

# STATISTICAL COMPENDIUM: MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2002 FLORIDA

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TABLE D.2  
 CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY<sup>a,b</sup>  
 DUAL ELIGIBLE BENEFICIARIES, FLORIDA, 2002

Beneficiary Characteristics	No. of Benes						No. of Bene Mos					
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown
<b>All</b>	<b>361,553</b>	<b>168,824</b>	<b>191,143</b>	<b>1,553</b>	<b>30</b>	<b>3</b>	<b>3,699,321</b>	<b>1,746,168</b>	<b>1,941,696</b>	<b>11,159</b>	<b>271</b>	<b>27</b>
<b>Age</b>												
5 and younger	23	0	23	0	0	0	239	0	239	0	0	0
6-14	79	0	66	0	13	0	827	0	698	0	129	0
15-20	574	0	552	9	13	0	5,656	0	5,436	97	123	0
21-44	49,743	0	48,718	1,022	3	0	510,858	0	502,558	8,282	18	0
45-64	64,099	8	63,748	340	1	2	665,649	96	663,406	2,129	1	17
65-74	98,667	67,088	31,424	154	0	1	1,023,052	686,927	335,560	555	0	10
75-84	88,607	65,341	23,239	27	0	0	918,366	696,058	222,213	95	0	0
85 and older	59,760	36,386	23,373	1	0	0	574,662	363,075	211,586	1	0	0
Unknown	1	1	0	0	0	0	12	12	0	0	0	0
<b>Gender</b>												
Female	235,586	121,105	113,320	1,142	16	3	2,432,957	1,260,973	1,163,211	8,606	140	27
Male	125,966	47,719	77,822	411	14	0	1,266,357	485,195	778,478	2,553	131	0
Unknown	1	0	1	0	0	0	7	0	7	0	0	0
<b>Race</b>												
White	182,107	69,655	111,553	875	22	2	1,829,744	706,581	1,116,640	6,310	198	15
African American	69,930	29,504	39,985	436	4	1	725,447	306,160	416,226	3,014	35	12
Other/unknown	109,516	69,665	39,605	242	4	0	1,144,130	733,427	408,830	1,835	38	0
<b>Use of Nursing Facilities<sup>c</sup></b>												
Entire year	46,411	16,944	29,467	0	0	0	440,726	163,404	277,322	0	0	0
Part year	24,673	10,322	14,350	1	0	0	225,320	98,390	126,920	10	0	0
None	290,469	141,558	147,326	1,552	30	3	3,033,275	1,484,374	1,537,454	11,149	271	27
<b>Maintenance Assistance Status</b>												
Cash	193,563	90,782	102,032	749	0	0	2,081,968	988,088	1,089,570	4,310	0	0
Medically needy	1,489	8	1,414	66	1	0	14,134	52	13,580	492	10	0
Poverty-related	102,829	63,662	38,965	189	10	3	1,022,003	628,495	391,982	1,416	83	27
Other/unknown	63,672	14,372	48,732	549	19	0	581,216	129,533	446,564	4,941	178	0
<b>Dual Medicare Status<sup>d</sup></b>												
Full dual, all year	346,034	161,280	183,235	1,486	30	3	3,539,776	1,667,231	1,861,738	10,509	271	27
Full dual, part year	15,519	7,544	7,908	67	0	0	159,545	78,937	79,958	650	0	0
<b>Managed Care Status</b>												
FFS all year	345,535	161,956	182,283	1,266	27	3	3,613,169	1,709,466	1,893,332	10,088	256	27
FFS part year, with Rx claims	11,329	4,717	6,442	168	2	0	67,560	28,282	38,537	729	12	0
FFS part year, no Rx claims	4,689	2,151	2,418	119	1	0	18,592	8,420	9,827	342	3	0

Source: Data for this table are from the MAX 2002 file for Florida, released by CMS in 07/2006. This table was produced on 04/19/2007.

- a. Table D.2 includes the beneficiaries represented by Cell G of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- 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. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.
- d. 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 2002. 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 D.3  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC<sup>a,b</sup>  
 DUAL ELIGIBLE BENEFICIARIES, FLORIDA, 2002

Beneficiary Characteristics	% with at Least One Rx	Mean No. of Rx	Mean Rx \$	\$ per Rx	Mean \$, All Services	Rx \$ as % of All Services	No. of Benes
All	84.6 %	43.2	\$2,541	\$59	\$10,444	24.3 %	361,553
<b>Age</b>							
5 and younger	91.3	45.9	5,689	124	55,897	10.2	23
6-14	97.5	55.9	7,183	129	19,525	36.8	79
15-20	73.3	23.5	2,598	111	12,129	21.4	574
21-44	80.2	33.7	3,443	102	9,742	35.3	49,743
45-64	87.3	50.4	3,672	73	10,435	35.2	64,099
65-74	81.7	40.5	2,075	51	6,207	33.4	98,667
75-84	85.1	44.8	2,116	47	10,606	20.0	88,607
85 and older	89.7	45.7	1,972	43	17,746	11.1	59,760
Unknown	100.0	39.0	349	9	48,054	0.7	1
<b>Basis of Eligibility<sup>c</sup></b>							
Aged	82.3	38.9	1,866	48	7,764	24.0	168,824
Disabled	86.9	47.2	3,150	67	12,873	24.5	191,143
Adults	59.7	15.9	1,119	70	2,855	39.2	1,553
Children	83.3	37.6	3,363	89	11,038	30.5	30
Unknown	100.0	28.3	1,856	66	14,179	13.1	3
<b>Gender</b>							
Female	86.7	46.1	2,405	52	10,498	22.9	235,586
Male	80.7	37.8	2,796	74	10,343	27.0	125,966
Unknown	100.0	19.0	1,874	99	2,365	79.2	1
<b>Race</b>							
White	86.7	47.9	2,732	57	13,245	20.6	182,107
African American	81.8	36.4	2,260	62	9,537	23.7	69,930
Other/unknown	82.9	39.8	2,404	60	6,365	37.8	109,516
<b>Use of Nursing Facilities<sup>d</sup></b>							
Entire year	96.0	62.5	2,810	45	34,702	8.1	46,411
Part year	92.5	49.3	2,333	47	19,598	11.9	24,673
None	82.1	39.6	2,516	64	5,791	43.5	290,469
<b>Maintenance Assistance Status</b>							
Cash	83.3	40.9	2,435	60	5,503	44.3	193,563
Medically needy	93.3	65.7	5,468	83	9,301	58.8	1,489
Poverty related	84.4	42.6	2,458	58	11,435	21.5	102,829
Other/unknown	88.8	50.9	2,931	58	23,891	12.3	63,672

Source: Data for this table are from the MAX 2002 file for Florida, released by CMS in 07/2006. This table was produced on 04/19/2007.

- a. Table D.3 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. 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.
  - d. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.
- 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 D.4  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC<sup>a,b</sup>  
 DUAL ELIGIBLE BENEFICIARIES, FLORIDA, 2002

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
<b>All</b>	<b>4.2</b>	<b>\$248</b>	<b>24.3 %</b>	<b>15.4 %</b>	<b>14.3 %</b>	<b>10.0 %</b>	<b>30.1 %</b>	<b>24.7 %</b>	<b>5.5 %</b>	<b>\$1,021</b>	<b>361,553</b>	<b>3,699,321</b>
<b>Age</b>												
5 and younger	4.4	547	10.2	8.7	8.7	17.4	39.1	21.7	4.3	5,379	23	239
6-14	5.3	686	36.8	2.5	7.6	5.1	44.3	36.7	3.8	1,865	79	827
15-20	2.4	264	21.4	26.7	33.3	10.3	15.9	11.7	2.3	1,231	574	5,656
21-44	3.3	335	35.3	19.8	23.0	11.6	25.5	16.4	3.7	949	49,743	510,858
45-64	4.9	354	35.2	12.7	13.5	9.5	28.9	27.4	8.1	1,005	64,099	665,649
65-74	3.9	200	33.4	18.3	15.0	10.3	29.7	22.1	4.5	599	98,667	1,023,052
75-84	4.3	204	20.0	14.9	12.0	9.4	31.6	26.5	5.6	1,023	88,607	918,366
85 and older	4.8	205	11.1	10.3	10.2	9.4	33.8	30.3	6.0	1,845	59,760	574,662
Unknown	3.3	29	0.7	0.0	0.0	0.0	100.0	0.0	0.0	4,005	1	12
<b>Basis of Eligibility<sup>c</sup></b>												
Aged	3.8	180	24.0	17.7	14.7	10.5	31.5	22.0	3.6	751	168,824	1,746,168
Disabled	4.7	310	24.5	13.1	13.9	9.5	29.0	27.2	7.3	1,267	191,143	1,941,696
Adults	2.2	156	39.2	40.3	23.1	8.1	16.8	10.2	1.5	397	1,553	11,159
Children	4.2	372	30.5	16.7	20.0	6.7	26.7	26.7	3.3	1,222	30	271
Unknown	3.1	206	13.1	0.0	0.0	33.3	66.7	0.0	0.0	1,575	3	27
<b>Gender</b>												
Female	4.5	233	22.9	13.3	12.9	9.8	31.3	26.6	6.0	1,017	235,586	2,432,957
Male	3.8	278	27.0	19.3	17.0	10.2	27.8	21.0	4.7	1,029	125,966	1,266,357
Unknown	2.7	268	79.2	0.0	0.0	0.0	100.0	0.0	0.0	338	1	7
<b>Race</b>												
White	4.8	272	20.6	13.3	12.4	9.1	29.6	28.0	7.7	1,318	182,107	1,829,744
African American	3.5	218	23.7	18.2	18.1	11.6	29.5	19.4	3.2	919	69,930	725,447
Other/unknown	3.8	230	37.8	17.1	15.2	10.4	31.4	22.5	3.4	609	109,516	1,144,130
<b>use of nursing Facilities<sup>d</sup></b>												
Entire year	6.6	296	8.1	4.0	5.3	6.9	30.4	38.6	14.9	3,654	46,411	440,726
Part year	5.4	256	11.9	7.5	9.5	9.3	32.7	32.3	8.6	2,146	24,673	225,320
None	3.8	241	43.5	17.9	16.2	10.5	29.8	21.8	3.8	555	290,469	3,033,275
<b>Maintenance Assistance Status</b>												
Cash	3.8	226	44.3	16.7	15.9	10.4	30.8	22.7	3.6	512	193,563	2,081,968
Medically needy	6.9	576	58.8	6.7	6.2	6.5	27.0	37.7	15.8	980	1,489	14,134
Poverty related	4.3	247	21.5	15.6	14.7	10.4	29.8	23.7	5.8	1,151	102,829	1,022,003
Other/unknown	5.6	321	12.3	11.2	9.2	8.3	28.6	31.9	10.8	2,617	63,672	581,216

Table D4

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2002 file for Florida, released by CMS in 07/2006. This table was produced on 04/19/2007.

