

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

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TABLE 1  
OVERVIEW OF BENEFICIARY SELECTION CRITERIA FOR STUDY POPULATION  
NEW YORK, 1999

Inclusion Criteria (1999)	No. of Dual and Non-dual Eligible Benes (Cell)	No. of Dual Eligible Benes (Cell) <sup>g</sup>
1. Benes who were eligible for Medicaid during at least one month <sup>a</sup>	3,403,171 (A)	562,166 (E)
2. Benes who had Medicaid pharmacy benefits during at least one month <sup>b</sup>	3,361,073 (B)	540,138 (F)
3. Benes who had fee-for-service pharmacy benefit coverage during at least one month <sup>c, d, e</sup>	2,774,131 (C)	529,912 (G)
4. Benes who were all-year nursing facility residents <sup>f</sup>	97,546 (D)	86,158 (H)

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

- a. MAX data element "Eligible Months Count" was used to determine an individual's Medicaid eligibility. All individuals who had a value greater than zero were considered as beneficiaries and counted in Cell A.
- b. Counts in Cell B were obtained by excluding from Cell A beneficiaries who never had pharmacy benefit coverage during their Medicaid enrollment in 1999 (based on MAX data element "Eligible Restricted Benefits Flag"). Characteristics of beneficiaries represented by Cell B are shown in Appendix Table A.1.
- c. Cell C represents the study population for Tables 2 through 7D. Cell C was obtained by excluding from Cell B beneficiaries who were under MC plans during all months of Medicaid eligibility in 1999, because the MAX files would not include separate prescription drug claims for those beneficiaries. MC plans include HMOs, PHPs, or other MC organizations that provided pharmacy benefits under capitation arrangements. Beneficiaries included are those who were in fee-for-service, PCCM, or PHP plans in selected states. Beneficiaries in PHPs were included if they were in one of 18 states where no PHP in the state provided a pharmacy benefit (see footnote e). For all other states, beneficiaries in PHPs were excluded. For example, if a beneficiary was under fee-for-service, PCCM, or PHPs in one of the 18 states for three months of the year but enrolled in an MC plan for the remaining nine months, only the three months were counted toward the number of benefit months associated with the beneficiary. Therefore, benefit months included represent the benefit months with fee-for-service pharmacy benefits. Beneficiaries and their benefit months included and excluded based on this criterion are shown in Appendix Table A.2.
- d. The total Medicaid pharmacy reimbursement for New York in 1999 was \$2,024,502,247, of which \$200,028,780 was excluded from our analysis because those claims were made for beneficiaries who were outside the study population or took place during months that were excluded from the analysis.
- e. The 18 states where no PHP provided a pharmacy benefit in 1999 were AL, AR, CO, FL, GA, IA, IL, KY, MA, MI, MT, NE, NY, NC, OR, PA, UT, and WI. This list was constructed based on consultation with CMS staff and two CMS documents, which can be found at <http://www.cms.hhs.gov/medicaid/managedcare/mmcms699.asp> and at <http://www.cms.hhs.gov/medicaid/managedcare/mmcms99.asp>.
- f. Cell D represents the study population for Tables 8 through 10D. All-year nursing facility residents are the beneficiaries who resided in nursing facilities throughout their enrollment in 1999. These beneficiaries were identified by comparing the number of months during which the MAX files contained at least one claim from nursing facilities to the number of Medicaid eligible months. If the former is greater than or equal to the latter, the beneficiary was considered an all-year resident. If the former is less than the latter but not equal to zero, the beneficiary was considered a part-year resident. Part-year residents were excluded from the analysis because they are likely to be short-term residents and the level and pattern of their pharmacy benefit use may differ substantially from longer-term residents. The number of part-year residents and their benefit months are presented in footnotes to Tables 8 through 10D. Residents of mental hospitals for the aged, inpatient psychiatric facilities for individuals under age 21, or intermediate care facilities for the mentally retarded were excluded from the analysis.
- g. Pharmacy benefit use and reimbursement among full dual eligible beneficiaries are presented in Tables 11 through 18. To determine Medicaid-Medicare dual eligibility status, two MAX data elements ("Eligible Medicare Crossover Code -- Annual New Values" and "Eligible Restricted Benefits Flag") were used in combination. Beneficiaries represented in Cell G, the dual study population, include all dual eligible beneficiaries who had a fee-for-service pharmacy benefit at least during one month in 1999. All benefit months of such dual eligible beneficiaries, of which 0.0 percent were restricted benefit months without a pharmacy benefit in New York, were used in the dual tables. Characteristics of dual eligible beneficiaries represented by Cell F are shown in Appendix Table A.3, and characteristics of beneficiaries and their benefit months included in Cell F but excluded from Cell G are shown in Appendix Table A.4.
- Bene(s) = beneficiary (or beneficiaries); CMS = Center for Medicare and Medicaid Services; HMO = health maintenance organization; MAX = Medicaid Analytic Extract; MC = managed care; PCCM = primary care case management; PHP = prepaid health plan.

