

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

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TABLE 11  
 CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY<sup>a,b</sup>  
 DUAL ELIGIBLE BENEFICIARIES, SOUTH CAROLINA, 1999

Beneficiary Characteristics	No. of Beneficiaries							No. of Bene Mos						
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown		
<b>All</b>	<b>118,391</b>	<b>75,195</b>	<b>42,786</b>	<b>394</b>	<b>9</b>	<b>7</b>	<b>1,289,934</b>	<b>812,179</b>	<b>474,119</b>	<b>3,495</b>	<b>101</b>	<b>40</b>		
<b>Age</b>														
5 and younger	6	2	4	0	0	0	61	24	37	0	0	0		
6-14	16	0	15	0	1	0	190	0	178	0	12	0		
15-20	184	0	177	2	5	0	2,026	0	1,942	24	60	0		
21-44	17,642	19	17,321	298	2	2	195,568	175	192,649	2,707	24	13		
45-64	25,114	86	24,943	84	0	1	278,510	846	276,973	686	0	5		
65-74	29,501	29,238	254	7	0	2	322,723	320,862	1,806	51	0	4		
75-84	28,356	28,305	48	2	0	1	308,033	307,690	314	17	0	12		
85 and older	17,564	17,538	24	1	1	0	182,752	182,517	220	10	5	0		
Unknown	8	7	0	0	0	1	71	65	0	0	0	6		
<b>Gender</b>														
Female	80,114	57,697	22,158	253	2	4	879,153	629,634	247,162	2,307	24	26		
Male	38,275	17,497	20,627	141	7	3	410,757	182,533	226,945	1,188	77	14		
Unknown	2	1	1	0	0	0	24	12	12	0	0	0		
<b>Race</b>														
White	52,287	32,693	19,391	195	3	5	555,718	340,501	213,475	1,691	29	22		
African American	55,643	35,350	20,091	194	6	2	617,864	391,582	224,421	1,771	72	18		
Other/unknown	10,461	7,152	3,304	5	0	0	116,352	80,096	36,223	33	0	0		
<b>Use of Nursing Facilities</b>														
All year	10,494	9,791	701	0	0	2	110,873	103,009	7,851	0	0	13		
Part year	5,969	5,517	452	0	0	0	53,061	48,730	4,331	0	0	0		
None	101,928	59,887	41,633	394	9	5	1,126,000	660,440	461,937	3,495	101	27		
<b>Maintenance Assistance Status</b>														
Cash	56,279	34,417	21,650	212	0	0	637,987	391,808	244,359	1,820	0	0		
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0		
Poverty-related	40,083	23,127	16,901	52	3	0	434,025	249,977	183,628	391	29	0		
Other/unknown	22,029	17,651	4,235	130	6	7	217,922	170,394	46,132	1,284	72	40		
<b>Dual Medicare Status<sup>c</sup></b>														
Full dual, all year	118,391	75,195	42,786	394	9	7	1,289,934	812,179	474,119	3,495	101	40		
Full dual, part year	0	0	0	0	0	0	0	0	0	0	0	0		
<b>Managed Care Status</b>														
FFS all year	118,183	75,080	42,706	381	9	7	1,288,812	811,646	473,607	3,418	101	40		
FFS part year, with Rx claims	150	65	73	12	0	0	943	371	496	76	0	0		
FFS part year, no Rx claims	58	50	7	1	0	0	179	162	16	1	0	0		

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

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

Table 11

Dual Eligible Beneficiaries

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

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

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

TABLE 12  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BENEFICIARY CHARACTERISTIC<sup>a,b</sup>  
 DUAL ELIGIBLE BENEFICIARIES, SOUTH CAROLINA, 1999

Beneficiary Characteristics	% with at Least One Rx	Mean No. of Rx	Mean Rx \$	\$ per Rx	Mean \$, All Services	Rx \$ as % of All Services	Mean OTC Drug \$ <sup>c</sup>	No. of Benes
All	82.2 %	19.0	\$1,278	\$67	\$7,441	17.2 %	\$36	118,391
<b>Age</b>								
5 and younger	83.3	32.3	3,878	120	7,015	55.3	1	6
6-14	93.8	31.8	2,288	72	12,675	18.1	3	16
15-20	73.9	13.5	845	63	7,926	10.7	2	184
21-44	82.9	16.7	1,571	94	8,358	18.8	17	17,642
45-64	88.6	22.4	1,692	76	7,926	21.3	54	25,114
65-74	86.3	20.6	1,264	61	4,986	25.4	51	29,501
75-84	80.7	19.0	1,084	57	6,999	15.5	31	28,356
85 and older	67.8	13.9	731	53	10,652	6.9	12	17,564
Unknown	75.0	6.5	496	76	12,623	3.9	0	8
<b>Basis of Eligibility</b>								
Aged	79.9	18.4	1,074	58	7,072	15.2	34	75,195
Disabled	86.1	20.0	1,638	82	7,936	20.6	39	42,786
Adults	88.6	14.2	1,085	77	24,005	4.5	13	394
Children	77.8	13.1	1,135	87	13,081	8.7	0	9
Unknown	28.6	3.1	99	32	8,360	1.2	0	7
<b>Gender</b>								
Female	83.8	20.4	1,300	64	7,291	17.8	42	80,114
Male	78.8	16.0	1,231	77	7,755	15.9	23	38,275
Unknown	50.0	3.5	49	14	49	100.0	0	2
<b>Race</b>								
White	78.6	19.8	1,432	72	9,182	15.6	26	52,287
African American	84.7	18.0	1,130	63	6,159	18.4	44	55,643
Other/unknown	86.5	20.1	1,295	64	5,562	23.3	39	10,461
<b>Use of Nursing Facilities</b>								
Entire year	28.2	3.0	261	87	24,061	1.1	3	10,494
Part year	59.1	8.6	618	72	14,373	4.3	12	5,969
None	89.1	21.2	1,421	67	5,324	26.7	40	101,928
<b>Maintenance Assistance Status</b>								
Cash	89.1	20.5	1,330	65	4,850	27.4	41	56,279
Medically needy	0.0	0.0	0	0	0	0.0	0	0
Poverty related	90.0	22.0	1,453	66	4,205	34.5	40	40,083
Other/unknown	50.4	9.5	826	87	19,948	4.1	15	22,029