- a. Table D.4 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.
  - c. 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.
  - d. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.
- 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 D.5  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, FLORIDA, 2002

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>4.2</b>	<b>\$248</b>	<b>\$59</b>	<b>1.9</b>	<b>\$190</b>	<b>\$102</b>	<b>0.2</b>	<b>\$11</b>	<b>\$47</b>	<b>2.1</b>	<b>\$47</b>	<b>\$22</b>
<b>Age</b>												
5 and younger	4.4	547	124	1.7	463	268	0.4	27	62	2.2	57	26
6-14	5.3	686	129	2.3	537	230	0.4	74	184	2.6	75	29
15-20	2.4	264	111	1.1	215	200	0.2	19	109	1.1	29	26
21-44	3.3	335	102	1.5	273	177	0.2	15	83	1.6	47	30
45-64	4.9	354	73	2.2	278	127	0.2	15	60	2.4	61	25
65-74	3.9	200	51	1.8	151	84	0.2	9	42	1.9	40	21
75-84	4.3	204	47	1.9	151	79	0.3	10	37	2.1	43	20
85 and older	4.8	205	43	1.9	145	77	0.3	12	34	2.5	48	19
Unknown	3.3	29	9	0.0	0	0	0.0	0	0	3.3	29	9
<b>Basis of Eligibility<sup>d</sup></b>												
Aged	3.8	180	48	1.7	134	80	0.2	8	38	1.8	38	20
Disabled	4.7	310	67	2.0	241	118	0.3	14	52	2.3	55	24
Adults	2.2	156	70	1.0	119	121	0.1	12	101	1.1	25	23
Children	4.2	372	89	1.8	270	152	0.2	22	92	2.1	80	38
Unknown	3.1	206	66	2.0	175	86	0.0	0	0	1.0	26	25
<b>Gender</b>												
Female	4.5	233	52	2.0	175	89	0.3	11	42	2.2	47	21
Male	3.8	278	74	1.7	219	128	0.2	12	60	1.8	47	26
Unknown	2.7	268	99	1.6	234	149	0.0	0	0	1.1	34	29
<b>Race</b>												
White	4.8	272	57	2.0	206	101	0.3	14	46	2.4	52	21
African American	3.5	218	62	1.5	170	110	0.2	9	47	1.8	39	22
Other/unknown	3.8	230	60	1.8	177	98	0.2	10	49	1.8	44	24
<b>Use of Nursing Facilities<sup>e</sup></b>												
Entire year	6.6	296	45	2.6	212	81	0.5	18	36	3.5	66	19
Part year	5.4	256	47	2.1	185	86	0.4	14	38	2.9	57	20
None	3.8	241	64	1.7	187	107	0.2	10	51	1.8	43	24
<b>Maintenance Assistance Status</b>												
Cash	3.8	226	60	1.7	173	100	0.2	10	49	1.9	43	23
Medically needy	6.9	576	83	3.2	462	143	0.3	24	69	3.3	90	27
Poverty related	4.3	247	58	1.9	189	101	0.2	12	46	2.1	47	22
Other/unknown	5.6	321	58	2.3	245	106	0.4	16	41	2.8	60	21

Source: Data for this table are from the MAX 2002 file for Florida, released by CMS in 07/2006. This table was produced on 04/19/2007.

- a. Table D.5 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.
- 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 Florida, 0.5 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).
- d. 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.
- e. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.

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

TABLE D.6

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, FLORIDA, 2002

Therapeutic Category	No. of Rx per Bene Mo among Users			\$ per Bene Mo among Users			\$ per Rx			Users						
	Total	Patented Brand-Name	Off-Patent Brand-Name	Total	Patented Brand-Name	Off-Patent Brand-Name	Total	Patented Brand-Name	Off-Patent Brand-Name	Total No. of Rx	Total Rx \$	No. Dual Benes	As % of Mos	No. of Bene		
		Generic	Generic		Generic	Generic		Generic	Generic							
Anti-infective Agents	0.4	0.2	0.0	0.1	\$54	\$1	\$3	\$134	\$209	\$86	\$17	836,595	\$111,823,237	188,440	52.1	2,069,874
Biologics	0.1	0.1	0.0	0.0	103	3	84	817	44	2,804	1,960	11,628	9,503,713	8,249	2.3	92,010
Antineoplastic Agents	0.5	0.1	0.0	0.3	83	47	34	183	319	168	114	98,780	18,040,275	21,254	5.9	217,587
Endocrine/Metabolic Drugs	0.9	0.5	0.2	0.3	41	32	6	45	70	20	21	1,454,587	65,797,421	146,906	40.6	1,595,793
Cardiovascular Agents	1.7	0.7	0.1	0.9	60	39	18	36	60	34	19	4,072,058	144,894,287	226,443	62.6	2,433,893
Respiratory Agents	0.6	0.3	0.1	0.3	34	22	5	52	69	75	28	898,942	47,182,219	127,377	35.2	1,395,857
Gastrointestinal Agents	0.7	0.4	0.0	0.3	51	43	1	74	121	84	22	1,162,992	86,147,516	155,946	43.1	1,703,130
Genitourinary Agents	0.4	0.3	0.0	0.1	24	22	0	57	67	38	17	219,198	12,407,386	47,466	13.1	525,347
CNS Drugs	1.2	0.6	0.0	0.6	87	70	3	71	122	85	23	2,498,107	177,853,602	189,147	52.3	2,032,804
Stimulants/Anti-obesity/Anorexia	0.5	0.1	0.1	0.4	31	13	5	57	114	83	35	9,496	542,666	1,623	0.4	17,543
Miscellaneous Psychological/Neurological Agents	0.6	0.5	0.0	0.0	66	64	0	118	125	99	39	152,224	17,941,390	25,470	7.0	270,801
Analgesics and Anesthetics	0.7	0.3	0.0	0.4	43	33	2	59	116	68	20	1,454,295	86,297,961	184,629	51.1	2,012,426
Neuromuscular Agents	0.8	0.3	0.0	0.5	49	35	2	59	112	55	24	851,184	50,267,377	94,012	26.0	1,025,976
Nutritional Products	0.6	0.0	0.0	0.5	8	0	0	14	14	15	14	383,139	5,488,570	65,215	18.0	689,657
Hematological Agents	0.7	0.3	0.1	0.3	48	41	2	70	154	21	16	590,941	41,198,000	79,521	22.0	855,747
Topical Products	0.5	0.2	0.0	0.2	19	13	1	40	56	45	23	830,335	33,589,209	159,173	44.0	1,765,934
Miscellaneous Products	0.4	0.1	0.0	0.2	79	58	10	194	418	264	49	43,386	8,405,718	10,354	2.9	106,972
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	7	0	0	24	0	0	0	60,692	1,481,282	19,379	5.4	216,374
<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.	15,628,579	918,861,829	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2002 file for Florida, released by CMS in 07/2006. This table was produced on 04/19/2007.

- a. Table D.6 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 2002. 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 Florida, 0.5 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 D.7

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, FLORIDA, 2002

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	\$99,456,841	87,941	24.3 %	951,852	0.6	\$174	\$104	
ANTIVIRAL	75,403,098	31,785	8.8	358,375	0.5	383	210	
ULCER DRUGS	72,449,273	168,352	46.6	1,858,367	0.5	79	39	
ANTIDEPRESSANTS	56,833,585	151,293	41.8	1,636,764	0.6	61	35	
ANTHYPERLIPIDEMIC	45,179,875	87,539	24.2	982,234	0.6	82	46	
ANALGESICS - ANTI-INFLAMMATORY	42,994,188	141,469	39.1	1,597,134	0.4	72	27	
ANTIDIABETIC	41,759,375	116,607	32.3	1,270,657	0.6	51	33	
ANALGESICS - Narcotic	40,401,507	181,719	50.3	1,981,533	0.4	53	20	
ANTHYPERTENSIVE	39,341,895	163,138	45.1	1,788,715	0.6	37	22	
ANTICONVULSANT	39,151,173	74,523	20.6	817,388	0.7	71	48	
Total	552,970,810	1,204,366		13,243,019	n.a.	n.a.	n.a.	

Source: Data for this table are from the MAX 2002 file for Florida, released by CMS in 07/2006. This table was produced on 04/19/2007.

a. Table D.7 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 2002. 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 2002. 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; n.a. = not applicable.

TABLE D.7A  
 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, FLORIDA, 2002

