

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

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TABLE 11
 CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a, b}
 DUAL ELIGIBLE BENEFICIARIES, TEXAS, 1999

Beneficiary Characteristics	No. of Benefes							No. of Bene Mos											
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown	
All	334,309	249,709	83,580	1,001	19	0	3,545,963	2,638,832	900,186	6,779	166	0	3,545,963	2,638,832	900,186	6,779	166	0	
Age																			
5 and younger	74	46	20	0	8	0	470	192	213	0	65	0	470	192	213	0	65	0	0
6-14	104	9	88	0	7	0	1,024	34	919	0	71	0	1,024	34	919	0	71	0	0
15-20	488	0	477	7	4	0	5,149	0	5,079	40	30	0	5,149	0	5,079	40	30	0	0
21-44	36,510	5	35,865	640	0	0	389,311	55	384,966	4,290	0	0	389,311	55	384,966	4,290	0	0	0
45-64	45,622	26	45,282	314	0	0	492,222	227	489,861	2,134	0	0	492,222	227	489,861	2,134	0	0	0
65-74	99,553	98,170	1,345	38	0	0	1,071,837	1,057,977	13,565	295	0	0	1,071,837	1,057,977	13,565	295	0	0	0
75-84	85,248	84,881	365	2	0	0	911,789	907,710	4,059	20	0	0	911,789	907,710	4,059	20	0	0	0
85 and older	66,710	66,572	138	0	0	0	674,161	672,637	1,524	0	0	0	674,161	672,637	1,524	0	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Gender																			
Female	224,309	179,738	43,948	610	13	0	2,392,458	1,911,387	476,753	4,189	129	0	2,392,458	1,911,387	476,753	4,189	129	0	0
Male	110,000	69,971	39,632	391	6	0	1,153,505	727,445	423,433	2,590	37	0	1,153,505	727,445	423,433	2,590	37	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Race																			
White	169,154	126,337	42,457	356	4	0	1,782,339	1,316,484	463,659	2,148	48	0	1,782,339	1,316,484	463,659	2,148	48	0	0
African American	53,962	35,736	17,997	225	4	0	568,353	377,844	188,914	1,572	23	0	568,353	377,844	188,914	1,572	23	0	0
Other/unknown	111,193	87,636	23,126	420	11	0	1,195,271	944,504	247,613	3,059	95	0	1,195,271	944,504	247,613	3,059	95	0	0
Use of Nursing Facilities																			
All year	57,155	53,724	3,430	1	0	0	579,475	542,112	37,359	4	0	0	579,475	542,112	37,359	4	0	0	0
Part year	26,666	24,504	2,161	1	0	0	257,454	235,475	21,967	12	0	0	257,454	235,475	21,967	12	0	0	0
None	250,488	171,481	77,989	999	19	0	2,709,034	1,861,245	840,860	6,763	166	0	2,709,034	1,861,245	840,860	6,763	166	0	0
Maintenance Assistance Status																			
Cash	219,643	155,914	63,218	511	0	0	2,393,719	1,715,502	674,598	3,619	0	0	2,393,719	1,715,502	674,598	3,619	0	0	0
Medically needy	239	0	0	238	1	0	1,501	0	0	1,493	8	0	1,501	0	0	1,493	8	0	0
Poverty-related	2,606	1,357	1,080	162	7	0	25,666	13,994	10,666	943	63	0	25,666	13,994	10,666	943	63	0	0
Other/unknown	111,821	92,438	19,282	90	11	0	1,125,077	909,336	214,922	724	95	0	1,125,077	909,336	214,922	724	95	0	0
Dual Medicare Status^c																			
Full dual, all year	327,251	244,506	81,731	995	19	0	3,475,448	2,587,135	881,435	6,712	166	0	3,475,448	2,587,135	881,435	6,712	166	0	0
Full dual, part year	7,058	5,203	1,849	6	0	0	70,515	51,697	18,751	67	0	0	70,515	51,697	18,751	67	0	0	0
Managed Care Status																			
FFS all year	306,613	231,018	74,705	873	17	0	3,299,602	2,472,211	821,105	6,130	156	0	3,299,602	2,472,211	821,105	6,130	156	0	0
FFS part year, with Rx claims	24,499	16,475	7,903	119	2	0	219,738	148,219	70,893	616	10	0	219,738	148,219	70,893	616	10	0	0
FFS part year, no Rx claims	3,197	2,216	972	9	0	0	26,623	18,402	8,188	33	0	0	26,623	18,402	8,188	33	0	0	0

Source: Data for this table are from the MAX 1999 file for Texas, 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^{a,b}
 DUAL ELIGIBLE BENEFICIARIES, TEXAS, 1999

Beneficiary Characteristics	% with at Least One Rx	Mean No. of Rx	Mean Rx \$	\$ per Rx	Mean \$, All Services	Rx \$ as % of All Services	Mean OTC Drug \$ ^c	No. of Beneficiaries
All	88.4 %	28.2	\$1,354	\$48	\$10,892	12.4 %	\$29	334,309
Age								
5 and younger	78.4	20.4	1,193	59	8,597	13.9	20	74
6-14	91.3	32.6	4,820	148	12,849	37.5	37	104
15-20	80.1	19.8	1,972	100	11,098	17.8	17	488
21-44	79.3	16.0	1,291	81	12,662	10.2	15	36,510
45-64	87.1	25.9	1,527	59	13,247	11.5	43	45,622
65-74	86.5	23.8	1,203	51	7,114	16.9	35	99,553
75-84	90.9	32.2	1,417	44	10,423	13.6	30	85,248
85 and older	93.8	38.0	1,404	37	14,547	9.7	15	66,710
Unknown	0.0	0.0	0	0	0	0.0	0	0
Basis of Eligibility								
Aged	89.9	30.5	1,329	44	10,204	13.0	28	249,709
Disabled	83.8	21.7	1,434	66	13,021	11.0	31	83,580
Adults	83.7	12.7	803	63	4,485	17.9	21	1,001
Children	100.0	37.1	4,636	125	24,129	19.2	58	19
Unknown	0.0	0.0	0	0	0	0.0	0	0
Gender								
Female	91.2	30.8	1,422	46	10,876	13.1	32	224,309
Male	82.6	22.9	1,214	53	10,923	11.1	22	110,000
Unknown	0.0	0.0	0	0	0	0.0	0	0
Race								
White	89.6	34.3	1,565	46	13,178	11.9	24	169,154
African American	88.3	24.9	1,192	48	10,327	11.5	34	53,962
Other/unknown	86.5	20.6	1,111	54	7,688	14.5	32	111,193
Use of Nursing Facilities								
Entire year	97.4	57.8	2,177	38	21,933	9.9	25	57,155
Part year	95.2	44.8	1,794	40	17,319	10.4	25	26,666
None	85.6	19.7	1,119	57	7,688	14.6	30	250,488
Maintenance Assistance Status								
Cash	87.0	18.9	1,084	57	5,816	18.6	28	219,643
Medically needy	78.2	9.1	711	78	5,854	12.2	18	239
Poverty related	76.6	9.9	537	54	3,788	14.2	15	2,606
Other/unknown	91.3	47.1	1,904	41	21,039	9.1	30	111,821