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

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

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

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

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

TABLE 13  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC<sup>a,b</sup>  
 DUAL ELIGIBLE BENEFICIARIES, SOUTH CAROLINA, 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				
All	1.7	\$117	17.2 %	17.8 %	29.1 %	21.5 %	31.5 %	0.1 %	0.0 %	\$683	118,391	1,289,934
<b>Age</b>												
5 and younger	3.2	381	55.3	16.7	33.3	0.0	33.3	16.7	0.0	690	6	61
6-14	2.7	193	18.1	6.3	25.0	25.0	37.5	6.3	0.0	1,067	16	190
15-20	1.2	77	10.7	26.1	41.3	16.3	14.7	1.6	0.0	720	184	2,026
21-44	1.5	142	18.8	17.1	38.6	19.8	24.1	0.4	0.0	754	17,642	195,568
45-64	2.0	153	21.3	11.4	26.6	22.3	39.5	0.2	0.0	715	25,114	278,510
65-74	1.9	116	25.4	13.7	28.0	23.6	34.8	0.0	0.0	456	29,501	322,723
75-84	1.7	100	15.5	19.3	26.9	22.3	31.6	0.0	0.0	644	28,356	308,033
85 and older	1.3	70	6.9	32.2	28.3	17.6	22.0	0.0	0.0	1,024	17,564	182,752
Unknown	0.7	56	3.9	25.0	62.5	12.5	0.0	0.0	0.0	1,422	8	71
<b>Basis of Eligibility</b>												
Aged	1.7	100	15.2	20.1	27.6	21.7	30.6	0.0	0.0	655	75,195	812,179
Disabled	1.8	148	20.6	13.9	31.4	21.3	33.1	0.3	0.0	716	42,786	474,119
Adults	1.6	122	4.5	11.4	42.4	20.1	25.6	0.3	0.3	2,706	394	3,495
Children	1.2	101	8.7	22.2	55.6	11.1	11.1	0.0	0.0	1,166	9	101
Unknown	0.6	17	1.2	71.4	14.3	14.3	0.0	0.0	0.0	1,463	7	40
<b>Gender</b>												
Female	1.9	119	17.8	16.2	26.3	22.4	35.0	0.1	0.0	664	80,114	879,153
Male	1.5	115	15.9	21.2	34.9	19.8	24.1	0.2	0.0	723	38,275	410,757
Unknown	0.3	4	100.0	50.0	50.0	0.0	0.0	0.0	0.0	4	2	24
<b>Race</b>												
White	1.9	135	15.6	21.4	23.1	18.7	36.7	0.2	0.0	864	52,287	555,718
African American	1.6	102	18.4	15.3	34.4	24.0	26.3	0.0	0.0	555	55,643	617,864
Other/unknown	1.8	116	23.3	13.5	30.8	22.7	32.8	0.1	0.0	500	10,461	116,352
<b>Use of Nursing Facilities</b>												
Entire year	0.3	25	1.1	71.8	20.5	3.4	4.3	0.0	0.0	2,277	10,494	110,873
Part year	1.0	70	4.3	40.9	34.4	14.7	9.9	0.0	0.0	1,617	5,969	53,061
None	1.9	129	26.7	10.9	29.6	23.8	35.5	0.1	0.0	482	101,928	1,126,000
<b>Maintenance Assistance Status</b>												
Cash	1.8	117	27.4	10.9	32.4	24.0	32.6	0.1	0.0	428	56,279	637,987
Medically needy	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Poverty related	2.0	134	34.5	10.0	27.7	24.1	38.2	0.1	0.0	388	40,083	434,025
Other/unknown	1.0	84	4.1	49.6	23.1	10.7	16.4	0.2	0.0	2,017	22,029	217,922

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

Table 13

Dual Eligible Beneficiaries

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

TABLE 14  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, SOUTH CAROLINA, 1999

Beneficiary Characteristics	All Rx			Patented Brand-Name Drugs			Off-Patent Brand-Name Drugs			Generic Drugs		
	No. of Rx	Rx \$	\$ per Rx	No. of Rx	Rx \$	\$ per Rx	No. of Rx	Rx \$	\$ per Rx	No. of Rx	Rx \$	\$ per Rx
<b>All</b>	<b>1.7</b>	<b>\$117</b>	<b>\$67</b>	<b>0.7</b>	<b>\$76</b>	<b>\$112</b>	<b>0.3</b>	<b>\$20</b>	<b>\$74</b>	<b>0.7</b>	<b>\$16</b>	<b>\$22</b>
<b>Age</b>												
5 and younger	3.2	381	120	1.2	283	234	0.8	80	99	1.1	18	16
6-14	2.7	193	72	0.6	112	200	0.5	50	97	1.4	27	19
15-20	1.2	77	63	0.5	55	112	0.2	12	71	0.5	9	17
21-44	1.5	142	94	0.6	102	174	0.2	22	104	0.7	14	21
45-64	2.0	153	76	0.8	101	125	0.3	25	88	0.8	19	23
65-74	1.9	116	61	0.8	73	97	0.3	21	69	0.7	16	22
75-84	1.7	100	57	0.7	61	91	0.3	19	63	0.7	15	22
85 and older	1.3	70	53	0.5	41	89	0.2	14	56	0.6	13	22
Unknown	0.7	56	76	0.4	47	122	0.2	5	30	0.2	4	24
<b>Basis of Eligibility</b>												
Aged	1.7	100	58	0.7	61	93	0.3	18	64	0.7	15	22
Disabled	1.8	148	82	0.7	101	142	0.3	24	94	0.8	17	22
Adults	1.6	122	77	0.6	84	135	0.2	22	110	0.7	13	18
Children	1.2	101	87	0.3	71	205	0.2	22	97	0.5	7	13
Unknown	0.6	17	32	0.2	8	43	0.1	2	32	0.3	8	25
<b>Gender</b>												
Female	1.9	119	64	0.7	76	103	0.3	20	71	0.8	16	22
Male	1.5	115	77	0.5	76	139	0.2	20	82	0.6	15	23
Unknown	0.3	4	14	0.0	0	0	0.0	0	0	0.3	4	14
<b>Race</b>												
White	1.9	135	72	0.7	87	119	0.3	23	82	0.8	19	24
African American	1.6	102	63	0.6	67	106	0.3	18	68	0.7	13	20
Other/unknown	1.8	116	64	0.7	74	106	0.3	21	73	0.7	16	22
<b>Use of Nursing Facilities</b>												
Entire year	0.3	25	87	0.1	15	137	0.0	4	95	0.1	5	42
Part year	1.0	70	72	0.4	43	115	0.2	12	75	0.4	11	29
None	1.9	129	67	0.7	84	112	0.3	22	74	0.8	17	22
<b>Maintenance Assistance Status</b>												
Cash	1.8	117	65	0.7	75	109	0.3	21	74	0.8	16	21
Medically needy	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Poverty related	2.0	134	66	0.8	88	108	0.3	23	73	0.8	18	21
Other/unknown	1.0	84	87	0.4	56	147	0.2	13	82	0.4	11	29

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

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

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

Table 14

Dual Eligible Beneficiaries



c. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In South Carolina, 4.3 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all combined. For information about this classification method, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).