Beneficiary Characteristics	All Top 10 Drug Groups				ANTIPSYCHOTICS				ANTIVIRAL			
	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>6,968,991</b>	<b>\$552,970,810</b>	<b>87,941</b>	<b>24.3 %</b>	<b>951,852</b>	<b>0.6</b>	<b>\$105</b>	<b>31,785</b>	<b>8.8 %</b>	<b>358,375</b>	<b>0.5</b>	<b>\$210</b>
<b>Female</b>	4,709,330	331,359,707	52,317	22.2	566,124	0.6	91	10,684	4.5	120,870	0.4	153
<b>Disabled</b>	2,651,274	204,710,620	35,576	31.4	387,829	0.6	99	8,703	7.7	98,451	0.5	178
5 and younger	49	3,469	0	0.0	0	0.0	0	2	28.6	22	0.2	50
6-14	387	53,798	0	0.0	0	0.0	0	14	43.8	164	0.5	228
15-20	2,608	258,808	73	29.1	781	0.6	109	42	16.7	487	0.4	141
21-44	399,198	43,481,824	8,730	41.8	97,352	0.6	114	3,795	18.2	42,784	0.5	197
45-64	983,999	82,511,077	11,493	31.3	129,591	0.6	112	3,633	9.9	41,223	0.5	197
65-74	545,784	36,602,514	4,605	22.2	51,995	0.6	95	614	3.0	7,094	0.3	103
75-84	379,857	22,605,318	4,834	30.1	50,413	0.6	79	282	1.8	3,180	0.2	25
85 and older	339,392	19,193,812	5,841	31.3	57,697	0.6	68	321	1.7	3,497	0.1	10
<b>Other Eligibles</b>	2,058,035	126,648,881	16,741	13.7	178,295	0.5	73	1,981	1.6	22,419	0.2	47
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	52	8,238	1	14.3	12	0.4	107	1	14.3	12	0.3	368
15-20	123	9,888	2	13.3	24	0.6	132	1	6.7	11	0.5	39
21-44	5,143	455,794	102	12.8	1,006	0.3	61	30	3.8	298	0.4	148
45-64	2,625	203,327	31	15.0	326	0.3	40	10	4.8	106	0.6	302
65-74	715,613	45,825,651	3,984	9.1	43,784	0.5	81	842	1.9	9,606	0.3	81
75-84	858,547	52,644,321	6,615	13.9	71,135	0.5	74	708	1.5	8,105	0.1	17
85 and older	475,932	27,501,662	6,006	20.0	62,008	0.5	65	389	1.3	4,281	0.1	14
<b>Male</b>	2,259,653	221,610,061	35,624	28.3	385,728	0.6	124	21,098	16.7	237,484	0.6	239
<b>Disabled</b>	1,603,536	179,140,407	29,837	38.3	324,969	0.7	131	19,886	25.6	224,110	0.6	244
5 and younger	103	8,055	0	0.0	0	0.0	0	1	6.3	12	0.9	103
6-14	417	36,727	0	0.0	0	0.0	0	14	41.2	136	0.5	147
15-20	2,491	304,517	83	27.6	887	0.6	126	22	7.3	239	0.5	284
21-44	519,005	75,653,170	13,067	47.0	146,472	0.7	143	10,503	37.7	118,232	0.6	238
45-64	642,728	75,179,142	9,811	36.2	110,482	0.7	142	8,627	31.9	97,468	0.7	259
65-74	231,241	16,132,419	2,594	24.3	27,668	0.6	107	567	5.3	6,430	0.5	193
75-84	137,310	7,966,449	2,630	36.6	24,813	0.6	78	84	1.2	916	0.3	66
85 and older	70,241	3,859,928	1,652	34.9	14,647	0.6	67	68	1.4	677	0.2	14
<b>Other Eligibles</b>	656,117	42,469,654	5,787	12.0	60,759	0.5	89	1,212	2.5	13,374	0.4	161
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	42	12,685	0	0.0	0	0.0	0	2	33.3	24	0.4	392
15-20	57	1,420	0	0.0	0	0.0	0	1	14.3	12	0.1	1
21-44	2,412	214,497	23	10.2	223	0.5	112	8	3.6	95	0.5	180
45-64	1,821	151,529	13	9.0	87	0.6	134	5	3.5	49	0.5	514
65-74	314,848	21,423,112	2,249	9.5	24,344	0.5	100	798	3.4	8,786	0.5	198
75-84	253,393	15,768,824	2,218	12.5	23,632	0.5	88	321	1.8	3,525	0.3	89
85 and older	83,544	4,897,587	1,284	20.2	12,473	0.5	68	77	1.2	883	0.2	47
<b>Unknown</b>	29	1,248	0	0.0	0	0.0	0	3	150.0	21	0.1	45

Source: Data for this table are from the MAX 2002 file for Florida, released by CMS in 07/2006. This table was produced on 04/19/2007.

a. Table D.7A 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 2002. 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 2002. 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 D.7B  
 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, FLORIDA, 2002

Beneficiary Characteristics	ULCER DRUGS					ANTIDEPRESSANTS					ANTIHYPERTENSIVES				
	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>168,352</b>	<b>46.6 %</b>	<b>1,858,367</b>	<b>0.5</b>	<b>\$39</b>	<b>151,293</b>	<b>41.8 %</b>	<b>1,636,764</b>	<b>0.6</b>	<b>\$35</b>	<b>87,539</b>	<b>24.2 %</b>	<b>982,234</b>	<b>0.6</b>	<b>\$46</b>
<b>Female</b>	119,906	50.9	1,329,483	0.5	39	106,741	45.3	1,159,389	0.6	35	60,842	25.8	685,097	0.6	46
<b>Disabled</b>	60,732	53.6	670,121	0.5	40	66,790	58.9	724,694	0.6	37	27,300	24.1	306,049	0.6	46
5 and younger	6	85.7	70	0.5	28	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	20	62.5	218	0.5	40	2	6.3	18	0.4	22	3	9.4	36	0.6	38
15-20	81	32.3	898	0.4	25	75	29.9	798	0.4	27	6	2.4	72	0.5	37
21-44	7,454	35.7	83,411	0.4	37	12,709	60.8	139,569	0.5	39	2,052	9.8	22,947	0.5	40
45-64	20,818	56.8	234,041	0.5	42	24,900	67.9	276,897	0.6	39	11,530	31.4	129,322	0.6	47
65-74	13,838	66.6	157,967	0.5	39	10,472	50.4	118,063	0.6	33	8,337	40.2	95,170	0.6	47
75-84	9,319	58.0	100,413	0.5	40	8,602	53.6	89,817	0.6	35	3,698	23.0	41,005	0.6	48
85 and older	9,196	49.3	93,103	0.6	41	10,030	53.8	99,532	0.7	36	1,674	9.0	17,497	0.6	43
<b>Other Eligibles</b>	59,173	48.4	659,350	0.5	38	39,950	32.7	434,683	0.6	31	33,542	27.4	379,048	0.6	46
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	57.1	48	0.6	38	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	3	20.0	35	0.5	53	4	26.7	44	0.4	31	0	0.0	0	0.0	0
21-44	121	15.1	1,226	0.4	35	299	37.4	2,841	0.4	30	25	3.1	238	0.6	44
45-64	71	34.3	740	0.4	37	92	44.4	830	0.4	33	29	14.0	295	0.5	39
65-74	20,233	46.5	228,076	0.5	37	13,145	30.2	146,034	0.5	30	14,927	34.3	167,469	0.5	45
75-84	24,205	50.8	273,207	0.5	38	15,869	33.3	174,785	0.6	31	14,278	30.0	163,288	0.6	47
85 and older	14,536	48.4	156,018	0.6	40	10,541	35.1	110,149	0.6	33	4,283	14.3	47,758	0.6	47
<b>Male</b>	48,446	38.5	528,884	0.5	39	44,552	35.4	477,375	0.6	35	26,697	21.2	297,137	0.6	45
<b>Disabled</b>	28,962	37.2	313,679	0.5	41	34,033	43.7	364,461	0.6	36	15,154	19.5	168,053	0.6	46
5 and younger	7	43.8	80	0.4	13	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	19	55.9	200	0.7	46	5	14.7	54	0.3	14	0	0.0	0	0.0	0
15-20	59	19.6	651	0.5	36	78	25.9	818	0.5	33	7	2.3	69	0.3	24
21-44	7,299	26.2	82,008	0.5	40	12,288	44.2	135,817	0.5	37	3,312	11.9	37,399	0.5	41
45-64	10,749	39.7	119,772	0.5	43	12,017	44.4	133,019	0.6	37	6,976	25.8	78,115	0.6	47
65-74	5,405	50.7	59,602	0.5	39	3,891	36.5	41,438	0.6	33	3,373	31.6	37,866	0.6	49
75-84	3,353	46.7	32,641	0.6	39	3,481	48.5	33,157	0.7	36	1,125	15.7	11,296	0.6	48
85 and older	2,071	43.7	18,725	0.6	40	2,273	48.0	20,158	0.7	35	361	7.6	3,308	0.6	39
<b>Other Eligibles</b>	19,484	40.5	215,205	0.5	35	10,519	21.8	112,914	0.5	29	11,543	24.0	129,084	0.5	45
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	3	50.0	36	0.7	86	0	0.0	0	0.0	0	2	33.3	15	0.4	7
15-20	3	42.9	36	0.4	11	1	14.3	12	0.8	15	1	14.3	12	0.8	27
21-44	43	19.1	430	0.4	44	99	44.0	934	0.4	30	22	9.8	206	0.6	42
45-64	47	32.6	392	0.5	43	70	48.6	593	0.5	32	43	29.9	355	0.5	41
65-74	8,652	36.5	95,953	0.4	35	4,511	19.0	49,381	0.5	28	6,431	27.1	71,343	0.5	44
75-84	7,898	44.6	88,452	0.5	35	4,062	22.9	43,977	0.5	29	4,266	24.1	48,526	0.5	46
85 and older	2,838	44.6	29,906	0.5	37	1,776	27.9	18,017	0.6	30	778	12.2	8,627	0.5	45
<b>Unknown</b>	1	50.0	12	0.9	12	1	50.0	12	0.8	5	0	0.0	0	0.0	0

Table D7B

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2002 file for Florida, released by CMS in 07/2006. This table was produced on 04/19/2007.

- a. Table D.7B 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 2002. 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 2002. 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 D.7C  
 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, FLORIDA, 2002