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

Table 12

Dual Eligible Beneficiaries

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

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

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

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

TABLE 13
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a,b}
 DUAL ELIGIBLE BENEFICIARIES, TEXAS, 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	2.7	\$128	12.4 %	11.6 %	26.1 %	21.8 %	26.8 %	10.5 %	3.1 %	\$1,027	334,309	3,545,963
Age												
5 and younger	3.2	188	13.9	21.6	13.5	21.6	24.3	17.6	1.4	1,354	74	470
6-14	3.3	490	37.5	8.7	23.1	15.4	36.5	15.4	1.0	1,305	104	1,024
15-20	1.9	187	17.8	19.9	38.5	15.0	19.1	6.1	1.4	1,052	488	5,149
21-44	1.5	121	10.2	20.7	36.8	20.9	18.2	2.1	1.3	1,187	36,510	389,311
45-64	2.4	142	11.5	12.9	25.3	24.6	28.4	6.0	2.9	1,228	45,622	492,222
65-74	2.2	112	16.9	13.5	30.0	24.2	23.5	6.2	2.5	661	99,553	1,071,837
75-84	3.0	133	13.6	9.1	23.9	21.6	28.1	13.3	3.9	975	85,248	911,789
85 and older	3.8	139	9.7	6.2	17.9	17.2	33.9	20.9	4.0	1,440	66,710	674,161
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	2.9	126	13.0	10.1	24.7	21.5	27.8	12.6	3.4	966	249,709	2,638,832
Disabled	2.0	133	11.0	16.2	30.3	22.9	24.0	4.4	2.2	1,209	83,580	900,186
Adults	1.9	119	17.9	16.3	36.8	21.8	18.9	3.6	2.7	662	1,001	6,779
Children	4.2	531	19.2	0.0	21.1	10.5	36.8	31.6	0.0	2,762	19	166
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Gender												
Female	2.9	133	13.1	8.8	23.9	22.8	29.4	11.6	3.5	1,020	224,309	2,392,458
Male	2.2	116	11.1	17.5	30.6	19.8	21.6	8.3	2.2	1,042	110,000	1,153,505
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	3.3	149	11.9	10.4	21.0	19.1	29.8	15.2	4.5	1,251	169,154	1,782,339
African American	2.4	113	11.5	11.7	27.8	23.0	27.5	7.6	2.3	981	53,962	568,353
Other/unknown	1.9	103	14.5	13.5	33.2	25.4	21.9	4.8	1.3	715	111,193	1,195,271
Use of Nursing Facilities												
Entire year	5.7	215	9.9	2.6	6.9	9.2	35.9	36.5	9.0	2,163	57,155	579,475
Part year	4.6	186	10.4	4.8	12.4	13.4	36.4	25.8	7.2	1,794	26,666	257,454
None	1.8	104	14.6	14.4	32.0	25.6	23.7	2.9	1.3	711	250,488	2,709,034
Maintenance Assistance Status												
Cash	1.7	100	18.6	13.0	33.1	26.9	24.0	2.0	0.9	534	219,643	2,393,719
Medically needy	1.5	113	12.2	21.8	40.2	20.1	16.7	1.3	0.0	932	239	1,501
Poverty related	1.0	55	14.2	23.4	52.0	15.5	6.3	1.9	1.0	385	2,606	25,666
Other/unknown	4.7	189	9.1	8.7	11.8	12.0	32.9	27.4	7.3	2,091	111,821	1,125,077

Source: Data for this table are from the MAX 1999 file for Texas, 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^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, TEXAS, 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	2.7	\$128	\$48	1.0	\$79	\$81	0.5	\$25	\$53	1.1	\$18	\$16
Age												
5 and younger	3.2	188	59	1.1	143	130	0.5	22	40	1.4	21	14
6-14	3.3	490	148	1.3	393	305	0.8	81	108	1.2	14	12
15-20	1.9	187	100	0.7	138	198	0.3	32	94	0.8	12	16
21-44	1.5	121	81	0.6	85	146	0.2	21	94	0.6	11	18
45-64	2.4	142	59	0.9	92	97	0.4	26	70	1.0	17	18
65-74	2.2	112	51	0.9	71	79	0.4	20	56	0.8	14	17
75-84	3.0	133	44	1.1	80	72	0.5	27	48	1.2	19	16
85 and older	3.8	139	37	1.2	78	65	0.7	30	40	1.7	24	14
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility												
Aged	2.9	126	44	1.1	76	72	0.5	25	48	1.2	19	16
Disabled	2.0	133	66	0.8	89	113	0.3	24	77	0.8	15	18
Adults	1.9	119	63	0.7	79	115	0.3	20	76	0.8	14	17
Children	4.2	531	125	1.7	472	270	0.6	35	62	1.8	23	12
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Gender												
Female	2.9	133	46	1.1	82	77	0.5	26	51	1.2	19	16
Male	2.2	116	53	0.8	73	92	0.4	23	58	0.9	15	17
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Race												
White	3.3	149	46	1.2	91	79	0.6	29	50	1.4	22	16
African American	2.4	113	48	0.8	69	84	0.4	23	56	1.0	16	15
Other/unknown	1.9	103	54	0.8	67	83	0.3	19	59	0.7	12	17
Use of Nursing Facilities												
Entire year	5.7	215	38	1.8	124	68	1.1	43	41	2.6	37	15
Part year	4.6	186	40	1.6	113	70	0.8	35	42	2.0	30	15
None	1.8	104	57	0.7	67	90	0.3	20	65	0.7	12	17
Maintenance Assistance Status												
Cash	1.7	100	57	0.7	64	90	0.3	19	66	0.6	11	18
Medically needy	1.5	113	78	0.6	82	133	0.2	15	73	0.6	12	21
Poverty related	1.0	55	54	0.4	35	90	0.2	10	61	0.4	7	16
Other/unknown	4.7	189	41	1.6	113	72	0.9	37	44	2.1	31	15

Source: Data for this table are from the MAX 1999 file for Texas, 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 Texas, 4.0 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).