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

TABLE 15

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, SOUTH CAROLINA, 1999

Therapeutic Category	No. of Rx per Bene Mo among Users			\$ per Bene Mo among Users			\$ per Rx			Users							
	Total	Patented Brand-Name	Off-Patent Brand-Name	Total	Patented Brand-Name	Off-Patent Brand-Name	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total No. of Rx	Total Rx \$	No. Dual Benes	As % of Benes	No. of Bene Mos		
																Generic	Patented Brand-Name
Anti-infective Agents	0.2	0.1	0.0	0.1	\$21	\$19	\$0	\$1	\$97	\$162	\$66	\$14	122,128	\$11,842,658	49,816	42.1 %	570,331
Biologics	0.0	0.0	0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0.0	0
Antineoplastic Agents	0.4	0.2	0.1	0.1	70	48	15	7	195	257	242	65	9,680	1,890,593	2,411	2.0	27,004
Endocrine/Metabolic Drugs	0.5	0.3	0.1	0.1	23	19	2	3	50	71	25	20	188,906	9,529,325	36,547	30.9	417,601
Cardiovascular Agents	0.8	0.3	0.2	0.3	46	27	13	6	56	84	67	21	625,696	35,191,844	67,625	57.1	768,330
Respiratory Agents	0.3	0.2	0.0	0.1	17	14	1	3	51	77	32	18	145,852	7,396,037	36,784	31.1	423,636
Gastrointestinal Agents	0.3	0.2	0.0	0.1	43	33	5	5	125	182	129	40	138,641	17,275,293	35,240	29.8	404,075
Genitourinary Agents	0.2	0.2	0.0	0.1	13	10	0	2	53	65	40	29	28,111	1,486,608	10,240	8.6	118,427
CNS Drugs	0.6	0.2	0.1	0.3	51	33	11	7	87	171	168	21	301,258	26,087,867	44,617	37.7	506,894
Stimulants/Anti-obesity/Anorexia	0.5	0.1	0.1	0.3	24	8	8	9	51	71	70	34	1,499	76,746	280	0.2	3,171
Miscellaneous Psychological/Neurological Agents	0.4	0.2	0.0	0.1	51	47	0	5	138	193	107	35	9,471	1,305,468	2,267	1.9	25,483
Analgesics and Anesthetics	0.4	0.1	0.1	0.3	24	15	5	5	55	115	95	18	271,977	15,012,415	54,164	45.8	620,854
Neuromuscular Agents	0.5	0.1	0.1	0.2	33	19	6	7	70	144	60	31	116,695	8,217,880	21,973	18.6	251,866
Nutritional Products	0.3	0.0	0.2	0.1	8	0	6	2	27	27	37	17	47,960	1,306,618	14,501	12.2	165,750
Hematological Agents	0.3	0.1	0.1	0.1	30	15	8	7	87	236	55	52	44,103	3,852,690	11,480	9.7	130,158
Topical Products	0.3	0.1	0.1	0.1	12	8	2	2	40	55	36	17	95,605	3,791,913	27,948	23.6	324,058
Miscellaneous Products	0.2	0.1	0.0	0.1	25	16	3	5	152	275	171	61	1,070	162,180	577	0.5	6,602
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	19	0	0	0	69	0	0	0	99,066	6,859,475	32,075	27.1	370,392
<b>TOTAL NO. OF RX AND RX \$</b>	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	2,247,718	151,285,610	n.a.	n.a.	n.a.

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

- a. Table 15 includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 1999. A beneficiary who used drugs from two or more categories was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
- c. For information about these therapeutic categories, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).
- d. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In South Carolina, 4.3 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).
- Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Center for Medicare and Medicaid Services; CNS = Central Nervous System; MAX = Medicaid Analytic Extract; n.a. = not applicable; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE 16

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP<sup>a, b, c</sup>  
DUAL ELIGIBLE BENEFICIARIES, SOUTH CAROLINA, 1999

Top 10 Drug Groups	Users			Among Users			
	Total Medicaid Rx \$	No.	As % of Dual Benes	No. of Bene Mos	No. of Rx per Bene Mo	\$ per Rx	Rx \$ per Bene Mo
ULCER DRUGS	\$15,210,996	33,979	28.7 %	391,624	0.3	\$143	\$39
ANTIPSYCHOTICS	12,766,859	13,637	11.5	155,794	0.4	197	82
CALCIUM BLOCKERS	11,096,473	28,548	24.1	327,020	0.4	83	34
ANTIHYPERTENSIVE	10,187,370	43,521	36.8	498,610	0.4	56	20
ANTIDIABETIC	9,542,840	31,433	26.6	360,176	0.4	69	26
ANTIDEPRESSANTS	9,008,907	29,145	24.6	332,444	0.3	89	27
ANALGESICS - ANTI-INFLAMMATORY	8,892,182	39,918	33.7	465,229	0.2	85	19
ANTHYPERLIPIDEMIC	7,583,608	15,094	12.7	174,353	0.4	121	43
ANTICONVULSANT	6,662,589	14,813	12.5	169,327	0.4	88	39
ANTIVIRAL	5,918,554	3,800	3.2	43,483	0.2	621	136