Beneficiary Characteristics	ANALGESICS - ANTI-INFLAMMATORY				ANTI-DIABETIC				ANALGESICS - Narcotic						
	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx			
<b>All</b>	<b>141,469</b>	<b>39.1 %</b>	<b>1,597,134</b>	<b>0.4</b>	<b>\$27</b>	<b>116,607</b>	<b>32.3 %</b>	<b>1,270,657</b>	<b>0.6</b>	<b>\$33</b>	<b>181,719</b>	<b>50.3 %</b>	<b>1,981,533</b>	<b>0.4</b>	<b>\$20</b>
<b>Female</b>	101,733	43.2	1,151,304	0.4	29	81,349	34.5	892,128	0.6	33	127,173	54.0	1,393,752	0.4	18
<b>Disabled</b>	50,715	44.8	571,680	0.4	29	41,403	36.5	453,904	0.6	35	78,137	69.0	855,817	0.4	22
5 and younger	1	14.3	10	0.1	1	0	0.0	0	0.0	0	3	42.9	24	0.1	1
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	6	18.8	72	0.2	1
15-20	52	20.7	576	0.2	6	10	4.0	115	0.5	16	114	45.4	1,279	0.2	6
21-44	7,920	37.9	88,844	0.3	19	3,128	15.0	34,953	0.6	35	15,819	75.7	175,919	0.4	26
45-64	18,901	51.5	214,048	0.4	30	15,242	41.6	169,243	0.6	38	31,469	85.8	352,784	0.4	25
65-74	12,245	59.0	141,686	0.4	30	11,718	56.4	132,127	0.7	36	13,049	62.8	147,331	0.4	15
75-84	6,385	39.8	71,408	0.4	33	6,948	43.3	73,776	0.7	30	8,853	55.1	92,944	0.5	17
85 and older	5,211	28.0	55,108	0.5	35	4,357	23.4	43,690	0.7	26	8,824	47.3	85,464	0.5	17
<b>Other Eligibles</b>	51,018	41.7	579,624	0.4	28	39,946	32.7	438,224	0.6	31	49,036	40.1	537,935	0.3	12
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	13.3	13	0.5	4	1	6.7	3	0.7	8	6	40.0	66	0.2	4
21-44	173	21.6	1,753	0.3	16	52	6.5	510	0.5	31	421	52.6	4,212	0.3	24
45-64	92	44.4	834	0.4	26	58	28.0	544	0.6	41	151	72.9	1,462	0.4	18
65-74	19,393	44.5	220,085	0.4	26	16,168	37.1	178,323	0.6	33	17,289	39.7	193,237	0.3	11
75-84	21,166	44.4	243,416	0.4	29	16,563	34.8	183,722	0.6	30	19,420	40.8	216,325	0.3	12
85 and older	10,192	33.9	113,523	0.4	31	7,104	23.7	75,122	0.7	26	11,749	39.1	122,633	0.4	12
<b>Male</b>	39,736	31.5	445,830	0.3	22	35,258	28.0	378,529	0.6	33	54,544	43.3	587,767	0.4	26
<b>Disabled</b>	23,105	29.7	258,160	0.3	21	20,583	26.4	219,223	0.7	34	40,237	51.7	433,530	0.4	31
5 and younger	1	6.3	12	0.3	10	0	0.0	0	0.0	0	2	12.5	24	0.1	1
6-14	1	2.9	12	0.3	2	0	0.0	0	0.0	0	6	17.6	71	0.1	1
15-20	44	14.6	488	0.2	4	7	2.3	79	0.8	46	89	29.6	958	0.2	4
21-44	7,116	25.6	80,092	0.3	14	3,052	11.0	33,652	0.6	36	14,341	51.5	158,423	0.4	35
45-64	9,311	34.4	104,803	0.4	23	8,337	30.8	91,244	0.6	37	16,010	59.2	175,894	0.4	37
65-74	4,170	39.1	47,554	0.4	25	4,991	46.8	54,484	0.7	34	4,944	46.4	53,822	0.4	17
75-84	1,587	22.1	16,694	0.4	29	2,921	40.7	28,174	0.7	28	2,965	41.3	28,152	0.5	16
85 and older	875	18.5	8,505	0.5	32	1,275	26.9	11,590	0.7	24	1,880	39.7	16,186	0.5	12
<b>Other Eligibles</b>	16,631	34.5	187,670	0.3	23	14,675	30.5	159,306	0.6	31	14,307	29.7	154,237	0.3	12
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	28.6	18	0.1	1	0	0.0	0	0.0	0	3	42.9	36	0.2	2
21-44	67	29.8	629	0.3	19	28	12.4	267	0.7	30	194	86.2	1,704	0.5	42
45-64	60	41.7	531	0.3	24	38	26.4	296	0.6	33	86	59.7	721	0.5	32
65-74	8,170	34.5	91,681	0.3	22	7,725	32.6	83,882	0.6	33	7,267	30.7	79,537	0.3	14
75-84	6,389	36.1	73,341	0.4	24	5,456	30.8	60,181	0.6	30	4,898	27.7	53,486	0.3	10
85 and older	1,943	30.6	21,470	0.4	27	1,428	22.5	14,680	0.6	26	1,859	29.2	18,753	0.3	10
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	100.0	14	0.4	7

Table D7C

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2002 file for Florida, released by CMS in 07/2006. This table was produced on 04/19/2007.

- a. Table D.7C 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 2002. 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 2002. 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 D.7D  
 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, FLORIDA, 2002

Beneficiary Characteristics	ANTIHYPERTENSIVE					ANTICONVULSANT						
	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 Benes	No. of Bene Mos
<b>All</b>	<b>163,138</b>	<b>45.1 %</b>	<b>1,788,715</b>	<b>0.6</b>	<b>\$22</b>	<b>74,523</b>	<b>20.6 %</b>	<b>817,388</b>	<b>0.7</b>	<b>\$48</b>	<b>361,553</b>	<b>3,699,321</b>
<b>Female</b>	111,786	47.5	1,230,509	0.6	23	45,883	19.5	504,067	0.7	44	235,585	2,432,945
<b>Disabled</b>	49,657	43.8	543,241	0.6	22	31,821	28.1	350,350	0.7	50	113,320	1,163,211
5 and younger	3	42.9	30	0.3	12	0	0.0	0	0.0	0	7	71
6-14	26	81.3	290	0.4	16	4	12.5	44	0.6	30	32	331
15-20	44	17.5	517	0.5	17	66	26.3	734	0.6	51	251	2,579
21-44	3,448	16.5	38,141	0.5	18	8,735	41.8	96,627	0.7	66	20,890	215,480
45-64	16,535	45.1	183,892	0.6	22	12,835	35.0	143,605	0.7	54	36,682	384,314
65-74	13,177	63.5	149,532	0.6	23	4,368	21.0	49,038	0.6	35	20,763	226,160
75-84	8,662	53.9	92,999	0.6	23	3,294	20.5	34,873	0.7	34	16,056	160,217
85 and older	7,762	41.6	77,840	0.7	23	2,519	13.5	25,429	0.7	28	18,639	174,059
<b>Other Eligibles</b>	62,129	50.8	687,268	0.6	23	14,062	11.5	153,717	0.6	29	122,265	1,269,734
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
6-14	2	28.6	24	0.6	29	0	0.0	0	0.0	0	7	66
15-20	4	26.7	37	0.8	48	3	20.0	32	0.4	30	15	152
21-44	69	8.6	670	0.4	12	125	15.6	1,212	0.5	49	800	6,789
45-64	58	28.0	527	0.5	17	42	20.3	394	0.5	33	207	1,338
65-74	21,840	50.1	241,439	0.6	23	4,950	11.4	54,777	0.6	31	43,553	450,209
75-84	25,988	54.5	292,415	0.6	23	5,844	12.3	64,599	0.6	29	47,654	509,931
85 and older	14,168	47.2	152,156	0.6	23	3,098	10.3	32,703	0.6	27	30,029	301,249
<b>Male</b>	51,352	40.8	558,206	0.6	21	28,640	22.7	313,321	0.7	54	125,966	1,266,357
<b>Disabled</b>	27,184	34.9	292,228	0.6	21	23,841	30.6	261,649	0.7	59	77,822	778,478
5 and younger	5	31.3	60	0.4	7	4	25.0	48	0.6	109	16	168
6-14	25	73.5	281	0.5	13	12	35.3	141	0.4	22	34	367
15-20	54	17.9	604	0.4	13	78	25.9	833	0.7	65	301	2,857
21-44	4,734	17.0	52,385	0.6	19	10,452	37.6	116,888	0.7	67	27,827	287,071
45-64	10,896	40.3	119,786	0.6	21	8,700	32.1	97,035	0.8	60	27,066	279,092
65-74	6,348	59.5	69,955	0.6	22	2,189	20.5	23,596	0.7	38	10,661	109,400
75-84	3,344	46.6	33,186	0.6	20	1,685	23.5	16,555	0.8	36	7,183	61,996
85 and older	1,778	37.6	15,971	0.7	21	721	15.2	6,553	0.7	32	4,734	37,527
<b>Other Eligibles</b>	24,168	50.2	265,978	0.6	21	4,799	10.0	51,672	0.6	30	48,144	487,879
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
6-14	2	33.3	15	0.2	4	0	0.0	0	0.0	0	6	63
15-20	2	28.6	24	0.5	17	0	0.0	0	0.0	0	7	68
21-44	43	19.1	357	0.5	14	49	21.8	438	0.5	47	225	1,511
45-64	59	41.0	462	0.6	21	28	19.4	241	0.4	40	144	905
65-74	11,604	49.0	126,702	0.6	21	2,291	9.7	25,132	0.6	33	23,690	237,283
75-84	9,514	53.7	106,898	0.6	21	1,748	9.9	18,890	0.6	27	17,714	186,222
85 and older	2,944	46.3	31,520	0.6	20	683	10.7	6,971	0.6	27	6,358	61,827
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	19

Table D7D

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2002 file for Florida, released by CMS in 07/2006. This table was produced on 04/19/2007.

a. Table D.7D 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 2002. 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 2002. 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 D.8  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,  
 BY BENEFICIARY CHARACTERISTIC<sup>a, b</sup>  
 DUAL ELIGIBLE BENEFICIARIES, FLORIDA, 2002

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>\$296</b>	<b>6.6</b>	<b>46,411</b>	<b>440,726</b>
<b>Age</b>				
0-64	439	8.0	2,966	31,212
65-74	358	7.5	5,791	57,036
75-84	306	6.8	15,481	146,617
85 and older	250	5.9	22,172	205,849
Unknown	29	3.3	1	12
<b>Gender</b>				
Female	288	6.6	33,383	322,975
Male	318	6.6	13,028	117,751
Unknown	0	0.0	0	0
<b>Race</b>				
White	299	6.8	34,337	322,127
African American	280	5.8	6,903	70,377
Other/unknown	296	6.3	5,171	48,222
<b>Basis of Eligibility<sup>c</sup></b>				
Aged	286	6.4	16,944	163,404
Disabled	302	6.7	29,467	277,322
Adults	0	0.0	0	0
Children	0	0.0	0	0
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 2002 file for Florida, released by CMS in 07/2006. This table was produced on 04/19/2007.

a. Table D.8 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their 2002 Medicaid enrollment. A total of 24,673 beneficiaries who were in nursing facilities for part of their enrollment and their 225,320 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.

c. 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.