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, TEXAS, 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 Bene Mos			
															Generic	Patented Brand-Name	Off-Patent Brand-Name
Anti-infective Agents	0.3	0.1	0.0	0.1	\$15	\$14	\$0	\$1	\$59	\$93	\$55	\$12	487,566	\$28,924,550	174,352	52.2 %	1,915,547
Biologics	0.1	0.0	0.0	0.1	24	21	0	3	234	516	0	47	5	1,172	4	0.0	48
Antineoplastic Agents	0.4	0.1	0.2	0.1	60	27	27	5	141	229	157	39	55,587	7,852,047	12,649	3.8	131,028
Endocrine/Metabolic Drugs	0.6	0.3	0.1	0.2	25	21	2	2	40	62	19	13	875,322	34,943,301	124,540	37.3	1,372,181
Cardiovascular Agents	1.1	0.4	0.3	0.4	42	23	13	7	39	62	46	15	2,381,874	93,064,414	201,584	60.3	2,196,004
Respiratory Agents	0.4	0.2	0.0	0.2	16	11	1	4	37	55	37	19	609,444	22,356,206	129,836	38.8	1,425,130
Gastrointestinal Agents	0.5	0.2	0.1	0.2	34	23	7	4	63	99	72	19	656,582	41,279,496	110,913	33.2	1,209,451
Genitourinary Agents	0.3	0.2	0.0	0.1	14	11	0	2	41	58	34	18	142,192	5,815,088	37,746	11.3	416,070
CNS Drugs	0.9	0.4	0.1	0.4	53	37	10	6	62	102	104	15	1,277,508	78,827,261	138,433	41.4	1,497,392
Stimulants/Anti-obesity/Anorexia	0.4	0.0	0.1	0.2	23	5	10	8	60	93	79	41	3,688	222,267	903	0.3	9,639
Miscellaneous Psychological/Neurological Agents	0.5	0.5	0.0	0.1	57	54	0	2	107	120	105	30	73,115	7,826,411	12,706	3.8	136,815
Analgesics and Anesthetics	0.5	0.1	0.1	0.3	23	13	5	4	46	97	80	14	845,546	38,729,647	155,137	46.4	1,712,324
Neuromuscular Agents	0.7	0.2	0.2	0.3	35	20	9	7	51	107	50	21	488,261	25,058,066	64,599	19.3	708,421
Nutritional Products	0.5	0.0	0.2	0.3	9	0	5	3	18	20	27	12	321,306	5,861,781	59,251	17.7	634,621
Hematological Agents	0.6	0.1	0.2	0.3	33	19	8	7	59	181	39	25	311,795	18,313,276	51,801	15.5	559,505
Topical Products	0.4	0.2	0.1	0.1	13	8	3	2	36	50	39	14	475,104	16,976,242	121,927	36.5	1,351,685
Miscellaneous Products	0.4	0.1	0.1	0.2	88	44	38	5	240	470	333	34	17,232	4,139,111	4,519	1.4	47,218
Unknown Therapeutic Category	0.4	0.0	0.0	0.0	19	0	0	0	54	0	0	0	412,285	22,394,311	106,927	32.0	1,177,868
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.	9,434,412	452,584,647	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 1999 file for Texas, 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 (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 Texas, 4.0 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, TEXAS, 1999

Top 10 Drug Groups	Users			Among Users			
	Total Medicaid Rx \$	No.	As % of Dual Benes	No. of Bene Mos	No. of Rx per Bene Mo	\$ per Rx	Rx \$ per Bene Mo
ANTIPSYCHOTICS	\$35,040,349	53,475	16.0 %	582,850	0.5	\$113	\$60
ULCER DRUGS	30,926,104	98,021	29.3	1,088,136	0.4	72	28
ANTIDEPRESSANTS	29,240,912	92,168	27.6	1,010,337	0.5	58	29
ANTIHYPERTENSIVE	27,108,608	117,781	35.2	1,310,839	0.5	43	21
ANTIDIABETIC	26,195,145	96,552	28.9	1,086,088	0.5	51	24
CALCIUM BLOCKERS	23,749,048	70,116	21.0	782,014	0.5	58	30
ANALGESICS - ANTI-INFLAMMATORY	23,324,049	109,402	32.7	1,256,561	0.3	70	19
ANTHYPERLIPIDEMIC	19,260,539	44,430	13.3	509,165	0.4	91	38
ANTICONVULSANT	17,191,586	42,724	12.8	474,956	0.6	59	36
ANALGESICS - Narcotic	13,360,043	126,607	37.9	1,408,244	0.3	30	9

Source: Data for this table are from the MAX 1999 file for Texas, 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 (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, TEXAS, 1999