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

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

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

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

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

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

Beneficiary Characteristics	All Top 10 Drug Groups				ULCER DRUGS				ANTIPSYCHOTICS			
	No. of Rx	Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
<b>All</b>	<b>979,012</b>	<b>\$96,870,378</b>	<b>33,979</b>	<b>28.7 %</b>	<b>391,624</b>	<b>0.3</b>	<b>\$39</b>	<b>13,637</b>	<b>11.5 %</b>	<b>155,794</b>	<b>0.4</b>	<b>\$82</b>
<b>Female</b>	703,809	65,202,932	24,756	30.9	286,354	0.3	39	7,926	9.9	90,473	0.4	67
<b>Disabled</b>	218,100	25,060,913	8,099	36.6	93,965	0.2	39	4,093	18.5	47,240	0.4	88
5 and younger	4	32	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	91	5,803	2	40.0	23	0.2	7	0	0.0	0	0.0	0
15-20	443	45,717	15	20.8	178	0.2	28	7	9.7	84	0.5	141
21-44	60,040	7,860,445	2,103	27.4	24,390	0.2	34	1,923	25.1	22,123	0.4	91
45-64	156,658	17,082,769	5,939	41.7	69,000	0.2	41	2,157	15.1	25,004	0.4	85
65-74	712	56,545	33	29.2	318	0.3	38	2	1.8	6	0.5	9
75-84	76	4,669	4	13.3	29	0.2	17	3	10.0	17	0.4	9
85 and older	76	4,933	3	14.3	27	0.3	44	1	4.8	6	0.2	2
<b>Other Eligibles</b>	485,694	40,140,757	16,657	28.7	192,389	0.3	39	3,832	6.6	43,221	0.3	44
5 and younger	9	645	0	0.0	0	0.0	0	1	50.0	12	0.1	4
6-14	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	7	2,819	0	0.0	0	0.0	0	1	50.0	12	0.3	187
21-44	1,050	127,988	47	21.4	495	0.2	24	26	11.8	283	0.3	70
45-64	760	75,019	25	28.4	283	0.2	33	5	5.7	51	0.4	120
65-74	214,416	18,651,748	6,966	33.9	80,802	0.3	39	1,355	6.6	15,434	0.4	59
75-84	192,549	15,445,384	6,530	29.3	75,664	0.3	38	1,508	6.8	17,021	0.3	40
85 and older	76,903	5,837,154	3,089	20.8	35,145	0.3	38	936	6.3	10,408	0.3	28
<b>Male</b>	275,198	31,667,359	9,223	24.1	105,270	0.3	39	5,711	14.9	65,321	0.5	103
<b>Disabled</b>	165,513	22,669,075	4,990	24.2	57,475	0.3	40	4,475	21.7	51,815	0.5	116
5 and younger	12	572	1	50.0	12	0.5	15	0	0.0	0	0.0	0
6-14	110	10,483	4	40.0	48	0.3	29	2	20.0	24	0.2	56
15-20	587	57,157	6	5.7	72	0.3	27	21	20.0	236	0.5	103
21-44	69,146	11,217,607	1,781	18.5	20,582	0.3	37	2,570	26.6	29,802	0.5	120
45-64	94,915	11,318,095	3,163	29.6	36,411	0.3	41	1,880	17.6	21,738	0.5	110
65-74	693	61,030	33	23.4	334	0.3	46	2	1.4	15	0.3	15
75-84	40	3,324	2	11.1	16	0.5	95	0	0.0	0	0.0	0
85 and older	10	807	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Other Eligibles</b>	109,668	8,996,515	4,233	24.0	47,795	0.3	38	1,235	7.0	13,494	0.3	53
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	64	4,423	0	0.0	0	0.0	0	2	40.0	24	0.4	26
21-44	569	99,186	25	25.0	256	0.3	41	6	6.0	50	0.4	162
45-64	524	49,020	34	41.0	355	0.2	39	5	6.0	50	0.8	180
65-74	62,246	5,340,493	2,249	25.9	25,638	0.3	38	634	7.3	7,078	0.4	67
75-84	35,122	2,672,309	1,367	22.6	15,460	0.3	38	413	6.8	4,502	0.3	37
85 and older	11,143	831,084	558	20.6	6,086	0.3	39	175	6.4	1,790	0.3	31
<b>Unknown</b>	37	3,118	0	0.0	0	0.0	0	2	20.0	24	0.3	68

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

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

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

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

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

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

Beneficiary Characteristics	CALCIUM BLOCKERS					ANTIHYPERTENSIVE					ANTIDIABETIC				
	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean Rx	Mean No. of Rx	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean Rx	Mean No. of Rx	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean Rx	Mean No. of Rx
<b>All</b>	<b>28,548</b>	<b>24.1 %</b>	<b>327,020</b>	<b>\$34</b>	<b>0.4</b>	<b>43,521</b>	<b>36.8 %</b>	<b>498,610</b>	<b>\$20</b>	<b>0.4</b>	<b>31,433</b>	<b>26.6 %</b>	<b>360,176</b>	<b>\$27</b>	<b>0.4</b>
<b>Female</b>	21,620	27.0	248,442	34	0.4	31,872	39.8	366,982	20	0.4	24,372	30.4	280,243	27	0.4
<b>Disabled</b>	4,735	21.4	54,388	35	0.4	7,449	33.6	85,711	20	0.3	7,047	31.8	81,178	30	0.4
5 and younger	0	0.0	0	0	0.0	1	50.0	12	3	0.3	0	0.0	0	0	0.0
6-14	4	80.0	47	59	0.7	7	140.0	82	14	0.4	0	0.0	0	0	0.0
15-20	11	15.3	129	50	0.4	23	31.9	266	17	0.2	1	1.4	12	0.8	169
21-44	758	9.9	8,715	33	0.3	1,243	16.2	14,279	18	0.3	1,068	13.9	12,326	28	0.3
45-64	3,917	27.5	45,118	35	0.4	6,121	43.0	70,619	21	0.3	5,922	41.6	68,368	31	0.4
65-74	36	31.9	308	29	0.3	40	35.4	334	17	0.3	51	45.1	427	23	0.4
75-84	6	20.0	46	20	0.3	7	23.3	46	9	0.3	3	10.0	24	17	0.3
85 and older	3	14.3	25	42	0.7	7	33.3	73	13	0.3	2	9.5	21	9	0.2
<b>Other Eligibles</b>	16,885	29.1	194,054	34	0.4	24,422	42.1	281,259	21	0.4	17,325	29.9	199,065	25	0.4
5 and younger	1	50.0	12	3	0.1	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	21	9.5	213	25	0.3	23	10.5	232	8	0.2	22	10.0	228	19	0.4
45-64	19	21.6	185	46	0.4	43	48.9	467	17	0.3	51	58.0	477	36	0.3
65-74	6,878	33.5	79,168	35	0.4	10,462	50.9	120,679	21	0.4	8,653	42.1	99,768	28	0.4
75-84	6,740	30.3	77,853	34	0.4	9,672	43.5	111,690	21	0.4	6,650	29.9	76,398	23	0.4
85 and older	3,226	21.8	36,623	31	0.4	4,222	28.5	48,191	19	0.4	1,949	13.1	22,194	18	0.4
<b>Male</b>	6,928	18.1	78,578	34	0.4	11,649	30.4	131,628	21	0.4	7,061	18.4	79,933	27	0.4
<b>Disabled</b>	3,125	15.2	35,500	35	0.4	5,289	25.6	59,928	20	0.3	3,680	17.8	41,811	29	0.4
5 and younger	1	50.0	12	22	0.3	0	0.0	0	0	0.0	0	0.0	0	0	0.0
6-14	6	60.0	72	29	0.3	8	80.0	95	26	0.3	0	0.0	0	0	0.0
15-20	14	13.3	168	36	0.4	28	26.7	320	16	0.4	2	1.9	24	0.5	20
21-44	773	8.0	8,765	37	0.4	1,402	14.5	15,959	19	0.3	853	8.8	9,812	28	0.4
45-64	2,300	21.5	26,198	35	0.4	3,792	35.5	42,989	21	0.4	2,792	26.1	31,676	29	0.4
65-74	28	19.9	263	30	0.3	53	37.6	507	20	0.3	33	23.4	299	25	0.3
75-84	3	16.7	22	24	0.3	5	27.8	46	15	0.3	0	0.0	0	0	0.0
85 and older	0	0.0	0	0	0.0	1	33.3	12	48	0.7	0	0.0	0	0	0.0
<b>Other Eligibles</b>	3,803	21.6	43,078	32	0.4	6,359	36.0	71,694	21	0.4	3,381	19.2	38,122	24	0.4
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	40.0	24	50	0.3	2	40.0	24	64	0.8	0	0.0	0	0	0.0
21-44	13	13.0	118	38	0.4	16	16.0	149	32	0.4	11	11.0	124	36	0.3
45-64	13	15.7	119	38	0.4	40	48.2	382	17	0.3	19	22.9	177	24	0.4
65-74	2,078	23.9	23,629	34	0.4	3,442	39.6	38,967	21	0.4	2,057	23.7	23,181	26	0.4
75-84	1,260	20.8	14,315	31	0.4	2,106	34.8	23,870	21	0.4	1,039	17.2	11,781	21	0.4
85 and older	437	16.1	4,873	29	0.4	753	27.7	8,302	18	0.4	255	9.4	2,859	19	0.4
<b>Unknown</b>	0	0.0	0	0	0.0	2	20.0	18	11	0.3	0	0.0	0	0	0.0