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 D.9  
 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, FLORIDA, 2002

Therapeutic Category	No. of Rx per Bene Mo among Users										\$ per Bene Mo among Users										Users			
	Patented					Off-Patent					Patented					Off-Patent					Total Rx \$	No.	As % of Dual All-Year NF Residents	No. of Bene Mos
	Total	Brand-Name	Off-Brand-Name	Generic	Total	Brand-Name	Off-Brand-Name	Generic	Total	Brand-Name	Off-Brand-Name	Generic	Total	Brand-Name	Off-Brand-Name	Generic								
Anti-infective Agents	0.4	0.2	0.0	0.2	\$24	\$20	\$2	\$2	\$15	\$59	\$87	\$73	\$15	132,541	\$7,785,187	31,917	68.8 %	326,737						
Biologics	0.1	0.1	0.0	0.0	1	1	0	0	23	15	14	0	23	6,291	95,722	6,031	13.0	67,692						
Antineoplastic Agents	0.5	0.1	0.0	0.4	71	22	1	48	115	141	281	118	115	26,545	3,747,063	5,638	12.1	52,975						
Endocrine/Metabolic Drugs	1.1	0.4	0.2	0.4	36	26	4	6	15	34	59	17	15	224,817	7,700,669	21,256	45.8	213,617						
Cardiovascular Agents	1.9	0.5	0.1	1.3	50	25	4	22	17	26	52	32	17	649,803	17,130,227	34,402	74.1	339,331						
Respiratory Agents	0.7	0.2	0.1	0.4	26	14	4	8	22	39	61	63	22	142,875	5,538,862	21,192	45.7	217,010						
Gastrointestinal Agents	0.9	0.4	0.0	0.5	52	42	1	10	21	60	108	51	21	205,886	12,363,482	23,515	50.7	236,307						
Genitourinary Agents	0.6	0.4	0.0	0.1	32	29	1	2	18	55	66	38	18	53,981	2,970,920	8,837	19.0	91,715						
CNS Drugs	1.6	0.9	0.1	0.6	98	81	5	12	20	62	90	60	20	519,213	32,054,580	33,002	71.1	328,162						
Stimulants/Anti-obesity/Anorexia	0.8	0.1	0.0	0.7	21	9	1	11	15	25	120	30	15	1,817	45,881	223	0.5	2,171						
Miscellaneous Psychological/Neurological Agents	0.7	0.7	0.0	0.0	86	86	0	0	41	119	120	0	41	54,124	6,443,495	7,484	16.1	74,544						
Analgesics and Anesthetics	1.0	0.4	0.1	0.5	44	36	2	7	12	43	80	37	12	235,189	10,094,322	22,821	49.2	226,905						
Neuromuscular Agents	1.2	0.4	0.1	0.7	59	35	4	20	29	51	86	56	29	171,588	8,681,097	14,353	30.9	147,809						
Nutritional Products	0.7	0.0	0.0	0.7	10	0	0	9	14	14	16	14	14	119,864	1,703,095	17,371	37.4	173,244						
Hematological Agents	1.0	0.3	0.2	0.5	47	39	3	5	10	48	134	17	10	158,933	7,550,332	15,984	34.4	159,174						
Topical Products	0.6	0.2	0.0	0.3	20	12	2	6	20	34	49	44	20	174,677	5,964,547	29,101	62.7	303,347						
Miscellaneous Products	0.3	0.0	0.0	0.2	6	2	1	4	15	23	75	220	15	10,532	244,441	4,094	8.8	40,512						
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	8	0	0	0	0	27	0	0	0	10,841	293,081	3,581	7.7	37,726						
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.	n.a.	2,899,517	130,407,003	n.a.	n.a.	n.a.						

Source: Data for this table are from the MAX 2002 file for Florida, released by CMS in 07/2006. This table was produced on 04/19/2007.

- a. Table D.9 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2002. A total of 24,673 beneficiaries who were in nursing facilities for part of their enrollment and their 225,320 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 2002. 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 Florida, 0.5 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 D9

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.

TABLE D.10  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS,  
 BY TOP-10 DRUG GROUP<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, FLORIDA, 2002

Top 10 Drug Groups in Nursing Facilities	Users			Among Users			
	Total Medicaid Rx \$	No. of Users	As % of All-Year NF Residents	No. of Bene Mos	No. of Rx per Bene Mo	\$ per Rx	Rx \$ per Bene Mo
ANTIPSYCHOTICS	\$16,706,341	19,325	41.6 %	198,474	0.6	\$130	\$84
ANTIDEPRESSANTS	12,135,103	29,252	63.0	297,877	0.7	56	41
ULCER DRUGS	10,971,215	23,870	51.4	243,237	0.7	67	45
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	6,447,203	7,469	16.1	74,749	0.7	119	86
ANTICONVULSANT	6,038,773	12,467	26.9	131,028	0.9	52	46
ANTIDIABETIC	5,359,279	17,224	37.1	175,899	0.8	37	30
ANALGESICS - Narcotic	5,140,140	23,258	50.1	231,372	0.7	33	22
ANTHYPERTENSIVE	4,892,062	20,313	43.8	205,054	0.7	33	24
ANALGESICS - ANTI-INFLAMMATORY	4,734,794	11,094	23.9	117,012	0.6	69	40
MISC. HEMATOLOGICAL	4,150,863	6,666	14.4	67,836	0.7	87	61
<b>Total</b>	<b>76,575,773</b>	<b>170,938</b>		<b>1,742,538</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>

Source: Data for this table are from the MAX 2002 file for Florida, released by CMS in 07/2006. This table was produced on 04/19/2007.

a. Table D.10 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2002. A total of 24,673 beneficiaries who were in nursing facilities for part of their enrollment and their 225,320 benefit months were excluded from the analysis.

b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2002. 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.

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

d. The top 10 drug groups were determined based on total 2002 Medicaid reimbursement for all-year nursing facility residents in this state. 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 Mo(s) = benefit month(s); CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.



TABLE D.10A

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR TOP 10 DRUG GROUPS COMBINED AND FIRST AND SECOND TOP DRUG GROUPS SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BOE, AND AGE<sup>a, b, c, d</sup>  
DUAL ELIGIBLE BENEFICIARIES, FLORIDA, 2002

Beneficiary Characteristics	All Top 10 Drug Groups					ANTIPSYCHOTICS					ANTIDEPRESSANTS				
	No. of Rx	Rx \$	No. of Users	Users as %		Mean No. of Rx	Mean Rx \$	No. of Bene Mos among Users	Users as %		Mean No. of Rx	Mean Rx \$	No. of Bene Mos among Users	Users as %	
				Residents	NF				Residents	NF				Residents	NF
<b>All</b>	<b>1,241,956</b>	<b>\$76,575,773</b>	<b>19,325</b>	<b>41.6 %</b>	<b>198,474</b>	<b>0.6</b>	<b>\$84</b>	<b>29,252</b>	<b>63.0 %</b>	<b>297,877</b>	<b>0.7</b>	<b>\$41</b>	<b>297,877</b>	<b>63.0 %</b>	<b>0.7</b>
<b>Female</b>	898,580	54,883,231	13,406	40.2	139,695	0.6	82	21,381	64.0	220,436	0.7	41	220,436	64.0	0.7
<b>Disabled</b>	536,438	32,688,308	7,950	40.0	81,974	0.6	81	13,197	66.3	135,234	0.7	41	135,234	66.3	0.7
64 or younger	56,710	3,708,342	698	52.5	7,796	0.7	108	1,081	81.3	11,966	0.8	46	11,966	81.3	0.8
65-74	62,873	3,861,504	791	47.9	8,357	0.7	101	1,227	74.3	12,976	0.8	44	12,976	74.3	0.8
75-84	178,636	10,738,250	2,671	44.3	27,824	0.6	80	4,245	70.4	43,483	0.7	42	43,483	70.4	0.7
85 and older	238,219	14,380,212	3,790	34.8	37,997	0.6	73	6,644	61.0	66,809	0.7	40	66,809	61.0	0.7
<b>Other Eligibles</b>	362,121	22,194,717	5,456	40.5	57,721	0.6	82	8,183	60.7	85,190	0.7	40	85,190	60.7	0.7
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0.0
65-74	57,314	3,563,786	807	52.6	8,805	0.7	97	1,113	72.6	11,930	0.7	42	11,930	72.6	0.7
75-84	143,189	8,903,085	2,125	45.5	22,734	0.6	85	3,035	64.9	31,851	0.7	41	31,851	64.9	0.7
85 and older	161,618	9,727,846	2,524	34.7	26,182	0.6	73	4,035	55.4	41,409	0.7	39	41,409	55.4	0.7
<b>Male</b>	343,376	21,692,542	5,919	45.4	58,779	0.7	91	7,871	60.4	77,441	0.7	41	77,441	60.4	0.7
<b>Disabled</b>	255,460	16,212,471	4,379	45.8	43,057	0.7	92	5,958	62.3	58,020	0.7	41	58,020	62.3	0.7
64 or younger	62,478	4,436,598	859	52.5	9,570	0.8	127	1,108	67.7	12,047	0.7	45	12,047	67.7	0.7
65-74	52,125	3,220,417	813	48.8	8,326	0.7	95	1,176	70.5	11,708	0.7	41	11,708	70.5	0.7
75-84	86,448	5,244,581	1,577	46.0	14,985	0.6	80	2,106	61.5	20,097	0.7	41	20,097	61.5	0.7
85 and older	54,409	3,310,875	1,130	39.8	10,176	0.6	73	1,568	55.2	14,168	0.7	37	14,168	55.2	0.7
<b>Other Eligibles</b>	87,916	5,480,071	1,540	44.5	15,722	0.7	87	1,913	55.3	19,421	0.7	40	19,421	55.3	0.7
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0.0
65-74	30,661	1,977,568	485	51.7	5,268	0.7	104	550	58.6	5,966	0.7	43	5,966	58.6	0.7
75-84	33,993	2,097,551	592	43.9	6,124	0.7	83	777	57.6	7,871	0.7	40	7,871	57.6	0.7
85 and older	23,262	1,404,952	463	39.6	4,330	0.6	72	586	50.1	5,584	0.7	36	5,584	50.1	0.7
<b>Unknown</b>	21	206	0	0.0	0	0.0	0	1	100.0	12	0.8	5	12	100.0	0.8

Source: Data for this table are from the MAX 2002 file for Florida, released by CMS in 07/2006. This table was produced on 04/19/2007.

a. Table D.10A includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2002. A total of 24,673 beneficiaries who were in nursing facilities for part of their enrollment and their 225,320 benefit months were excluded from the analysis.

b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2002. 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.