Beneficiary Characteristics	All Top 10 Drug Groups				ANTIPSYCHOTICS				ULCER DRUGS			
	No. of Rx	Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
All	4,071,670	\$245,396,383	53,475	16.0 %	582,850	0.5	\$60	98,021	29.3 %	1,088,136	0.4	\$28
Female	2,949,532	173,314,428	34,446	15.4	375,713	0.5	54	71,438	31.8	796,634	0.4	28
Disabled	501,591	39,010,546	8,039	18.3	91,507	0.5	79	11,912	27.1	136,314	0.3	25
5 and younger	33	1,109	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	342	18,089	1	2.3	12	0.1	2	9	20.5	102	0.2	16
15-20	1,560	110,086	22	10.3	239	0.6	89	46	21.5	527	0.3	18
21-44	128,726	11,591,179	3,409	21.7	39,048	0.4	85	2,867	18.3	32,792	0.3	22
45-64	354,952	26,297,635	4,458	16.6	50,661	0.5	75	8,591	32.0	98,518	0.3	25
65-74	12,111	763,015	109	12.8	1,105	0.6	67	287	33.6	3,123	0.3	24
75-84	2,933	179,385	28	11.4	306	0.6	47	83	33.7	933	0.3	29
85 and older	934	50,048	12	11.9	136	0.4	44	29	28.7	319	0.3	24
Other Eligibles	2,447,941	134,303,882	26,407	14.6	284,206	0.5	45	59,526	33.0	660,320	0.4	29
5 and younger	133	5,683	1	2.2	5	0.2	14	7	15.6	44	0.5	27
6-14	67	2,928	2	13.3	12	0.3	9	1	6.7	3	0.3	30
15-20	50	8,278	1	11.1	12	0.8	254	1	11.1	7	0.1	14
21-44	2,343	172,284	42	9.2	392	0.3	40	62	13.5	623	0.2	17
45-64	1,090	94,082	17	12.1	151	0.3	64	38	27.0	375	0.2	17
65-74	796,468	49,948,008	5,892	9.1	65,646	0.5	58	19,447	30.0	222,097	0.3	25
75-84	897,364	48,886,347	9,597	15.7	103,720	0.6	47	20,833	34.1	232,179	0.4	30
85 and older	750,426	35,186,272	10,855	20.2	114,268	0.5	36	19,137	35.7	204,992	0.5	34
Male	1,122,138	72,081,955	19,029	17.3	207,137	0.5	72	26,583	24.2	291,502	0.4	29
Disabled	375,609	30,714,639	8,941	22.6	101,988	0.5	99	7,266	18.3	82,324	0.3	27
5 and younger	106	4,772	0	0.0	0	0.0	0	4	25.0	47	0.2	11
6-14	357	19,443	1	2.3	12	1.4	144	12	27.3	137	0.3	8
15-20	1,869	158,610	45	17.1	501	0.5	95	39	14.8	448	0.4	24
21-44	147,809	14,713,844	5,067	25.1	58,184	0.5	107	2,689	13.3	30,771	0.3	26
45-64	218,011	15,401,902	3,737	20.2	42,344	0.6	88	4,349	23.5	49,112	0.4	28
65-74	6,167	354,331	77	15.7	797	0.6	76	146	29.7	1,511	0.5	29
75-84	1,057	54,302	12	10.1	126	0.4	28	24	20.2	262	0.6	31
85 and older	233	7,435	2	5.4	24	0.6	13	3	8.1	36	0.2	11
Other Eligibles	746,529	41,367,316	10,088	14.3	105,149	0.5	46	19,317	27.5	209,178	0.4	29
5 and younger	34	1,255	0	0.0	0	0.0	0	3	33.3	17	0.3	21
6-14	11	942	0	0.0	0	0.0	0	1	100.0	12	0.1	6
15-20	7	787	1	50.0	3	1.0	193	0	0.0	0	0.0	0
21-44	1,024	70,123	9	4.8	85	0.3	93	30	16.0	272	0.2	16
45-64	1,252	84,850	6	3.0	47	0.1	16	47	23.6	453	0.3	25
65-74	327,522	19,475,540	3,297	9.9	35,879	0.6	58	7,990	24.0	89,313	0.4	27
75-84	271,217	14,625,592	3,985	16.8	40,994	0.5	43	6,923	29.1	74,599	0.4	29
85 and older	145,462	7,108,227	2,790	21.6	28,141	0.5	36	4,323	33.5	44,512	0.5	34
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 Texas, 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 (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, TEXAS, 1999

Beneficiary Characteristics	ANTIDEPRESSANTS					ANTIHYPERTENSIVE					ANTI-DIABETIC				
	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
All	92,168	27.6 %	1,010,337	0.5	\$29	117,781	35.2 %	1,310,839	0.5	\$21	96,552	28.9 %	1,086,088	0.5	\$24
Female	68,531	30.6	754,524	0.5	29	84,636	37.7	944,731	0.5	21	70,172	31.3	791,811	0.5	24
Disabled	16,785	38.2	190,972	0.4	30	11,718	26.7	132,999	0.4	19	12,385	28.2	141,595	0.4	27
5 and younger	0	0.0	0	0.0	0	2	50.0	24	0.6	4	0	0.0	0	0.0	0
6-14	2	4.5	24	0.8	17	22	50.0	244	0.5	19	3	6.8	32	0.1	6
15-20	38	17.8	430	0.4	26	65	30.4	723	0.4	21	6	2.8	61	0.5	27
21-44	5,486	35.0	62,545	0.4	30	1,892	12.1	21,187	0.3	17	1,781	11.4	20,417	0.4	26
45-64	10,971	40.9	124,925	0.4	30	9,203	34.3	104,880	0.4	19	9,993	37.3	114,349	0.4	27
65-74	235	27.5	2,464	0.5	27	400	46.8	4,416	0.4	19	478	56.0	5,313	0.5	27
75-84	38	15.4	411	0.4	21	95	38.6	1,095	0.4	19	102	41.5	1,166	0.5	26
85 and older	15	14.9	173	0.5	28	39	38.6	430	0.5	17	22	21.8	257	0.5	25
Other Eligibles	51,746	28.7	563,552	0.5	20	72,918	40.4	811,732	0.5	21	57,787	32.0	650,216	0.5	24
5 and younger	0	0.0	0	0.0	0	14	31.1	75	0.4	13	3	6.7	12	0.6	24
6-14	1	6.7	12	0.8	63	8	53.3	57	0.4	10	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	1	11.1	12	0.8	118	0	0.0	0	0.0	0
21-44	145	31.7	1,375	0.3	31	48	10.5	394	0.3	16	39	8.5	372	0.4	23
45-64	57	40.4	533	0.3	25	34	24.1	317	0.3	21	42	29.8	385	0.4	28
65-74	15,285	23.6	172,174	0.4	25	26,753	41.2	305,078	0.4	21	27,319	42.1	312,544	0.4	26
75-84	18,532	30.3	202,471	0.6	29	26,438	43.2	296,589	0.5	21	20,528	33.6	231,254	0.5	23
85 and older	17,726	33.0	186,987	0.6	31	19,622	36.6	209,210	0.6	21	9,856	18.4	105,649	0.6	19
Male	23,637	21.5	255,813	0.5	30	33,145	30.1	366,108	0.5	21	26,380	24.0	294,277	0.5	24
Disabled	9,136	23.1	103,240	0.4	31	7,994	20.2	89,720	0.4	19	6,959	17.6	78,681	0.4	26
5 and younger	0	0.0	0	0.0	0	6	37.5	68	0.3	4	0	0.0	0	0.0	0
6-14	4	9.1	43	0.5	24	23	52.3	267	0.4	21	1	2.3	12	0.2	3
15-20	42	16.0	478	0.5	44	45	17.1	517	0.5	16	5	1.9	60	0.8	34
21-44	4,569	22.6	51,859	0.4	30	2,229	11.0	25,089	0.4	17	1,588	7.9	18,020	0.4	24
45-64	4,384	23.7	49,409	0.5	31	5,462	29.6	61,351	0.4	20	5,165	28.0	58,452	0.5	26
65-74	119	24.2	1,256	0.6	33	167	34.0	1,716	0.5	21	179	36.5	1,888	0.6	26
75-84	15	12.6	161	0.4	20	51	42.9	596	0.4	18	17	14.3	201	0.4	14
85 and older	3	8.1	34	0.2	6	11	29.7	116	0.5	20	4	10.8	48	0.4	9
Other Eligibles	14,501	20.6	152,573	0.5	29	25,151	35.7	276,388	0.5	21	19,421	27.6	215,596	0.5	23
5 and younger	2	22.2	13	0.5	16	2	22.2	19	0.3	10	2	22.2	13	0.4	12
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	3	1.0	69	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	47	25.1	390	0.4	31	27	14.4	187	0.3	19	18	9.6	172	0.5	49
45-64	56	28.1	510	0.3	20	49	24.6	397	0.4	14	56	28.1	510	0.4	23
65-74	5,412	16.2	59,098	0.5	27	11,704	35.1	131,492	0.4	21	10,371	31.1	117,409	0.5	25
75-84	5,466	23.0	57,023	0.6	30	8,934	37.6	97,965	0.5	21	6,788	28.6	74,619	0.5	23
85 and older	3,517	27.2	35,536	0.6	30	4,435	34.3	46,328	0.6	21	2,186	16.9	22,873	0.6	18
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Dual Eligible Beneficiaries