Table 16B

Dual Eligible Beneficiaries

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

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

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

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

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

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

Beneficiary Characteristics	ANTIDEPRESSANTS				ANALGESICS - ANTI-INFLAMMATORY				ANTIHYPERLIPIDEMIC						
	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
<b>All</b>	<b>29,145</b>	<b>24.6 %</b>	<b>332,444</b>	<b>0.3</b>	<b>\$27</b>	<b>39,918</b>	<b>33.7 %</b>	<b>465,229</b>	<b>0.2</b>	<b>\$19</b>	<b>15,094</b>	<b>12.7 %</b>	<b>174,353</b>	<b>0.4</b>	<b>\$44</b>
<b>Female</b>	21,543	26.9	246,350	0.3	27	30,537	38.1	356,766	0.2	20	11,509	14.4	133,354	0.4	44
<b>Disabled</b>	10,378	46.8	118,893	0.3	32	9,300	42.0	108,289	0.2	18	3,257	14.7	37,704	0.3	42
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	4	80.0	47	0.4	10	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	13	18.1	152	0.4	26	22	30.6	248	0.2	9	0	0.0	0	0.0	0
21-44	3,618	47.2	41,282	0.3	34	2,582	33.7	30,088	0.2	14	406	5.3	4,721	0.3	35
45-64	6,707	47.1	77,110	0.3	31	6,663	46.8	77,647	0.2	20	2,829	19.9	32,791	0.3	43
65-74	32	28.3	277	0.3	19	24	21.2	233	0.3	19	18	15.9	152	0.4	43
75-84	4	13.3	25	0.6	29	7	23.3	52	0.2	13	2	6.7	16	0.3	24
85 and older	0	0.0	0	0.0	0	2	9.5	21	0.3	20	2	9.5	24	0.8	47
<b>Other Eligibles</b>	11,165	19.3	127,457	0.3	22	21,237	36.6	248,477	0.2	21	8,251	14.2	95,638	0.4	44
5 and younger	0	0.0	0	0.0	0	1	50.0	12	0.2	1	1	50.0	12	0.4	47
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	1	50.0	12	0.3	48	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	110	50.0	1,125	0.3	24	95	43.2	1,005	0.2	11	9	4.1	87	0.2	18
45-64	37	42.0	399	0.3	27	31	35.2	338	0.2	15	13	14.8	141	0.3	33
65-74	4,959	24.1	57,034	0.3	23	9,350	45.5	109,270	0.2	21	4,427	21.5	51,213	0.4	45
75-84	4,234	19.0	48,411	0.3	22	8,368	37.6	98,226	0.2	21	3,177	14.3	36,997	0.4	44
85 and older	1,824	12.3	20,476	0.3	22	3,392	22.9	39,626	0.3	21	624	4.2	7,188	0.4	41
<b>Male</b>	7,602	19.9	86,094	0.3	28	9,380	24.5	108,451	0.2	16	3,585	9.4	40,999	0.4	43
<b>Disabled</b>	5,480	26.6	62,657	0.3	30	5,067	24.6	58,664	0.2	14	2,043	9.9	23,426	0.3	44
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	1	10.0	12	0.5	121	1	10.0	12	0.1	1	0	0.0	0	0.0	0
15-20	23	21.9	255	0.5	33	9	8.6	107	0.1	3	0	0.0	0	0.0	0
21-44	2,748	28.5	31,557	0.3	32	1,952	20.2	22,658	0.2	10	458	4.7	5,333	0.3	38
45-64	2,689	25.1	30,622	0.3	28	3,069	28.7	35,524	0.2	17	1,560	14.6	17,845	0.4	46
65-74	18	12.8	199	0.3	27	32	22.7	321	0.2	12	25	17.7	248	0.3	39
75-84	1	5.6	12	0.1	0	3	16.7	30	0.2	10	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	1	33.3	12	0.2	20	0	0.0	0	0.0	0
<b>Other Eligibles</b>	2,121	12.0	23,425	0.3	22	4,313	24.4	49,787	0.2	17	1,542	8.7	17,573	0.4	43
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	4	80.0	48	0.5	19	1	20.0	12	0.1	6	0	0.0	0	0.0	0
21-44	39	39.0	388	0.3	22	39	39.0	382	0.2	24	3	3.0	36	0.2	9
45-64	18	21.7	134	0.2	16	38	45.8	405	0.2	11	12	14.5	125	0.3	22
65-74	1,188	13.7	13,396	0.3	22	2,291	26.4	26,379	0.2	17	1,075	12.4	12,275	0.4	44
75-84	625	10.3	6,825	0.3	22	1,433	23.7	16,740	0.2	18	393	6.5	4,478	0.4	40
85 and older	247	9.1	2,634	0.3	22	511	18.8	5,869	0.2	16	59	2.2	659	0.3	30
<b>Unknown</b>	1	10.0	12	0.8	16	1	10.0	12	0.4	7	1	10.0	12	0.8	85