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

d. The top 10 drug groups were determined based on total 2002 Medicaid reimbursement for all-year nursing facility residents in this state. 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 Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.10B  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY  
 AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BOE, AND AGE<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, FLORIDA, 2002

Beneficiary Characteristics	ULCER DRUGS										MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL										ANTICONVULSANT														
	Users as %					Users as %					Users as %					Users as %					Users as %					Users as %									
	No. of Users	No. of Bene among Users	Mean No. of Rx	Mean Rx \$	Mean No. of Rx	No. of Users	No. of Bene among Users	Mean No. of Rx	Mean Rx \$	Mean No. of Rx	Residents	NF	No. of Bene Mos	No. of Users	No. of Bene among Users	Mean No. of Rx	Mean Rx \$	Mean No. of Rx	Residents	NF	No. of Bene Mos	No. of Users	No. of Bene among Users	Mean No. of Rx	Mean Rx \$	Mean No. of Rx	Residents	NF	No. of Bene Mos	No. of Users	No. of Bene among Users	Mean No. of Rx	Mean Rx \$		
<b>All</b>	<b>23,870</b>	<b>51.4 %</b>	<b>0.7</b>	<b>\$45</b>	<b>0.7</b>	<b>7,469</b>	<b>16.1 %</b>	<b>0.7</b>	<b>\$86</b>	<b>0.7</b>	<b>12,467</b>	<b>26.9 %</b>	<b>0.9</b>	<b>\$46</b>	<b>131,028</b>																				
<b>Female</b>	17,346	52.0	0.7	45	0.7	5,341	16.0	0.7	87	0.7	8,035	24.1	0.9	43	85,256																				
<b>Disabled</b>	10,060	50.6	0.7	46	0.7	3,249	16.3	0.7	89	0.7	4,866	24.5	0.9	45	51,423																				
64 or younger	799	60.1	0.7	45	0.7	81	6.1	0.7	183	0.7	935	70.3	1.0	67	10,450																				
65-74	983	59.5	0.7	46	0.7	224	13.6	0.8	95	0.8	727	44.0	1.0	53	7,773																				
75-84	3,183	52.8	0.7	46	0.7	1,176	19.5	0.7	87	0.7	1,632	27.1	0.9	41	17,130																				
85 and older	5,095	46.8	0.7	46	0.7	1,768	16.2	0.7	85	0.7	1,572	14.4	0.8	32	16,070																				
<b>Other Eligibles</b>	7,285	54.0	0.7	45	0.7	2,092	15.5	0.7	84	0.7	3,169	23.5	0.8	40	33,833																				
64 or younger	0	0.0	0.0	0	0.0	0	0.0	0.0	0	0.0	0	0.0	0.0	0	0																				
65-74	920	60.0	0.7	46	0.7	220	14.4	0.7	83	0.7	717	46.8	0.9	48	7,887																				
75-84	2,640	56.5	0.7	46	0.7	831	17.8	0.7	86	0.7	1,372	29.3	0.8	40	14,827																				
85 and older	3,725	51.2	0.7	44	0.7	1,041	14.3	0.7	83	0.7	1,080	14.8	0.8	35	11,119																				
<b>Male</b>	6,524	50.1	0.7	45	0.7	2,128	16.3	0.7	84	0.7	4,432	34.0	0.9	51	45,772																				
<b>Disabled</b>	4,682	48.9	0.7	45	0.7	1,593	16.6	0.7	86	0.7	3,403	35.6	0.9	54	35,150																				
64 or younger	921	56.3	0.7	46	0.7	105	6.4	0.6	112	0.6	1,183	72.3	1.1	74	13,212																				
65-74	863	51.8	0.7	48	0.7	228	13.7	0.7	82	0.7	747	44.8	0.9	46	7,791																				
75-84	1,632	47.6	0.7	44	0.7	698	20.4	0.7	83	0.7	983	28.7	0.9	42	9,709																				
85 and older	1,266	44.6	0.7	45	0.7	562	19.8	0.8	86	0.8	490	17.2	0.8	36	4,438																				
<b>Other Eligibles</b>	1,842	53.3	0.7	43	0.7	535	15.5	0.7	79	0.7	1,029	29.8	0.9	43	10,622																				
64 or younger	0	0.0	0.0	0	0.0	0	0.0	0.0	0	0.0	0	0.0	0.0	0	0																				
65-74	554	59.0	0.7	43	0.7	113	12.0	0.6	75	0.6	438	46.6	0.9	50	4,839																				
75-84	729	54.0	0.6	42	0.6	231	17.1	0.7	79	0.7	376	27.9	0.8	36	3,821																				
85 and older	559	47.8	0.7	44	0.7	191	16.3	0.7	81	0.7	215	18.4	0.8	39	1,962																				
<b>Unknown</b>	1	100.0	0.9	12	0.9	0	0.0	0.0	0	0.0	0	0.0	0.0	0	0																				

Source: Data for this table are from the MAX 2002 file for Florida, released by CMS in 07/2006. This table was produced on 04/19/2007.

- a. Table D.10B includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2002. A total of 24,673 beneficiaries who were in nursing facilities for part of their enrollment and their 225,320 benefit months were excluded from the analysis.
  - b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2002. 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.
  - c. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
  - d. The top 10 drug groups were determined based on total 2002 Medicaid reimbursement for all-year nursing facility residents in this state. 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 Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.10C  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY  
 AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BOE, AND AGE<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, FLORIDA, 2002

Beneficiary Characteristics	ANTIDIABETIC					ANALGESICS - Narcotic					ANTIHYPERTENSIVE				
	Users as %					Users as %					Users as %				
	No. of Users	No. of Bene NF Residents	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	No. of Bene NF Residents	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	No. of Bene NF Residents	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
<b>All</b>	<b>17,224</b>	<b>37.1 %</b>	<b>175,899</b>	<b>0.8</b>	<b>\$31</b>	<b>23,258</b>	<b>50.1 %</b>	<b>231,372</b>	<b>0.7</b>	<b>\$22</b>	<b>20,313</b>	<b>43.8 %</b>	<b>205,054</b>	<b>0.7</b>	<b>\$24</b>
<b>Female</b>	12,017	36.0	124,360	0.8	30	17,573	52.6	176,663	0.7	23	14,305	42.9	145,952	0.7	24
<b>Disabled</b>	6,780	34.1	69,656	0.8	31	10,798	54.3	108,568	0.7	23	8,344	41.9	84,318	0.7	24
64 or younger	680	51.1	7,432	1.0	39	1,027	77.2	11,176	0.9	31	563	42.3	6,197	0.7	25
65-74	984	59.6	10,351	0.9	35	1,131	68.5	11,710	0.8	27	890	53.9	9,296	0.8	26
75-84	2,580	42.8	26,319	0.8	31	3,429	56.9	34,613	0.7	23	2,679	44.4	27,068	0.7	24
85 and older	2,536	23.3	25,554	0.8	26	5,211	47.9	51,069	0.6	19	4,212	38.7	41,757	0.7	24
<b>Other Eligibles</b>	5,237	38.8	54,704	0.8	30	6,775	50.2	68,095	0.7	22	5,961	44.2	61,634	0.7	24
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	945	61.6	10,186	0.9	35	933	60.9	9,896	0.7	26	788	51.4	8,441	0.7	25
75-84	2,250	48.1	23,649	0.8	31	2,433	52.0	25,039	0.7	26	2,295	49.1	24,228	0.7	24
85 and older	2,042	28.1	20,869	0.8	27	3,409	46.8	33,160	0.6	19	2,878	39.5	28,965	0.7	24
<b>Male</b>	5,207	40.0	51,539	0.8	31	5,685	43.6	54,709	0.6	21	6,008	46.1	59,102	0.7	23
<b>Disabled</b>	3,837	40.1	37,410	0.8	31	4,288	44.8	41,140	0.7	22	4,374	45.7	42,476	0.7	23
64 or younger	670	41.0	7,135	0.9	39	951	58.1	10,014	0.9	39	744	45.5	7,955	0.7	24
65-74	848	50.9	8,541	0.8	32	786	47.2	7,660	0.6	20	936	56.1	9,458	0.8	25
75-84	1,501	43.8	14,236	0.8	30	1,410	41.1	13,388	0.6	19	1,591	46.4	15,274	0.7	23
85 and older	818	28.8	7,498	0.7	26	1,141	40.2	10,078	0.5	13	1,103	38.8	9,789	0.7	22
<b>Other Eligibles</b>	1,370	39.6	14,129	0.8	30	1,397	40.4	13,569	0.6	19	1,634	47.3	16,626	0.7	22
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	463	49.3	4,983	0.8	33	407	43.3	4,324	0.6	18	521	55.5	5,575	0.7	24
75-84	556	41.2	5,641	0.8	30	510	37.8	4,933	0.6	19	658	48.8	6,663	0.7	22
85 and older	351	30.0	3,505	0.7	24	480	41.1	4,312	0.6	19	455	38.9	4,388	0.7	21
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2002 file for Florida, released by CMS in 07/2006. This table was produced on 04/19/2007.

- a. Table D.10C includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2002. A total of 24,673 beneficiaries who were in nursing facilities for part of their enrollment and their 225,320 benefit months were excluded from the analysis.
- b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2002. 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.
- c. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
- d. The top 10 drug groups were determined based on total 2002 Medicaid reimbursement for all-year nursing facility residents in this state. 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 Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.10D  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR NINTH AND TENTH TOP DRUG GROUPS  
 SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BOE, AND AGE<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, FLORIDA, 2002

Beneficiary Characteristics	ANALGESICS - ANTI-INFLAMMATORY					MISC. HEMATOLOGICAL						
	Users as %		Users as %		Mean Rx \$	Users as %		Users as %		Mean Rx \$		
	No. of Users	Residents	No. of Users	Residents		No. of Users	Residents	No. of Users	Residents			
	No. of Users	No. of Bene Mos among Users	Mean Rx	No. of Bene Mos among Users	Mean Rx \$	No. of Bene Mos among Users	Mean Rx	No. of Bene Mos among Users	Mean Rx \$			
<b>All</b>	<b>11,094</b>	<b>23.9 %</b>	<b>0.6</b>	<b>117,012</b>	<b>\$41</b>	<b>6,666</b>	<b>14.4 %</b>	<b>67,836</b>	<b>0.7</b>	<b>\$61</b>	<b>46,411</b>	<b>440,726</b>
<b>Female</b>	8,579	25.7	0.6	91,039	42	4,622	13.8	47,542	0.7	61	33,382	322,963
<b>Disabled</b>	5,066	25.5	0.6	53,328	41	2,659	13.4	26,877	0.7	61	19,896	191,824
64 or younger	374	28.1	0.6	4,212	37	153	11.5	1,695	0.7	63	1,330	14,122
65-74	484	29.3	0.6	5,291	41	257	15.6	2,732	0.8	72	1,652	16,297
75-84	1,550	25.7	0.6	16,315	42	908	15.1	9,127	0.7	59	6,030	57,996
85 and older	2,658	24.4	0.6	27,510	41	1,341	12.3	13,323	0.7	60	10,884	103,409
<b>Other Eligibles</b>	3,513	26.0	0.6	37,711	42	1,963	14.6	20,665	0.7	62	13,486	131,139
64 or younger	0	0.0	0.0	0	0	0	0.0	0	0.0	0	0	0
65-74	436	28.4	0.6	4,825	43	239	15.6	2,610	0.7	63	1,533	15,707
75-84	1,295	27.7	0.6	13,933	43	739	15.8	7,885	0.7	63	4,675	46,199
85 and older	1,782	24.5	0.6	18,953	41	985	13.5	10,170	0.7	60	7,278	69,233
<b>Male</b>	2,515	19.3	0.6	25,973	37	2,044	15.7	20,294	0.7	61	13,028	117,751
<b>Disabled</b>	1,798	18.8	0.6	18,477	37	1,474	15.4	14,417	0.7	61	9,571	85,498
64 or younger	348	21.3	0.5	3,930	35	175	10.7	1,886	0.7	62	1,636	17,090
65-74	335	20.1	0.5	3,517	37	300	18.0	3,104	0.8	65	1,667	15,427
75-84	583	17.0	0.6	5,868	37	609	17.8	5,936	0.7	60	3,427	29,725
85 and older	532	18.7	0.6	5,162	37	390	13.7	3,491	0.7	58	2,841	23,256
<b>Other Eligibles</b>	717	20.7	0.6	7,496	38	570	16.5	5,877	0.7	61	3,457	32,253
64 or younger	0	0.0	0.0	0	0	0	0.0	0	0.0	0	0	0
65-74	214	22.8	0.6	2,410	38	160	17.0	1,776	0.7	63	939	9,605
75-84	280	20.8	0.5	2,881	35	243	18.0	2,489	0.7	60	1,349	12,697
85 and older	223	19.1	0.6	2,205	40	167	14.3	1,612	0.7	60	1,169	9,951
<b>Unknown</b>	0	0.0	0.0	0	0	0	0.0	0	0.0	0	0	12