Table 16B

Source: Data for this table are from the MAX 1999 file for Texas, 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 (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, TEXAS, 1999

Beneficiary Characteristics	CALCIUM BLOCKERS					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 \$
All	70,116	21.0 %	782,014	0.5	\$30	109,402	32.7 %	1,256,561	0.3	\$19	44,430	13.3 %	509,165	0.4	\$38
Female	53,162	23.7	594,708	0.5	30	81,645	36.4	939,745	0.3	20	32,505	14.5	373,404	0.4	38
Disabled	7,059	16.1	80,230	0.4	30	15,096	34.3	174,829	0.2	19	5,819	13.2	66,859	0.4	37
5 and younger	2	50.0	24	0.8	42	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	22	50.0	242	0.5	41	0	0.0	0	0.0	0	3	6.8	36	0.2	12
15-20	37	17.3	410	0.7	60	36	16.8	413	0.2	4	6	2.8	67	0.3	25
21-44	1,114	7.1	12,593	0.3	29	3,947	25.2	45,514	0.2	14	771	4.9	8,846	0.3	32
45-64	5,563	20.8	63,380	0.4	30	10,697	39.9	124,110	0.2	21	4,825	18.0	55,472	0.4	37
65-74	221	25.9	2,429	0.5	33	295	34.5	3,360	0.2	18	171	20.0	1,952	0.4	42
75-84	74	30.1	842	0.5	38	98	39.8	1,157	0.3	18	37	15.0	414	0.4	43
85 and older	26	25.7	310	0.5	31	23	22.8	275	0.2	15	6	5.9	72	0.5	56
Other Eligibles	46,103	25.6	514,478	0.5	30	66,549	36.9	764,916	0.3	20	26,686	14.8	306,545	0.4	39
5 and younger	9	20.0	53	0.6	29	6	13.3	48	0.3	19	0	0.0	0	0.0	0
6-14	5	33.3	42	0.6	32	2	13.3	10	0.2	3	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	1	11.1	7	0.1	1	0	0.0	0	0.0	0
21-44	33	7.2	274	0.3	25	116	25.3	1,117	0.2	9	16	3.5	152	0.3	28
45-64	14	9.9	134	0.2	32	65	46.1	635	0.2	29	11	7.8	109	0.4	48
65-74	16,255	25.0	185,393	0.5	30	28,366	43.7	329,004	0.2	19	14,217	21.9	164,181	0.4	38
75-84	16,932	27.7	190,046	0.6	31	23,422	38.3	270,461	0.3	20	9,474	15.5	108,979	0.5	40
85 and older	12,855	24.0	138,536	0.6	30	14,571	27.2	163,634	0.4	22	2,968	5.5	33,124	0.5	38
Male	16,954	15.4	187,306	0.5	30	27,757	25.2	316,816	0.2	16	11,925	10.8	135,761	0.4	37
Disabled	4,251	10.7	47,477	0.5	33	7,885	19.9	90,527	0.2	13	3,690	9.3	42,156	0.4	36
5 and younger	9	56.3	104	0.6	36	2	12.5	24	0.1	1	0	0.0	0	0.0	0
6-14	21	47.7	242	0.6	36	2	4.5	24	0.3	4	0	0.0	0	0.0	0
15-20	38	14.4	427	0.6	43	23	8.7	271	0.2	4	4	1.5	44	0.2	20
21-44	1,180	5.8	13,133	0.4	32	3,199	15.8	36,636	0.2	10	1,020	5.1	11,605	0.4	32
45-64	2,875	15.6	32,194	0.5	34	4,502	24.4	51,841	0.2	15	2,589	14.0	29,676	0.4	38
65-74	97	19.8	1,026	0.6	32	118	24.0	1,295	0.2	16	67	13.6	711	0.5	39
75-84	24	20.2	281	0.5	29	32	26.9	363	0.4	26	10	8.4	120	0.6	55
85 and older	7	18.9	70	0.6	26	7	18.9	73	0.3	14	0	0.0	0	0.0	0
Other Eligibles	12,703	18.1	139,829	0.5	29	19,872	28.2	226,289	0.3	17	8,235	11.7	93,605	0.4	37
5 and younger	2	22.2	12	0.4	20	1	11.1	9	0.1	1	0	0.0	0	0.0	0
6-14	1	100.0	12	0.7	72	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	1	50.0	3	0.3	0	0	0.0	0	0.0	0
21-44	10	5.3	82	0.4	28	46	24.6	426	0.3	21	13	7.0	116	0.3	24
45-64	28	14.1	245	0.3	22	67	33.7	635	0.2	29	20	10.1	192	0.4	31
65-74	5,833	17.5	65,602	0.5	30	9,872	29.6	113,567	0.2	16	4,990	15.0	57,047	0.4	37
75-84	4,583	19.3	50,344	0.5	29	6,877	29.0	78,424	0.3	17	2,677	11.3	30,413	0.4	37
85 and older	2,246	17.4	23,532	0.6	28	3,008	23.3	33,225	0.3	19	535	4.1	5,837	0.5	36
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 1999 file for Texas, 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 (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, TEXAS, 1999