Table 16C

Dual Eligible Beneficiaries



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

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

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

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

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

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

Beneficiary Characteristics	ANTICONVULSANT				ANTIVIRAL				Mean Rx \$	Mean No. of Rx	Users as % of Dual Benes	No. of Bene Mos among Users	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean Rx \$	Mean No. of Rx	No. of Benes	No. of Bene Mos
	No. of Users	12.5 %	No. of Bene Mos among Users	0.4	Mean Rx \$	No. of Users	3.2 %	No. of Bene Mos among Users											
<b>All</b>	<b>14,813</b>	<b>12.5 %</b>	<b>169,327</b>	<b>0.4</b>	<b>\$39</b>	<b>3,800</b>	<b>3.2 %</b>	<b>43,483</b>	<b>0.2</b>	<b>\$136</b>	<b>118,391</b>	<b>1,289,934</b>							
<b>Female</b>																			
<b>Disabled</b>																			
5 and younger	8,610	10.7	98,372	0.4	36	1,597	2.0	18,571	0.2	81	80,109	879,101							
6-14	5,053	22.8	57,989	0.5	45	996	4.5	11,563	0.2	112	22,158	247,162							
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	24							
21-44	0	0.0	0	0.0	0	2	40.0	23	0.3	53	5	59							
45-64	13	18.1	156	0.9	60	3	4.2	36	0.1	7	72	788							
65-74	2,276	29.7	26,122	0.5	52	565	7.4	6,549	0.2	121	7,669	85,742							
75-84	2,748	19.3	31,587	0.4	39	425	3.0	4,943	0.2	101	14,246	159,440							
85 and older	15	13.3	116	0.3	32	0	0.0	0	0.0	0	113	741							
<b>Other Eligibles</b>																			
5 and younger	1	3.3	8	0.3	45	1	3.3	12	0.2	10	30	177							
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	21	191							
15-20	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	0	0.0	0	0.0	0	2	24							
45-64	3,557	6.1	40,383	0.4	23	601	1.0	7,008	0.1	28	57,951	631,939							
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	24							
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0							
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0							
<b>Male</b>																			
<b>Disabled</b>																			
5 and younger	6,203	16.2	70,955	0.5	44	2,203	5.8	24,912	0.3	178	38,272	410,738							
6-14	4,915	23.8	56,533	0.5	48	2,048	9.9	23,128	0.3	184	20,627	226,945							
15-20	0	0.0	0	0.0	0	1	50.0	12	0.3	11	2	13							
21-44	4	40.0	48	0.7	32	2	20.0	24	0.1	9	10	119							
45-64	17	16.2	178	0.6	57	6	5.7	72	0.2	10	105	1,154							
65-74	2,677	27.7	30,785	0.5	53	1,407	14.6	15,797	0.3	184	9,652	106,907							
75-84	2,209	20.7	25,433	0.5	43	630	5.9	7,199	0.3	188	10,696	117,521							
85 and older	7	5.0	77	0.2	18	2	1.4	24	0.1	10	141	1,065							
<b>Other Eligibles</b>																			
5 and younger	1	5.6	12	0.4	23	0	0.0	0	0.0	0	18	137							
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	29							
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0							
21-44	1,288	7.3	14,422	0.4	27	155	0.9	1,784	0.2	96	17,645	183,793							
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	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12							
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	5	60							
<b>Other Eligibles</b>																			
5 and younger	20	20.0	211	0.4	49	13	13.0	137	0.3	283	100	874							
6-14	8	9.6	86	0.3	19	2	2.4	24	0.1	3	83	713							
15-20	742	8.5	8,466	0.4	30	101	1.2	1,170	0.2	108	8,688	92,826							
21-44	410	6.8	4,502	0.4	22	26	0.4	312	0.1	12	6,054	62,462							
45-64	108	4.0	1,157	0.3	19	12	0.4	129	0.1	14	2,714	26,846							
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	10	95							
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0							
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0							
<b>Unknown</b>																			
	0	0.0	0	0.0	0	0	0.0	0	0.0	0	10	95							

Table 16D

Dual Eligible Beneficiaries

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

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

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

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

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

TABLE 17  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,  
 BY BENEFICIARY CHARACTERISTIC<sup>a, b</sup>  
 DUAL ELIGIBLE BENEFICIARIES, SOUTH CAROLINA, 1999

Beneficiary Characteristics	Rx \$ per Bene Mo	No. of Rx per Bene Mo	No. of All-Year NF Residents	Bene Mos among All-Year NF Residents
<b>All</b>	<b>\$25</b>	<b>0.3</b>	<b>10,494</b>	<b>110,873</b>
<b>Age</b>				
0-64	28	0.3	690	7,790
65-74	31	0.3	1,269	13,775
75-84	27	0.3	3,629	37,950
85 and older	21	0.3	4,902	51,318
Unknown	58	0.5	4	40
<b>Gender</b>				
Female	23	0.3	8,111	86,198
Male	32	0.3	2,383	24,675
Unknown	0	0.0	0	0
<b>Race</b>				
White	26	0.3	7,077	73,255
African American	23	0.3	3,025	33,210
Other/unknown	21	0.2	392	4,408
<b>Basis of Eligibility</b>				
Aged	24	0.3	9,791	103,009
Disabled	28	0.3	701	7,851
Adults	0	0.0	0	0
Children	0	0.0	0	0
Unknown	42	1.4	2	13

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

a. Table 17 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their 1999 Medicaid enrollment. A total of 5,969 beneficiaries who were in nursing facilities for part of their enrollment and their 53,061 benefit months were excluded from the analysis. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

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

TABLE 18  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,  
 BY BRAND STATUS AND THERAPEUTIC CATEGORY<sup>a, b, c, d, e</sup>  
 DUAL ELIGIBLE BENEFICIARIES, SOUTH CAROLINA, 1999

Therapeutic Category	No. of Rx per Bene Mo among Users			\$ per Bene Mo among Users			Total # of Rx	Total Rx \$	No. Residents	As % of Dual All-Year NF Residents	No. of Bene Mos						
	Total	Patented	Off-Patent	Total	Patented	Off-Patent											
	Brand-Name	Brand-Name	Brand-Name	Brand-Name	Brand-Name	Brand-Name											
Anti-infective Agents	0.2	0.1	0.0	0.0	\$19	\$18	\$0	\$1	\$113	\$139	\$102	\$27	3,564	\$401,300	1,901	18.1 %	20,697
Biologicals	0.0	0.0	0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0.0	0
Antineoplastic Agents	0.2	0.0	0.1	0.1	39	13	19	7	218	299	271	110	113	24,624	59	0.6	637
Endocrine/Metabolic Drugs	0.3	0.2	0.0	0.2	19	14	0	4	56	92	20	26	1,784	100,599	484	4.6	5,355
Cardiovascular Agents	0.5	0.1	0.1	0.3	30	12	9	10	62	97	78	39	6,715	417,541	1,240	11.8	13,729
Respiratory Agents	0.3	0.1	0.0	0.2	21	11	1	9	71	98	56	53	1,490	105,373	461	4.4	5,127
Gastrointestinal Agents	0.3	0.1	0.1	0.1	46	29	8	9	147	214	157	74	2,708	397,558	765	7.3	8,589
Genitourinary Agents	0.2	0.1	0.0	0.1	20	15	1	4	84	100	57	58	543	45,620	206	2.0	2,288
CNS Drugs	0.5	0.2	0.1	0.2	48	32	10	7	104	161	169	34	5,217	544,076	1,028	9.8	11,267
Stimulants/Anti-obesity/Anorexia	0.5	0.0	0.1	0.3	13	0	7	6	28	0	51	19	38	1,058	8	0.1	81
Miscellaneous Psychological/Neurological Agents	0.3	0.3	0.0	0.0	62	61	0	1	234	237	0	109	242	56,589	85	0.8	918
Analgesics and Anesthetics	0.3	0.1	0.0	0.2	22	14	2	6	71	129	109	32	2,131	150,486	618	5.9	6,851
Neuromuscular Agents	0.3	0.1	0.1	0.2	35	13	8	13	102	185	90	75	1,723	176,408	447	4.3	5,015
Nutritional Products	0.2	0.0	0.0	0.2	8	0	2	6	35	12	51	31	895	31,010	352	3.4	3,932
Hematological Agents	0.3	0.0	0.2	0.1	27	12	9	6	88	288	50	72	913	80,728	282	2.7	3,014
Topical Products	0.2	0.1	0.0	0.1	11	7	2	2	46	64	51	19	2,040	93,434	746	7.1	8,373
Miscellaneous Products	0.3	0.0	0.0	0.2	23	1	0	22	92	36	0	99	65	5,948	24	0.2	259
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	17	0	0	0	75	0	0	0	1,378	102,937	541	5.2	6,069
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.	31,559	2,735,289	n.a.	n.a.	n.a.