TABLE 2  
 CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY<sup>a,b</sup>  
 NEW YORK, 1999

Beneficiary Characteristics	No. of Benes						No. of Bene Mos						Other/Unknown
	All	Aged	Disabled	Adults	Children	Other/Unknown	All	Aged	Disabled	Adults	Children	Other/Unknown	
<b>All</b>	<b>2,774,131</b>	<b>366,899</b>	<b>610,603</b>	<b>680,962</b>	<b>1,115,667</b>	<b>0</b>	<b>24,339,532</b>	<b>3,792,872</b>	<b>6,528,380</b>	<b>5,063,023</b>	<b>8,955,257</b>	<b>0</b>	
<b>Age</b>													
5 and younger	427,789	23	16,639	0	411,127	0	3,480,900	173	156,765	0	3,323,962	0	
6-14	442,899	2	52,954	0	389,943	0	3,954,505	21	552,337	0	3,402,147	0	
15-20	243,786	3	35,766	0	208,017	0	2,052,870	22	372,185	0	1,680,663	0	
21-44	735,347	2	194,701	535,978	4,666	0	5,954,016	19	2,089,234	3,846,413	18,350	0	
45-64	380,416	1	235,639	144,774	2	0	3,735,497	12	2,519,816	1,215,645	24	0	
65-74	180,759	117,204	63,352	203	0	0	1,946,493	1,234,609	710,972	912	0	0	
75-84	145,951	136,353	9,598	0	0	0	1,556,496	1,449,742	106,754	0	0	0	
85 and older	108,664	106,716	1,947	1	0	0	1,096,647	1,076,379	20,259	9	0	0	
Unknown	108,520	6,595	7	6	101,912	0	562,108	31,895	58	44	530,111	0	
<b>Gender</b>													
Female	1,572,514	259,501	314,225	464,954	533,834	0	13,884,451	2,725,535	3,377,186	3,459,629	4,322,101	0	
Male	1,122,167	103,335	296,377	216,006	506,449	0	10,000,180	1,044,244	3,151,190	1,603,370	4,201,376	0	
Unknown	79,450	4,063	1	2	75,384	0	454,901	23,093	4	24	431,780	0	
<b>Race</b>													
White	815,102	151,190	203,503	188,632	271,777	0	7,319,289	1,514,406	2,212,483	1,383,444	2,208,956	0	
African American	571,546	36,139	100,335	188,883	246,189	0	4,626,981	373,920	1,045,026	1,357,599	1,850,436	0	
Other/unknown	1,387,483	179,570	306,765	303,447	597,701	0	12,393,262	1,904,546	3,270,871	2,321,980	4,895,865	0	
<b>Use of Nursing Facilities</b>													
All year	97,546	81,938	15,471	110	27	0	1,021,635	848,288	171,945	1,130	272	0	
Part year	44,191	31,642	11,873	555	121	0	441,584	310,060	124,976	5,355	1,193	0	
None	2,632,394	253,319	583,259	680,297	1,115,519	0	22,876,313	2,634,524	6,231,459	5,056,538	8,953,792	0	
<b>Maintenance Assistance Status</b>													
Cash	1,230,337	177,950	491,551	165,017	395,819	0	11,924,123	1,984,269	5,363,249	1,349,514	3,227,091	0	
Medically needy	984,697	188,947	119,052	181,956	494,742	0	7,998,914	1,808,588	1,165,131	1,218,403	3,806,792	0	
Poverty-related	142,463	0	0	15,318	127,145	0	1,072,745	0	0	75,754	996,991	0	
Other/unknown	416,634	2	0	318,671	97,961	0	3,343,750	15	0	2,419,352	924,383	0	
<b>Dual Medicare Status<sup>c</sup></b>													
Full dual, all year	529,577	309,608	213,364	6,549	56	0	5,657,727	3,252,515	2,351,554	53,193	465	0	
Full dual, part year	335	195	137	3	0	0	3,616	2,112	1,481	23	0	0	
Non-dual, all year	2,244,219	57,096	397,102	674,410	1,115,611	0	18,678,189	538,245	4,175,345	5,009,807	8,954,792	0	
<b>Managed Care Status</b>													
FFS all year	2,177,303	356,600	533,092	493,248	794,363	0	20,516,610	3,718,068	5,922,056	3,918,567	6,957,919	0	
FFS part year, with Rx claims	440,444	8,203	66,845	147,027	218,369	0	2,930,983	62,091	525,201	930,867	1,412,824	0	
FFS part year, no Rx claims	156,384	2,096	10,666	40,687	102,935	0	891,939	12,713	81,123	213,589	584,514	0	