Beneficiary Characteristics	ANTICONVULSANT				ANALGESICS - Narcotic				Mean Rx \$	Mean No. of Rx	Users as % of Dual Benes	No. of Mos among Users	No. of Bene Mos	No. of Bene
	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean Rx \$	Mean No. of Rx	Users as % of Dual Benes	No. of Bene Mos among Users	No. of Bene Mos						
All	42,724	12.8 %	474,956	0.6	\$36	126,607	37.9 %	1,408,244	0.3	\$10	334,309	3,545,963		
Female	26,141	11.7	290,608	0.6	33	92,553	41.3	1,033,278	0.3	10	224,309	2,392,458		
Disabled	10,381	23.6	118,364	0.5	43	21,341	48.6	242,698	0.3	13	43,948	476,753		
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	4	38		
6-14	3	6.8	34	0.7	25	9	20.5	106	0.1	1	44	470		
15-20	35	16.4	416	0.6	49	80	37.4	932	0.2	3	214	2,265		
21-44	4,532	28.9	51,850	0.6	50	6,667	42.5	75,836	0.3	12	15,678	169,473		
45-64	5,662	21.1	64,438	0.5	38	14,111	52.6	160,791	0.3	13	26,807	291,908		
65-74	131	15.3	1,421	0.6	34	364	42.6	3,777	0.3	12	854	8,734		
75-84	14	5.7	160	0.7	26	82	33.3	955	0.2	4	246	2,737		
85 and older	4	4.0	45	0.6	18	28	27.7	301	0.2	4	101	1,128		
Other Eligibles	15,760	8.7	172,244	0.6	26	71,212	39.5	790,580	0.3	9	180,361	1,915,705		
5 and younger	0	0.0	0	0.0	0	14	31.1	99	0.3	8	45	218		
6-14	0	0.0	0	0.0	0	2	13.3	14	0.1	1	15	93		
15-20	3	33.3	34	0.8	108	3	33.3	30	0.1	1	9	64		
21-44	70	15.3	648	0.4	44	232	50.7	2,068	0.4	19	458	3,151		
45-64	26	18.4	248	0.3	34	69	48.9	646	0.4	17	141	971		
65-74	5,762	8.9	64,908	0.6	28	25,031	38.6	285,202	0.3	8	64,901	704,871		
75-84	5,843	9.6	63,719	0.6	26	24,678	40.4	276,203	0.3	9	61,132	660,032		
85 and older	4,056	7.6	42,687	0.7	23	21,183	39.5	226,318	0.4	9	53,660	546,305		
Male	16,583	15.1	184,348	0.6	42	34,054	31.0	374,966	0.3	9	110,000	1,153,505		
Disabled	9,872	24.9	112,357	0.6	50	12,250	30.9	137,602	0.3	12	39,632	423,433		
5 and younger	3	18.8	36	0.3	7	2	12.5	24	0.1	1	16	175		
6-14	3	6.8	36	0.3	35	4	9.1	44	0.1	1	44	449		
15-20	74	28.1	862	0.6	55	50	19.0	593	0.2	2	263	2,814		
21-44	5,458	27.0	62,447	0.6	55	5,524	27.4	61,951	0.3	12	20,187	215,493		
45-64	4,256	23.0	48,157	0.7	45	6,481	35.1	72,990	0.3	12	18,475	197,953		
65-74	70	14.3	723	0.7	40	155	31.6	1,611	0.3	9	491	4,831		
75-84	7	5.9	84	0.5	13	24	20.2	269	0.3	4	119	1,322		
85 and older	1	2.7	12	0.5	12	10	27.0	120	0.4	7	37	396		
Other Eligibles	6,711	9.5	71,991	0.6	28	21,804	31.0	237,364	0.3	7	70,368	730,072		
5 and younger	1	11.1	10	0.2	4	2	22.2	6	0.7	9	9	39		
6-14	0	0.0	0	0.0	0	1	100.0	12	0.2	1	1	12		
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	6		
21-44	36	19.3	292	0.4	29	110	58.8	864	0.4	13	187	1,194		
45-64	18	9.0	172	0.6	52	83	41.7	736	0.3	9	199	1,390		
65-74	3,098	9.3	34,319	0.6	31	9,918	29.8	111,001	0.3	8	33,307	353,401		
75-84	2,457	10.3	26,016	0.7	26	7,442	31.3	80,999	0.3	7	23,751	247,698		
85 and older	1,101	8.5	11,182	0.7	25	4,248	32.9	43,746	0.3	8	12,912	126,332		
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 Texas, 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 (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, TEXAS, 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	\$215	5.7	57,155	579,475
Age				
0-64	291	6.4	3,211	35,088
65-74	267	6.4	7,554	79,004
75-84	231	6.0	17,725	180,510
85 and older	180	5.2	28,665	284,873
Unknown	0	0.0	0	0
Gender				
Female	211	5.8	42,428	434,033
Male	225	5.6	14,727	145,442
Unknown	0	0.0	0	0
Race				
White	218	5.9	43,427	436,626
African American	189	4.9	6,730	69,886
Other/unknown	222	5.3	6,998	72,963
Basis of Eligibility				
Aged	210	5.7	53,724	542,112
Disabled	288	6.4	3,430	37,359
Adults	128	3.0	1	4
Children	0	0.0	0	0
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 1999 file for Texas, 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 26,666 beneficiaries who were in nursing facilities for part of their enrollment and their 257,454 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, TEXAS, 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	Total	Patented	Off-Patent	Total	As % of Dual All-Year NF Residents	No. of Bene Mos		
		Brand-Name	Generic		Brand-Name	Generic		Brand-Name	Generic		Brand-Name	Generic					
Anti-infective Agents	0.3	0.2	0.0	0.1	\$15	\$13	\$0	\$2	\$46	\$71	\$49	\$11	142,458	\$6,539,239	41,102	71.9 %	437,021
Biologics	0.1	0.0	0.0	0.1	4	0	0	4	47	0	0	47	3	141	3	0.0	36
Antineoplastic Agents	0.5	0.1	0.3	0.2	59	15	39	6	117	186	149	36	23,954	2,814,442	4,756	8.3	47,405
Endocrine/Metabolic Drugs	1.0	0.5	0.3	0.3	26	20	3	3	25	43	13	9	255,473	6,452,933	23,529	41.2	248,092
Cardiovascular Agents	1.8	0.4	0.5	0.9	43	17	14	12	24	42	29	13	772,265	18,359,315	41,493	72.6	430,986
Respiratory Agents	0.6	0.2	0.0	0.3	18	11	1	7	31	46	34	19	199,207	6,098,394	31,196	54.6	333,520
Gastrointestinal Agents	0.9	0.3	0.2	0.4	49	30	12	8	54	88	66	20	265,190	14,258,652	27,431	48.0	290,388
Genitourinary Agents	0.5	0.2	0.0	0.2	18	13	1	4	36	55	33	18	59,096	2,149,311	10,920	19.1	118,158
CNS Drugs	1.4	0.6	0.2	0.6	74	54	12	7	54	85	78	13	557,967	29,986,486	38,616	67.6	407,375
Stimulants/Anti-obesity/Anorexia	0.4	0.0	0.1	0.3	13	0	4	8	31	49	39	28	1,098	34,201	246	0.4	2,582
Miscellaneous Psychological/Neurological Agents	0.8	0.7	0.0	0.1	79	76	0	3	104	112	84	32	37,689	3,922,493	4,679	8.2	49,665
Analgesics and Anesthetics	0.7	0.2	0.1	0.5	26	15	5	5	35	76	61	12	206,634	7,184,764	26,494	46.4	281,115
Neuromuscular Agents	1.1	0.2	0.3	0.5	44	19	14	11	40	76	46	20	185,717	7,376,414	15,735	27.5	169,124
Nutritional Products	0.7	0.0	0.3	0.5	12	0	6	5	15	17	23	11	162,750	2,522,018	20,721	36.3	217,151
Hematological Agents	0.9	0.1	0.3	0.4	38	19	10	10	43	144	30	22	130,885	5,653,460	14,046	24.6	147,204
Topical Products	0.5	0.2	0.1	0.2	15	9	3	2	32	48	37	13	162,776	5,250,149	32,900	57.6	357,366
Miscellaneous Products	0.2	0.0	0.0	0.2	9	2	2	4	42	188	157	23	3,281	137,321	1,445	2.5	14,853
Unknown Therapeutic Category	0.5	0.0	0.0	0.0	19	0	0	0	41	0	0	0	138,032	5,672,876	27,452	48.0	293,774
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.	3,304,475	124,412,609	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 1999 file for Texas, 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 26,666 beneficiaries who were in nursing facilities for part of their enrollment and their 257,454 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 Texas, 4.0 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.