Source: Data for this table are from the MAX 2002 file for Florida, released by CMS in 07/2006. This table was produced on 04/19/2007.

a. Table D.10D includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2002. A total of 24,673 beneficiaries who were in nursing facilities for part of their enrollment and their 225,320 benefit months were excluded from the analysis.

b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2002. 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.

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

d. The top 10 drug groups were determined based on total 2002 Medicaid reimbursement for all-year nursing facility residents in this state. 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 Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.11  
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D  
 AMONG DUALS, BY BENEFICIARY CHARACTERISTIC<sup>a,b</sup>  
 FLORIDA, 2002

Beneficiary Characteristics	No. of Benes with at Least One Part D Excl Rx	% Benes with at Least One Part D Excl Rx		No. of Part D Excl Rx per Bene		Total No. Part D Excl Rx	Total Part D Excl Rx \$	\$ per Part D Excl Rx	Part D Excl Rx as % of All Dual Rx	Total No. of Benes
		Excl Rx	%	Excl Rx	Bene					
<b>All</b>	<b>172,731</b>	<b>47.8</b>	<b>%</b>	<b>4.0</b>	<b>1,463,254</b>	<b>\$89</b>	<b>\$32,027,243</b>	<b>\$22</b>	<b>3.5</b>	<b>361,553</b>
<b>Age</b>										
5 and younger	17	73.9		9.9	228	522	12,008	53	9.2	23
6-14	59	74.7		8.2	651	294	23,255	36	4.1	79
15-20	198	34.5		2.4	1,397	63	36,143	26	2.4	574
21-44	19,463	39.1		3.2	160,143	158	7,837,188	49	4.6	49,743
45-64	32,886	51.3		4.8	307,632	147	9,433,939	31	4.0	64,099
65-74	43,720	44.3		3.6	353,010	59	5,820,645	16	2.8	98,667
75-84	43,780	49.4		4.1	365,381	59	5,250,340	14	2.8	88,607
85 and older	32,607	54.6		4.4	264,803	60	3,613,641	14	3.1	59,760
Unknown	1	100.0		9.0	9	84	84	9	24.1	1
<b>Basis of Eligibility<sup>c</sup></b>										
Aged	75,915	45.0		3.5	598,058	52	8,725,361	15	2.8	168,824
Disabled	96,409	50.4		4.5	852,784	121	23,212,945	27	3.9	191,143
Adults	391	25.2		1.5	2,288	56	86,701	38	5.0	1,553
Children	13	43.3		3.7	111	64	1,909	17	1.9	30
Unknown	3	100.0		4.3	13	109	327	25	5.9	3
<b>Gender</b>										
Female	119,956	50.9		4.3	1,017,921	74	17,406,723	17	3.1	235,586
Male	52,775	41.9		3.5	435,333	116	14,620,520	34	4.2	125,966
Unknown	0	0.0		0.0	0	0	0	0	0.0	1
<b>Race</b>										
White	92,879	51.0		4.6	829,127	82	14,930,836	18	3.0	182,107
African American	27,336	39.1		2.7	191,316	76	5,282,450	28	3.3	69,930
Other/unknown	52,516	48.0		4.0	432,811	108	11,813,957	27	4.5	109,516
<b>Use of Nursing Facilities<sup>d</sup></b>										
Entire year	27,176	58.6		5.5	254,789	76	3,510,919	14	2.7	46,411
Part year	15,784	64.0		4.9	121,238	76	1,864,067	15	3.2	24,673
None	129,771	44.7		3.7	1,077,227	92	26,652,257	25	3.6	290,469
<b>Maintenance Assistance Status</b>										
Cash	90,639	46.8		3.9	763,978	86	16,633,791	22	3.5	193,563
Medically needy	952	63.9		6.5	9,665	173	258,219	27	3.2	1,489
Poverty related	47,050	45.8		3.8	387,693	75	7,755,937	20	3.1	102,829
Other/unknown	34,090	53.5		4.6	291,918	116	7,379,296	25	4.0	63,672

Source: Data for this table are from the MAX 2002 file for Florida, released by CMS in 07/2006. This table was produced on 04/19/2007.

- a. Table D.11 includes the beneficiaries represented by Cell G of Table 1. Beneficiaries include all dual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2002.
- b. The statute establishing the Medicare Part D prescription program that started in 2006 excludes several types of drugs from coverage. State Medicaid programs have been allowed to exclude these drugs since 1990, but many states have chosen to cover them, and if states cover them for any Medicaid beneficiaries they must also cover them for dual eligibles, who as of 2006 receive the remainder of their prescription drug coverage through Part D. Excluded drugs include benzodiazepines; barbiturates; nonprescription (OTC) medications; prescription vitamins and minerals (not including prenatal vitamins and fluoride preparations); and drugs used for anorexia, weight loss, or weight gain. Other excluded drugs include those that promote fertility; those used for cosmetic purposes or hair growth, for symptomatic relief of coughs and colds; or drugs for which the manufacturer requires that associated tests or monitoring services be purchased exclusively from the manufacturer.
- c. 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.
- d. Please refer to footnote f on Table 1 for methodology used to determine use of nursing facilities.

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

TABLE D.12  
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D  
 AMONG DUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC<sup>a,b</sup>  
 FLORIDA, 2002

Beneficiary Characteristics	No. Rx per Bene Mo.	Rx \$ per Bene Mo.	\$ per Rx	Barbiturate \$ per Bene Mo.	Benzodiazapine \$ per Bene Mo.	No. of Bene Mos
All	0.4	\$9	\$22	\$0	\$3	3,699,321
<b>Age</b>						
5 and younger	1.0	50	53	0	11	239
6-14	0.8	28	36	0	1	827
15-20	0.2	6	26	0	1	5,656
21-44	0.3	15	49	0	4	510,858
45-64	0.5	14	31	0	4	665,649
65-74	0.3	6	16	0	3	1,023,052
75-84	0.4	6	14	0	3	918,366
85 and older	0.5	6	14	0	3	574,662
Unknown	0.8	7	9	0	0	12
<b>Basis of Eligibility<sup>c</sup></b>						
Aged	0.3	5	15	0	2	1,746,168
Disabled	0.4	12	27	0	4	1,941,696
Adults	0.2	8	38	0	2	11,159
Children	0.4	7	17	0	0	271
Unknown	0.5	12	25	0	1	27
<b>Gender</b>						
Female	0.4	7	17	0	3	2,432,957
Male	0.3	12	34	0	3	1,266,357
Unknown	0.0	0	0	0	0	7
<b>Race</b>						
White	0.5	8	18	0	4	1,829,744
African American	0.3	7	28	0	1	725,447
Other/unknown	0.4	10	27	0	3	1,144,130
<b>Use of Nursing Facilities<sup>d</sup></b>						
Entire year	0.6	8	14	0	3	440,726
Part year	0.5	8	15	0	4	225,320
None	0.4	9	25	0	3	3,033,275
<b>Maintenance Assistance Status</b>						
Cash	0.4	8	22	0	3	2,081,968
Medically needy	0.7	18	27	0	6	14,134
Poverty related	0.4	8	20	0	3	1,022,003
Other/unknown	0.5	13	25	0	3	581,216

Source: Data for this table are from the MAX 2002 file for Florida, released by CMS in 07/2006. This table was produced on 04/19/2007.

- a. Table D.12 includes the beneficiaries represented by Cell G of Table 1. Beneficiaries include all dual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2002.
- b. The statute establishing the Medicare Part D prescription program that started in 2006 excludes several types of drugs from coverage. State Medicaid programs have been allowed to exclude these drugs since 1990, but many states have chosen to cover them, and if states cover them for any Medicaid beneficiaries they must also cover them for dual eligibles, who as of 2006 receive the remainder of their prescription drug coverage through Part D. Excluded drugs include benzodiazepines; barbiturates; nonprescription (OTC) medications; prescription vitamins and minerals (not including prenatal vitamins and fluoride preparations); and drugs used for anorexia, weight loss, or weight gain. Other excluded drugs include those that promote fertility; those used for cosmetic purposes or hair growth, for symptomatic relief of coughs and colds; or drugs for which the manufacturer requires that associated tests or monitoring services be purchased exclusively from the manufacturer.
- c. 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.
- d. Please refer to footnote f on Table 1 for methodology used to determine use of nursing facilities.
- Bene(s) = beneficiary (or beneficiaries); CMS = Center for Medicare and Medicaid Services; Excl = excluded; MAX = Medicaid Analytic Extract; OTC = over-the-counter; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.