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

Table 2

All Medicaid Beneficiaries

a. Table 2 includes the beneficiaries represented by Cell C 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. 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. The "Non-dual, all year" group includes beneficiaries who were never dually eligible or dually eligible but never had Medicaid fee-for-service pharmacy benefits. 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 3  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC<sup>a, b</sup>  
 NEW YORK, 1999

Beneficiary Characteristics	% with at Least One Rx	Mean No. of Rx	Mean Rx \$	\$ per Rx	Mean \$, All Services	Rx \$ as % of All Services	Mean OTC Drug \$ <sup>c</sup>	No. of Beneficiaries
All	61.4 %	11.5	\$658	\$57	\$8,449	7.8 %	\$13	2,774,131
<b>Age</b>								
5 and younger	61.3	3.3	93	28	2,521	3.7	11	427,789
6-14	56.1	3.5	176	50	2,864	6.1	6	442,899
15-20	50.5	3.3	169	52	3,622	4.7	3	243,786
21-44	64.8	10.4	782	75	8,578	9.1	8	735,347
45-64	78.0	26.8	1,647	61	13,900	11.8	29	380,416
65-74	77.4	28.3	1,324	47	13,157	10.1	33	180,759
75-84	66.7	24.6	1,101	45	20,301	5.4	23	145,951
85 and older	43.2	13.7	579	42	28,968	2.0	10	108,664
Unknown	12.1	0.3	9	26	1,141	0.8	2	108,520
<b>Basis of Eligibility</b>								
Aged	60.8	20.5	926	45	20,174	4.6	19	366,899
Disabled	78.0	27.1	1,818	67	19,120	9.5	28	610,603
Adults	62.5	7.1	412	58	3,530	11.7	6	680,962
Children	51.9	2.6	84	32	1,755	4.8	6	1,115,667
Unknown	0.0	0.0	0	0	0	0.0	0	0
<b>Gender</b>								
Female	65.6	13.1	674	52	8,421	8.0	14	1,572,514
Male	58.9	10.0	681	68	8,979	7.6	11	1,122,167
Unknown	16.2	0.5	12	26	1,518	0.8	2	79,450
<b>Race</b>								
White	64.7	14.6	802	55	11,575	6.9	12	815,102
African American	59.6	9.3	596	64	6,385	9.3	11	571,546
Other/unknown	60.3	10.6	598	57	7,463	8.0	13	1,387,483
<b>Use of Nursing Facilities</b>								
Entire year	21.7	4.9	423	87	47,523	0.9	3	97,546
Part year	55.7	18.3	1,188	65	37,966	3.1	18	44,191
None	63.0	11.6	658	57	6,505	10.1	13	2,632,394
<b>Maintenance Assistance Status</b>								
Cash	72.6	17.4	1,008	58	9,274	10.9	19	1,230,337
Medically needy	51.7	7.4	406	55	10,190	4.0	9	984,697
Poverty related	51.8	2.5	65	26	1,386	4.7	6	142,463
Other/unknown	54.7	6.7	421	63	4,311	9.8	6	416,634

