
5,501-6,000	153	1.8	878,903	4.6
6,001-6,500	98	1.2	609,589	3.2
6,501-7,000	89	1.1	602,291	3.2
7,001-7,500	74	0.9	533,984	2.8
7,501-8,000	68	0.8	527,119	2.8
8,001-8,500	64	0.8	526,884	2.8
8,501-9,000	51	0.6	446,001	2.4
9,001-9,500	44	0.5	408,704	2.2
9,501-10,000	43	0.5	419,274	2.2
10,001+	260	3.1	3,864,710	20.4

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

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

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

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

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

Total Number of Dual Eligible Beneficiaries, Age 65-74 5,388
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65-74 \$8,289,101
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65-74 \$1,538

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 65-74	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	761	14.1 %	0	0.0
1-500	1,262	23.4	265,017	3.2
501-1,000	796	14.8	588,103	7.1
1,001-1,500	603	11.2	748,411	9.0
1,501-2,000	446	8.3	774,633	9.3
2,001-2,500	390	7.2	869,418	10.5
2,501-3,000	281	5.2	770,324	9.3
3,001-3,500	200	3.7	646,288	7.8
3,501-4,000	146	2.7	547,019	6.6
4,001-4,500	136	2.5	575,111	6.9
4,501-5,000	88	1.6	417,077	5.0
5,001-5,500	45	0.8	235,020	2.8
5,501-6,000	52	1.0	297,277	3.6
6,001-6,500	39	0.7	242,797	2.9
6,501-7,000	25	0.5	167,787	2.0
7,001-7,500	23	0.4	167,132	2.0
7,501-8,000	25	0.5	193,736	2.3
8,001-8,500	16	0.3	131,655	1.6
8,501-9,000	7	0.1	60,834	0.7
9,001-9,500	7	0.1	64,583	0.8
9,501-10,000	8	0.1	77,604	0.9
10,001+	32	0.6	449,275	5.4

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

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

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

—
icy
ent
%

SUPPLEMENTAL TABLE 1C
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 75 TO 84^{a, b}
 RHODE ISLAND, 1999

Total Number of Dual Eligible Beneficiaries, Age 75-84 4,952
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 75-84 \$7,418,939
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 75-84 \$1,498

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 75-84	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	544	11.0 %	0	0.0 %
1-500	1,063	21.5	239,733	3.2
501-1,000	831	16.8	622,521	8.4
1,001-1,500	615	12.4	768,525	10.4
1,501-2,000	479	9.7	833,112	11.2
2,001-2,500	407	8.2	903,769	12.2
2,501-3,000	307	6.2	841,042	11.3
3,001-3,500	202	4.1	654,775	8.8
3,501-4,000	144	2.9	539,305	7.3
4,001-4,500	108	2.2	456,625	6.2
4,501-5,000	64	1.3	301,818	4.1
5,001-5,500	62	1.3	323,856	4.4
5,501-6,000	27	0.5	154,451	2.1
6,001-6,500	33	0.7	205,933	2.8
6,501-7,000	13	0.3	87,765	1.2
7,001-7,500	13	0.3	93,299	1.3
7,501-8,000	15	0.3	115,411	1.6
8,001-8,500	2	0.0	16,716	0.2
8,501-9,000	3	0.1	26,349	0.4
9,001-9,500	5	0.1	46,435	0.6
9,501-10,000	3	0.1	28,947	0.4
10,001+	12	0.2	158,552	2.1

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

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

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

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

Total Number of Dual Eligible Beneficiaries, Age 85+ 4,047
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 85+ \$5,437,468
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 85+ \$1,344

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 85+	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	268	6.6 %	0	0.0 %
1-500	1,002	24.8	234,206	4.3
501-1,000	802	19.8	590,392	10.9
1,001-1,500	574	14.2	713,755	13.1
1,501-2,000	426	10.5	742,114	13.6
2,001-2,500	311	7.7	691,557	12.7
2,501-3,000	223	5.5	608,459	11.2
3,001-3,500	150	3.7	485,028	8.9
3,501-4,000	101	2.5	374,197	6.9
4,001-4,500	61	1.5	257,580	4.7
4,501-5,000	60	1.5	285,326	5.2
5,001-5,500	25	0.6	129,802	2.4
5,501-6,000	12	0.3	68,429	1.3
6,001-6,500	9	0.2	56,192	1.0
6,501-7,000	7	0.2	47,453	0.9
7,001-7,500	5	0.1	35,744	0.7
7,501-8,000	1	0.0	7,645	0.1
8,001-8,500	3	0.1	24,255	0.4
8,501-9,000	7	0.2	85,334	1.6
9,001-9,500				
9,501-10,000				
10,001+				

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

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

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