TABLE D.13  
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D  
 FOR SELECTED DRUG CATEGORIES AMONG DUALS<sup>a,b,c</sup>  
 FLORIDA, 2002

Drug Category	No. Users	Rx \$ per User	Total Rx \$	Rx \$ as % of All Part D Excl Rx \$	Total No. Rx.	\$ per Rx	No. Rx as % of All Part D Excl Rx
<b>All</b>	<b>243,459</b>	<b>\$132</b>	<b>\$32,027,243</b>	<b>100.0 %</b>	<b>1,453,254</b>	<b>\$22</b>	<b>100.0 %</b>
Anorexia or weight loss/gain	0	0	0	0.0	0	0	0.0
Fertility drugs	0	0	0	0.0	0	0	0.0
Drugs for cosmetic purposes	135	15	2,092	0.0	202	10	0.0
Cough and cold medications	22,395	104	2,336,706	7.3	57,273	41	3.9
Vitamins and minerals	64,131	84	5,383,496	16.8	375,818	14	25.9
Non-prescription drugs	39,019	60	2,358,649	7.4	177,883	13	12.2
Barbiturates	2,831	71	201,495	0.6	29,391	7	2.0
Benzodiazepines	105,290	110	11,634,144	36.3	775,038	15	53.3
Other Part D Excl Rx Drugs	9,658	1,047	10,110,661	31.6	37,649	269	2.6

Source: Data for this table are from the MAX 2002 file for Florida, released by CMS in 07/2006. This table was produced on 04/19/2007.

a. Table D.13 includes the beneficiaries represented by Cell G of Table 1. Beneficiaries include all dual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2002. A user is a beneficiary who had at least one prescription filled for a Part D excluded drug in 2002. A beneficiary who used drugs from two or more Part D excluded categories was counted as a user for each category. Therefore, the sum of users across drug categories may exceed the total number of individual users as noted on Table D11.

b. Includes OTC drugs as well as prescription drugs.

c. The statute establishing the Medicare Part D prescription program that started in 2006 excludes several types of drugs from coverage. State Medicaid programs have been allowed to exclude these drugs since 1990, but many states have chosen to cover them, and if states cover them for any Medicaid beneficiaries they must also cover them for dual eligibles, who as of 2006 receive the remainder of their prescription drug coverage through Part D. Excluded drugs include benzodiazepines; barbiturates; nonprescription (OTC) medications; prescription vitamins and minerals (not including prenatal vitamins and fluoride preparations); and drugs used for anorexia, weight loss, or weight gain. Other excluded drugs include those that promote fertility; those used for cosmetic purposes or hair growth, for symptomatic relief of coughs and colds; or drugs for which the manufacturer requires that associated tests or monitoring services be purchased exclusively from the manufacturer.

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







SUPPLEMENTAL TABLE 1C  
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 TO 74 <sup>a, b</sup>  
 FLORIDA, 2002

Total Number of Dual Eligible Beneficiaries, Age 65-74 98,667  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65-74 \$204,690,055  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65-74 \$2,075

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 65-74	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	18,095	18.3 %	0	0.0 %
1-500	15,193	15.4	3,337,363	1.6
501-1,000	10,201	10.3	7,559,449	3.7
1,001-1,500	8,514	8.6	10,613,865	5.2
1,501-2,000	7,715	7.8	13,459,014	6.6
2,001-2,500	6,928	7.0	15,574,153	7.6
2,501-3,000	6,051	6.1	16,608,051	8.1
3,001-3,500	5,327	5.4	17,282,623	8.4
3,501-4,000	4,421	4.5	16,546,475	8.1
4,001-4,500	3,568	3.6	15,140,075	7.4
4,501-5,000	2,777	2.8	13,174,487	6.4
5,001-5,500	2,078	2.1	10,884,197	5.3
5,501-6,000	1,602	1.6	9,199,710	4.5
6,001-6,500	1,230	1.2	7,675,356	3.7
6,501-7,000	928	0.9	6,259,801	3.1
7,001-7,500	748	0.8	5,412,607	2.6
7,501-8,000	591	0.6	4,577,441	2.2
8,001-8,500	491	0.5	4,044,392	2.0
8,501-9,000	387	0.4	3,385,364	1.7
9,001-9,500	283	0.3	2,613,963	1.3
9,501-10,000	250	0.3	2,434,646	1.2
10,001+	1,289	1.3	18,907,023	9.2

Source: Data for this table are from the MAX 2002 file for Florida, released by CMS in 07/2006. This table was produced on 04/19/2007.

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 2002.  
 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 75 TO 84<sup>a, b</sup>  
 FLORIDA, 2002

Total Number of Dual Eligible Beneficiaries, Age 75-84 88,607  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 75-84 \$187,528,038  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 75-84 \$2,116

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 75-84	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	13,196	14.9%	0	0.0%
1-500	12,076	13.6	2,773,243	1.5
501-1,000	9,261	10.5	6,870,243	3.7
1,001-1,500	8,283	9.3	10,364,331	5.5
1,501-2,000	7,687	8.7	13,432,881	7.2
2,001-2,500	7,125	8.0	16,002,181	8.5
2,501-3,000	6,337	7.2	17,405,027	9.3
3,001-3,500	5,496	6.2	17,835,115	9.5
3,501-4,000	4,595	5.2	17,181,575	9.2
4,001-4,500	3,548	4.0	15,041,511	8.0
4,501-5,000	2,754	3.1	13,053,342	7.0
5,001-5,500	2,077	2.3	10,874,028	5.8
5,501-6,000	1,500	1.7	8,597,001	4.6
6,001-6,500	1,125	1.3	7,018,601	3.7
6,501-7,000	855	1.0	5,758,621	3.1
7,001-7,500	596	0.7	4,310,748	2.3
7,501-8,000	462	0.5	3,576,906	1.9
8,001-8,500	345	0.4	2,839,537	1.5
8,501-9,000	252	0.3	2,202,507	1.2
9,001-9,500	198	0.2	1,831,214	1.0
9,501-10,000	159	0.2	1,547,964	0.8
10,001+	680	0.8	9,011,462	4.8

Source: Data for this table are from the MAX 2002 file for Florida, released by CMS in 07/2006. This table was produced on 04/19/2007.

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 2002.

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



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, FLORIDA, 2002

Beneficiary Characteristics	No. of Benes					No. of Bene Mos					
	All	Aged	Disabled	Adults	Children	All	Aged	Disabled	Adults	Children	Unknown
<b>All</b>	<b>380,639</b>	<b>175,725</b>	<b>203,153</b>	<b>1,725</b>	<b>33</b>	<b>3,992,216</b>	<b>1,857,193</b>	<b>2,120,786</b>	<b>13,914</b>	<b>296</b>	<b>27</b>
<b>Age</b>											
5 and younger	23	0	23	0	0	239	0	239	0	0	0
6-14	79	0	66	0	13	843	0	713	0	130	0
15-20	655	0	631	9	15	6,963	0	6,731	99	133	0
21-44	54,712	0	53,592	1,116	4	585,551	0	575,537	9,993	21	0
45-64	68,273	8	67,868	394	1	729,833	96	726,865	2,843	12	17
65-74	103,446	69,737	33,532	176	0	1,101,508	735,300	365,341	857	0	10
75-84	91,571	67,816	23,726	29	0	963,305	734,137	229,047	121	0	0
85 and older	61,879	38,163	23,715	1	0	603,962	387,648	216,313	1	0	0
Unknown	1	1	0	0	0	12	12	0	0	0	0
<b>Gender</b>											
Female	248,278	126,177	120,837	1,245	16	2,626,969	1,341,411	1,275,063	10,315	153	27
Male	132,360	49,548	82,315	480	17	1,365,240	515,782	845,716	3,599	143	0
Unknown	1	0	1	0	7	0	0	7	0	0	0
<b>Race</b>											
White	189,230	71,865	116,391	949	23	1,938,807	740,880	1,190,039	7,671	202	15
African American	75,857	30,964	44,387	500	5	812,463	329,024	479,405	3,975	47	12
Other/unknown	115,552	72,896	42,375	276	5	1,240,946	787,289	451,342	2,268	47	0
<b>Use of Nursing Facilities<sup>c</sup></b>											
Entire year	46,414	16,946	29,468	0	0	440,848	163,484	277,364	0	0	0
Part year	24,782	10,379	14,402	1	0	229,650	100,911	128,729	10	0	0
None	309,443	148,400	159,283	1,724	33	3,321,718	1,592,798	1,714,693	13,904	296	27
<b>Maintenance Assistance Status</b>											
Cash	208,607	95,724	112,006	877	0	2,297,012	1,062,550	1,228,287	6,175	0	0
Medically needy	1,489	8	1,414	66	1	14,918	52	14,285	571	10	0
Poverty related	106,233	65,167	40,857	195	11	1,088,420	657,879	428,827	1,594	93	27
Other/unknown	64,310	14,826	48,876	587	21	591,866	136,712	449,387	5,574	193	0
<b>Dual Status<sup>d</sup></b>											
Full dual, all year	365,120	168,181	195,245	1,658	33	3,827,223	1,776,017	2,037,634	13,249	296	27
Full dual, part year	15,519	7,544	7,908	67	0	164,993	81,176	83,152	665	0	0
<b>Managed Care Status</b>											
FFS all year	345,535	161,956	182,283	1,266	27	3,613,169	1,709,466	1,893,332	10,088	256	27
FFS part year, with Rx claims	11,329	4,717	6,442	168	2	122,057	50,629	69,873	1,531	24	0
FFS part year, no Rx claims	4,689	2,151	2,418	119	1	44,479	20,005	23,478	992	4	0
MC all year, with Rx claims	26	20	6	0	0	266	206	60	0	0	0
MC all year, no Rx claims	19,060	6,881	12,004	172	3	212,245	76,887	134,043	1,303	12	0



Source: Data for this table are from the MAX 2002 file for Florida, released by CMS in 07/2006. This table was produced on 04/19/2007.

- a. Table A.3 includes the beneficiaries represented by Cell F of Table 1. Benefit months are months during which beneficiaries had pharmacy benefit coverage.
- 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. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.
- d. The "Full dual, all year" group contains beneficiaries who had Medicare as well as Medicaid pharmacy benefits during all months of Medicaid enrollment in 2002. 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<sup>a</sup>  
 DUAL ELIGIBLE BENEFICIARIES, FLORIDA, 2002

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>380,639</b>	<b>3,992,216</b>	<b>361,553</b>	<b>3,699,321</b>	<b>0</b>	<b>292,895</b>
FFS all year	345,535	3,613,169	345,535	3,613,169	0	0
FFS part year, with Rx claims	11,329	122,057	11,329	67,560	0	54,497
FFS part year, with no Rx claims	4,689	44,479	4,689	18,592	0	25,887
MC all year, with Rx claims	26	266	0	0	0	266
MC all year, with no Rx claims	19,060	212,245	0	0	0	212,245

Source: Data for this table are from the MAX 2002 file for Florida, released by CMS in 07/2006. This table was produced on 04/19/2007.

a. Benefit months are months during which beneficiaries had pharmacy benefit coverage.

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.