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

- a. Table 18 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 1999. A total of 5,969 beneficiaries who were in nursing facilities for part of their enrollment and their 53,061 benefit months were excluded from the analysis.
- b. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 1999. A beneficiary who used drugs from two or more categories was counted as a user for each category. Therefore, the sum of users across categories may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- c. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
- d. For information about these therapeutic categories, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).
- e. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. For information about this classification method, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003). In South Carolina, 4.3 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.

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

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

Beneficiary Characteristics	No. of Benes					No. of Bene Mos					
	All	Aged	Disabled	Adults	Children	All	Aged	Disabled	Adults	Children	Unknown
<b>All</b>	<b>118,774</b>	<b>75,521</b>	<b>42,839</b>	<b>398</b>	<b>9</b>	<b>1,295,285</b>	<b>816,458</b>	<b>475,095</b>	<b>3,591</b>	<b>101</b>	<b>40</b>
<b>Age</b>											
5 and younger	6	2	4	0	0	61	24	37	0	0	0
6-14	16	0	15	0	1	190	0	178	0	12	0
15-20	185	0	178	2	5	2,040	0	1,956	24	60	0
21-44	17,659	19	17,334	302	2	195,937	175	192,936	2,789	24	13
45-64	25,152	86	24,981	84	0	279,185	846	277,634	700	0	5
65-74	29,573	29,309	255	7	0	323,751	321,877	1,819	51	0	4
75-84	28,479	28,428	48	2	0	309,596	309,253	314	17	0	12
85 and older	17,696	17,670	24	1	1	184,454	184,218	221	10	5	0
Unknown	8	7	0	0	0	71	65	0	0	0	6
<b>Gender</b>											
Female	80,430	57,971	22,197	256	2	883,572	633,244	247,913	2,365	24	26
Male	38,342	17,549	20,641	142	7	411,689	183,202	227,170	1,226	77	14
Unknown	2	1	1	0	0	24	12	12	0	0	0
<b>Race</b>											
White	52,391	32,779	19,408	196	3	557,153	341,560	213,813	1,729	29	22
African American	55,900	35,572	20,123	197	6	621,385	394,526	224,940	1,829	72	18
Other/unknown	10,483	7,170	3,308	5	0	116,747	80,372	36,342	33	0	0
<b>Use of Nursing Facilities</b>											
All year	10,494	9,791	701	0	0	110,873	103,009	7,851	0	0	13
Part year	5,969	5,517	452	0	0	53,128	48,787	4,341	0	0	0
None	102,311	60,213	41,686	398	9	1,131,284	664,662	462,903	3,591	101	27
<b>Maintenance Assistance Status</b>											
Cash	56,417	34,524	21,677	216	0	640,135	393,351	244,897	1,887	0	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0
Poverty related	40,162	23,196	16,911	52	3	435,220	250,933	183,867	391	29	0
Other/unknown	22,195	17,801	4,251	130	6	219,930	172,174	46,331	1,313	72	40
<b>Dual Status<sup>c</sup></b>											
Full dual, all year	118,774	75,521	42,839	398	9	1,295,285	816,458	475,095	3,591	101	40
Full dual, part year	0	0	0	0	0	0	0	0	0	0	0
<b>Managed Care Status</b>											
FFS all year	118,183	75,080	42,706	381	9	1,288,812	811,646	473,607	3,418	101	40
FFS part year, with Rx claims	150	65	73	12	0	1,711	737	841	133	0	0
FFS part year, no Rx claims	58	50	7	1	0	495	434	54	7	0	0
MC all year, with Rx claims	17	0	14	3	0	182	0	161	21	0	0
MC all year, no Rx claims	366	326	39	1	0	4,085	3,641	432	12	0	0

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

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

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

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

Bene(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, SOUTH CAROLINA, 1999

Beneficiary Characteristics	Bene Mos in Cell F of Table 1		Included in Cell G of Table 1		Excluded from Cell G of Table 1	
	No. of Benes	No. of Bene Mos	No. of Benes	No. of Bene Mos	No. of Benes	No. of Bene Mos
<b>All</b>	<b>118,774</b>	<b>1,295,285</b>	<b>118,391</b>	<b>1,289,934</b>	<b>383</b>	<b>5,351</b>
FFS all year	118,183	1,288,812	118,183	1,288,812	0	0
FFS part year, with Rx claims	150	1,711	150	943	0	768
FFS part year, with no Rx claims	58	495	58	179	0	316
MC all year, with Rx claims	17	182	0	0	17	182
MC all year, with no Rx claims	366	4,085	0	0	366	4,085

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

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

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

Total Number of Dual Eligible Beneficiaries 118,391  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries \$151,285,610  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary \$1,278