Table 18

Dual Eligible Beneficiaries

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

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

Beneficiary Characteristics	No. of Benes					No. of Bene Mos					
	All	Aged	Disabled	Adults	Children	All	Aged	Disabled	Adults	Children	Unknown
All	357,713	267,284	89,359	1,050	20	3,885,108	2,887,745	989,543	7,639	181	0
Age											
5 and younger	79	51	20	0	8	523	216	228	0	79	0
6-14	109	9	93	0	7	1,096	34	991	0	71	0
15-20	509	0	497	7	5	5,552	0	5,475	46	31	0
21-44	39,191	5	38,515	671	0	432,542	55	427,586	4,901	0	0
45-64	48,585	30	48,224	331	0	536,851	290	534,191	2,370	0	0
65-74	108,651	107,153	1,459	39	0	1,202,811	1,187,612	14,897	302	0	0
75-84	91,478	91,070	406	2	0	997,877	993,306	4,551	20	0	0
85 and older	69,111	68,966	145	0	0	707,856	706,232	1,624	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0
Gender											
Female	240,410	192,483	47,273	640	14	2,624,673	2,091,447	528,306	4,776	144	0
Male	117,303	74,801	42,086	410	6	1,260,435	796,298	461,237	2,863	37	0
Unknown	0	0	0	0	0	0	0	0	0	0	0
Race											
White	175,009	130,368	44,256	380	5	1,872,189	1,376,958	492,565	2,617	49	0
African American	61,814	40,807	20,767	236	4	680,228	447,758	230,668	1,769	33	0
Other/unknown	120,890	96,109	24,336	434	11	1,332,691	1,063,029	266,310	3,253	99	0
Use of Nursing Facilities											
All year	57,155	53,724	3,430	1	0	579,497	542,131	37,362	4	0	0
Part year	26,666	24,504	2,161	1	0	265,527	242,941	22,574	12	0	0
None	273,892	189,056	83,768	1,048	20	3,040,084	2,102,673	929,607	7,623	181	0
Maintenance Assistance Status											
Cash	241,969	172,786	68,635	548	0	2,707,908	1,946,726	756,884	4,298	0	0
Medically needy	239	0	0	238	1	1,529	0	0	1,521	8	0
Poverty related	2,607	1,357	1,080	163	7	26,613	14,474	11,085	991	63	0
Other/unknown	112,898	93,141	19,644	101	12	1,149,058	926,545	221,574	829	110	0
Dual Status^c											
Full dual, all year	350,655	262,081	87,510	1,044	20	3,812,883	2,834,929	970,201	7,572	181	0
Full dual, part year	7,058	5,203	1,849	6	0	72,225	52,816	19,342	67	0	0
Managed Care Status											
FFS all year	306,613	231,018	74,705	873	17	3,299,602	2,472,211	821,105	6,130	156	0
FFS part year, with Rx claims	24,499	16,475	7,903	119	2	282,107	189,369	91,572	1,142	24	0
FFS part year, no Rx claims	3,197	2,216	972	9	0	34,440	23,742	10,634	64	0	0
MC all year, with Rx claims	20,703	15,534	5,128	41	0	240,190	180,493	59,421	276	0	0
MC all year, no Rx claims	2,701	2,041	651	8	1	28,769	21,930	6,811	27	1	0

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

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

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

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

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

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

Beneficiary Characteristics	Benes and			
	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 Benes	No. of Benes	No. of Bene Mos
All	357,713	334,309	23,404	339,145
FFS all year	306,613	306,613	0	0
FFS part year, with Rx claims	24,499	24,499	0	62,369
FFS part year, with no Rx claims	3,197	3,197	0	7,817
MC all year, with Rx claims	20,703	0	20,703	240,190
MC all year, with no Rx claims	2,701	0	2,701	28,769

Source: Data for this table are from the MAX 1999 file for Texas, 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^{a, b}
 TEXAS, 1999

Total Number of Dual Eligible Beneficiaries 334,309
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries \$452,584,647
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary \$1,354

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	38,904	11.6 %	\$0	0.0 %
1-500	81,718	24.4	18,611,165	4.1
501-1,000	60,236	18.0	44,597,557	9.9
1,001-1,500	46,126	13.8	57,054,220	12.6
1,501-2,000	32,505	9.7	56,390,079	12.5
2,001-2,500	22,032	6.6	49,208,261	10.9
2,501-3,000	14,682	4.4	40,137,411	8.9
3,001-3,500	10,256	3.1	33,189,499	7.3
3,501-4,000	7,024	2.1	26,268,769	5.8
4,001-4,500	5,042	1.5	21,350,938	4.7
4,501-5,000	3,714	1.1	17,594,816	3.9
5,001-5,500	2,776	0.8	14,547,863	3.2
5,501-6,000	2,078	0.6	11,909,300	2.6
6,001-6,500	1,560	0.5	9,732,775	2.2
6,501-7,000	1,213	0.4	8,186,415	1.8
7,001-7,500	939	0.3	6,799,950	1.5
7,501-8,000	682	0.2	5,276,222	1.2
8,001-8,500	552	0.2	4,555,739	1.0
8,501-9,000	409	0.1	3,576,979	0.8
9,001-9,500	289	0.1	2,672,543	0.6
9,501-10,000	256	0.1	2,493,338	0.6
10,001+	1,316	0.4	18,430,808	4.1

Source: Data for this table are from the MAX 1999 file for Texas, 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^{a, b, c}
TEXAS, 1999**

Total Number of Disabled Dual Eligible Beneficiaries, Age < 65 81,732
 Total Pharmacy Reimbursement for Disabled Dual Eligible Beneficiaries, Age < 65 \$117,437,759
 Mean Pharmacy Reimbursement per Disabled Dual Eligible Beneficiary, Age < 65 \$1,437

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age < 65		Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement	
		16.3 %	16.3 %		0.0 %	0.0 %
\$0	13,356			0		
1-500	21,637	26.5	26.5	4,564,367	3.9	3.9
501-1,000	12,461	15.2	15.2	9,172,582	7.8	7.8
1,001-1,500	9,192	11.2	11.2	11,367,105	9.7	9.7
1,501-2,000	6,530	8.0	8.0	11,337,401	9.7	9.7
2,001-2,500	4,499	5.5	5.5	10,052,622	8.6	8.6
2,501-3,000	3,152	3.9	3.9	8,615,484	7.3	7.3
3,001-3,500	2,193	2.7	2.7	7,108,897	6.1	6.1
3,501-4,000	1,632	2.0	2.0	6,109,222	5.2	5.2
4,001-4,500	1,248	1.5	1.5	5,295,748	4.5	4.5
4,501-5,000	1,035	1.3	1.3	4,908,732	4.2	4.2
5,001-5,500	825	1.0	1.0	4,316,520	3.7	3.7
5,501-6,000	712	0.9	0.9	4,084,250	3.5	3.5
6,001-6,500	541	0.7	0.7	3,375,329	2.9	2.9
6,501-7,000	428	0.5	0.5	2,889,972	2.5	2.5
7,001-7,500	378	0.5	0.5	2,737,390	2.3	2.3
7,501-8,000	277	0.3	0.3	2,143,979	1.8	1.8
8,001-8,500	246	0.3	0.3	2,031,961	1.7	1.7
8,501-9,000	214	0.3	0.3	1,874,265	1.6	1.6
9,001-9,500	157	0.2	0.2	1,450,494	1.2	1.2
9,501-10,000	134	0.2	0.2	1,304,598	1.1	1.1
10,001+	885	1.1	1.1	12,696,841	10.8	10.8

Source: Data for this table are from the MAX 1999 file for Texas, 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^{a, b}
 TEXAS, 1999

Total Number of Dual Eligible Beneficiaries, Age 65-74 99,553
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65-74 \$119,743,767
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65-74 \$1,203

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 65-74	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	13,486	13.5 %	0	0.0
1-500	24,719	24.8	5,592,988	4.7
501-1,000	18,568	18.7	13,782,102	11.5
1,001-1,500	14,324	14.4	17,689,890	14.8
1,501-2,000	9,726	9.8	16,844,527	14.1
2,001-2,500	6,164	6.2	13,738,296	11.5
2,501-3,000	3,796	3.8	10,345,153	8.6
3,001-3,500	2,537	2.5	8,202,727	6.9
3,501-4,000	1,636	1.6	6,111,703	5.1
4,001-4,500	1,104	1.1	4,666,652	3.9
4,501-5,000	822	0.8	3,891,381	3.2
5,001-5,500	623	0.6	3,267,752	2.7
5,501-6,000	440	0.4	2,519,091	2.1
6,001-6,500	362	0.4	2,261,381	1.9
6,501-7,000	293	0.3	1,979,204	1.7
7,001-7,500	228	0.2	1,652,038	1.4
7,501-8,000	163	0.2	1,260,086	1.1
8,001-8,500	133	0.1	1,096,085	0.9
8,501-9,000	104	0.1	908,023	0.8
9,001-9,500	60	0.1	554,999	0.5
9,501-10,000	48	0.0	468,071	0.4
10,001+	217	0.2	2,911,618	2.4

Source: Data for this table are from the MAX 1999 file for Texas, 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^{a, b}
TEXAS, 1999

Total Number of Dual Eligible Beneficiaries, Age 75-84 85,248
Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 75-84 \$120,806,305
Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 75-84 \$1,417

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 75-84	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	7,728	9.1%	0	0.0%
1-500	18,801	22.1	4,499,120	3.7
501-1,000	16,060	18.8	11,923,316	9.9
1,001-1,500	12,692	14.9	15,709,828	13.0
1,501-2,000	9,100	10.7	15,799,881	13.1
2,001-2,500	6,329	7.4	14,154,454	11.7
2,501-3,000	4,130	4.8	11,296,462	9.4
3,001-3,500	3,000	3.5	9,701,970	8.0
3,501-4,000	2,031	2.4	7,596,556	6.3
4,001-4,500	1,493	1.8	6,329,517	5.2
4,501-5,000	1,034	1.2	4,899,099	4.1
5,001-5,500	791	0.9	4,153,636	3.4
5,501-6,000	566	0.7	3,246,065	2.7
6,001-6,500	397	0.5	2,474,469	2.0
6,501-7,000	312	0.4	2,103,392	1.7
7,001-7,500	221	0.3	1,599,552	1.3
7,501-8,000	161	0.2	1,245,925	1.0
8,001-8,500	116	0.1	957,593	0.8
8,501-9,000	63	0.1	549,959	0.5
9,001-9,500	45	0.1	416,427	0.3
9,501-10,000	43	0.1	418,058	0.3
10,001+	135	0.2	1,731,026	1.4

Source: Data for this table are from the MAX 1999 file for Texas, 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^{a, b}
 TEXAS, 1999

Total Number of Dual Eligible Beneficiaries, Age 85+ 66,710
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 85+ \$93,682,433
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 85+ \$1,404

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 85+	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	4,155	6.2 %	0	0.0 %
1-500	16,086	24.1	3,867,637	4.1
501-1,000	12,988	19.5	9,605,804	10.3
1,001-1,500	9,845	14.8	12,195,197	13.0
1,501-2,000	7,090	10.6	12,306,889	13.1
2,001-2,500	5,005	7.5	11,186,713	11.9
2,501-3,000	3,587	5.4	9,833,984	10.5
3,001-3,500	2,514	3.8	8,137,292	8.7
3,501-4,000	1,715	2.6	6,414,357	6.8
4,001-4,500	1,188	1.8	5,021,107	5.4
4,501-5,000	821	1.2	3,886,353	4.1
5,001-5,500	530	0.8	2,773,517	3.0
5,501-6,000	352	0.5	2,014,352	2.2
6,001-6,500	256	0.4	1,596,951	1.7
6,501-7,000	176	0.3	1,186,809	1.3
7,001-7,500	111	0.2	803,504	0.9
7,501-8,000	80	0.1	618,369	0.7
8,001-8,500	57	0.1	470,100	0.5
8,501-9,000	28	0.0	244,732	0.3
9,001-9,500	26	0.0	241,470	0.3
9,501-10,000	28	0.0	273,270	0.3
10,001+	72	0.1	1,004,026	1.1

Source: Data for this table are from the MAX 1999 file for Texas, 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.