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	21,086	17.8 %	\$0	0.0 %
1-500	27,879	23.5	6,032,700	4.0
501-1,000	18,406	15.5	13,671,002	9.0
1,001-1,500	14,405	12.2	17,885,810	11.8
1,501-2,000	10,673	9.0	18,531,321	12.2
2,001-2,500	7,780	6.6	17,387,519	11.5
2,501-3,000	5,421	4.6	14,832,471	9.8
3,001-3,500	3,689	3.1	11,938,332	7.9
3,501-4,000	2,561	2.2	9,561,642	6.3
4,001-4,500	1,718	1.5	7,277,063	4.8
4,501-5,000	1,145	1.0	5,430,727	3.6
5,001-5,500	800	0.7	4,192,887	2.8
5,501-6,000	597	0.5	3,423,095	2.3
6,001-6,500	421	0.4	2,625,775	1.7
6,501-7,000	330	0.3	2,225,271	1.5
7,001-7,500	249	0.2	1,800,728	1.2
7,501-8,000	175	0.1	1,354,305	0.9
8,001-8,500	141	0.1	1,163,358	0.8
8,501-9,000	111	0.1	970,480	0.6
9,001-9,500	89	0.1	820,637	0.5
9,501-10,000	71	0.1	690,330	0.5
10,001+	644	0.5	9,470,157	6.3

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

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

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

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

Total Number of Disabled Dual Eligible Beneficiaries, Age < 65 42,460  
 Total Pharmacy Reimbursement for Disabled Dual Eligible Beneficiaries, Age < 65 \$69,819,518  
 Mean Pharmacy Reimbursement per Disabled Dual Eligible Beneficiary, Age < 65 \$1,644

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age < 65	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	5,860	13.8 %	0	0.0 %
1-500	10,578	24.9	2,121,768	3.0
501-1,000	5,932	14.0	4,391,087	6.3
1,001-1,500	4,533	10.7	5,628,805	8.1
1,501-2,000	3,559	8.4	6,187,962	8.9
2,001-2,500	2,846	6.7	6,383,469	9.1
2,501-3,000	2,090	4.9	5,723,617	8.2
3,001-3,500	1,589	3.7	5,147,603	7.4
3,501-4,000	1,233	2.9	4,607,016	6.6
4,001-4,500	878	2.1	3,724,287	5.3
4,501-5,000	633	1.5	3,003,708	4.3
5,001-5,500	481	1.1	2,520,440	3.6
5,501-6,000	396	0.9	2,271,515	3.3
6,001-6,500	305	0.7	1,903,354	2.7
6,501-7,000	256	0.6	1,726,825	2.5
7,001-7,500	192	0.5	1,388,599	2.0
7,501-8,000	146	0.3	1,128,831	1.6
8,001-8,500	124	0.3	1,023,877	1.5
8,501-9,000	91	0.2	796,434	1.1
9,001-9,500	80	0.2	738,094	1.1
9,501-10,000	67	0.2	651,126	0.9
10,001+	591	1.4	8,751,101	12.5

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

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

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

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

SUPPLEMENTAL TABLE 1B  
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 TO 74<sup>a, b</sup>  
 SOUTH CAROLINA, 1999

Total Number of Dual Eligible Beneficiaries, Age 65-74 29,501  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65-74 \$37,301,190  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65-74 \$1,264

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 65-74	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	4,037	13.7 %	0	0.0
1-500	6,578	22.3	1,464,061	3.9
501-1,000	4,920	16.7	3,669,020	9.8
1,001-1,500	4,190	14.2	5,209,346	14.0
1,501-2,000	3,077	10.4	5,342,398	14.3
2,001-2,500	2,182	7.4	4,871,115	13.1
2,501-3,000	1,591	5.4	4,348,764	11.7
3,001-3,500	1,039	3.5	3,364,181	9.0
3,501-4,000	658	2.2	2,460,310	6.6
4,001-4,500	439	1.5	1,858,390	5.0
4,501-5,000	275	0.9	1,302,220	3.5
5,001-5,500	179	0.6	938,006	2.5
5,501-6,000	108	0.4	620,017	1.7
6,001-6,500	60	0.2	373,781	1.0
6,501-7,000	44	0.1	295,952	0.8
7,001-7,500	37	0.1	267,946	0.7
7,501-8,000	18	0.1	140,485	0.4
8,001-8,500	13	0.0	106,659	0.3
8,501-9,000	12	0.0	104,760	0.3
9,001-9,500	6	0.0	55,167	0.1
9,501-10,000	2	0.0	19,720	0.1
10,001+	36	0.1	488,892	1.3

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

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

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

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

Total Number of Dual Eligible Beneficiaries, Age 75-84 28,356  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 75-84 \$30,726,752  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 75-84 \$1,084

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 75-84	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	5,468	19.3 %	0	0.0 %
1-500	6,200	21.9	1,449,091	4.7
501-1,000	4,831	17.0	3,593,723	11.7
1,001-1,500	3,782	13.3	4,693,842	15.3
1,501-2,000	2,790	9.8	4,836,003	15.7
2,001-2,500	1,956	6.9	4,361,588	14.2
2,501-3,000	1,266	4.5	3,469,332	11.3
3,001-3,500	789	2.8	2,546,564	8.3
3,501-4,000	496	1.7	1,845,171	6.0
4,001-4,500	311	1.1	1,314,698	4.3
4,501-5,000	179	0.6	848,528	2.8
5,001-5,500	107	0.4	561,184	1.8
5,501-6,000	70	0.2	400,124	1.3
6,001-6,500	46	0.2	286,353	0.9
6,501-7,000	21	0.1	141,289	0.5
7,001-7,500	17	0.1	122,616	0.4
7,501-8,000	8	0.0	61,660	0.2
8,001-8,500	3	0.0	24,819	0.1
8,501-9,000	7	0.0	60,768	0.2
9,001-9,500	1	0.0	9,090	0.0
9,501-10,000	1	0.0	9,789	0.0
10,001+	7	0.0	90,520	0.3

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

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

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

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

Total Number of Dual Eligible Beneficiaries, Age 85+ 17,564  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 85+ \$12,839,635  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 85+ \$731

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 85+	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	5,648	32.2 %	0	0.0 %
1-500	4,331	24.7	962,258	7.5
501-1,000	2,655	15.1	1,965,490	15.3
1,001-1,500	1,854	10.6	2,297,438	17.9
1,501-2,000	1,208	6.9	2,097,874	16.3
2,001-2,500	770	4.4	1,712,544	13.3
2,501-3,000	460	2.6	1,252,160	9.8
3,001-3,500	258	1.5	834,583	6.5
3,501-4,000	164	0.9	612,738	4.8
4,001-4,500	85	0.5	358,926	2.8
4,501-5,000	53	0.3	252,860	2.0
5,001-5,500	29	0.2	152,312	1.2
5,501-6,000	19	0.1	108,328	0.8
6,001-6,500	8	0.0	49,744	0.4
6,501-7,000	9	0.1	61,205	0.5
7,001-7,500	2	0.0	14,472	0.1
7,501-8,000	3	0.0	23,329	0.2
8,001-8,500	1	0.0	8,003	0.1
8,501-9,000	2	0.0	18,286	0.1
9,001-9,500	1	0.0	9,695	0.1
9,501-10,000	4	0.0	47,390	0.4
10,001+				

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

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

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