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

Table 3

All Medicaid Beneficiaries

a. Table 3 includes beneficiaries represented by Cell C 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 4  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC<sup>a,b</sup>  
 NEW YORK, 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			
<b>All</b>	1.3	\$75	7.8 %	38.6 %	7.1 %	10.3 %	4.5 %	\$963	2,774,131	24,339,532	
<b>Age</b>											
5 and younger	0.4	11	3.7	54.1	4.1	2.3	0.5	310	427,789	3,480,900	
6-14	0.4	20	6.1	49.3	3.7	2.4	0.5	321	442,899	3,954,505	
15-20	0.4	20	4.7	43.9	3.5	2.4	0.6	430	243,786	2,052,870	
21-44	1.3	97	9.1	41.7	8.2	10.0	3.8	1,059	735,347	5,954,016	
45-64	2.7	168	11.8	26.8	12.5	23.7	12.0	1,416	380,416	3,735,497	
65-74	2.6	123	10.1	24.3	13.1	25.8	12.4	1,222	180,759	1,946,493	
75-84	2.3	103	5.4	20.6	11.0	23.1	10.8	1,904	145,951	1,556,496	
85 and older	1.4	57	2.0	16.4	7.0	13.6	5.8	2,870	108,664	1,096,647	
Unknown	0.1	2	0.8	11.3	0.5	0.2	0.0	220	108,520	562,108	
<b>Basis of Eligibility</b>											
Aged	2.0	90	4.6	21.2	10.3	19.7	8.6	1,952	366,899	3,792,872	
Disabled	2.5	170	9.5	28.3	12.0	23.3	11.8	1,788	610,603	6,528,380	
Adults	1.0	55	11.7	43.8	7.8	7.7	2.4	475	680,962	5,063,023	
Children	0.3	11	4.8	46.7	3.0	1.7	0.4	219	1,115,667	8,955,257	
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0	0	0	
<b>Gender</b>											
Female	1.5	76	8.0	39.5	7.8	11.8	5.3	954	1,572,514	13,884,451	
Male	1.1	76	7.6	38.9	6.6	8.9	3.7	1,008	1,122,167	10,000,180	
Unknown	0.1	2	0.8	15.2	0.7	0.3	0.0	265	79,450	454,901	
<b>Race</b>											
White	1.6	89	6.9	36.8	7.7	12.4	6.2	1,289	815,102	7,319,289	
African American	1.1	74	9.3	39.5	6.6	8.8	3.7	789	571,546	4,626,981	
Other/unknown	1.2	67	8.0	39.2	7.0	9.7	3.8	836	1,387,483	12,393,262	
<b>Use of Nursing Facilities</b>											
Entire year	0.5	40	0.9	14.3	2.2	3.2	1.7	4,538	97,546	1,021,635	
Part year	1.8	119	3.1	21.5	8.8	16.3	7.8	3,799	44,191	441,584	
None	1.3	76	10.1	39.8	7.3	10.4	4.5	749	2,632,394	22,876,313	
<b>Maintenance Assistance Status</b>											
Cash	1.8	104	10.9	39.2	9.4	15.5	7.1	957	1,230,337	11,924,123	
Medically needy	0.9	50	4.0	36.9	5.0	6.3	2.8	1,255	984,697	7,998,914	
Poverty related	0.3	9	4.7	46.7	3.0	1.6	0.4	184	142,463	1,072,745	
Other/unknown	0.8	52	9.8	37.8	6.9	7.2	2.1	537	416,634	3,343,750	

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

Table 4

All Medicaid Beneficiaries

a. Table 4 includes the beneficiaries represented by Cell C 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 5  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC<sup>a, b, c</sup>  
 NEW YORK, 1999

Beneficiary Characteristics	All Rx		Patented Brand-Name Drugs		Off-Patent Brand-Name Drugs		Generic Drugs	
	No. of Rx	Rx \$	No. of Rx	\$ per Rx	No. of Rx	Rx \$	No. of Rx	Rx \$
<b>All</b>	<b>1.3</b>	<b>\$75</b>	<b>0.5</b>	<b>\$57</b>	<b>0.2</b>	<b>\$12</b>	<b>0.5</b>	<b>\$9</b>
<b>Age</b>								
5 and younger	0.4	11	0.1	28	0.0	1	0.3	3
6-14	0.4	20	0.1	50	0.0	2	0.2	4
15-20	0.4	20	0.2	52	0.0	3	0.2	3
21-44	1.3	97	0.5	75	0.2	13	0.5	9
45-64	2.7	168	1.2	61	0.4	27	1.0	18
65-74	2.6	123	1.1	47	0.5	24	0.8	15
75-84	2.3	103	0.9	45	0.4	21	0.8	13
85 and older	1.4	57	0.5	42	0.3	12	0.5	8
Unknown	0.1	2	0.0	26	0.0	0	0.0	1
<b>Basis of Eligibility</b>								
Aged	2.0	90	0.8	45	0.4	18	0.7	11
Disabled	2.5	170	1.1	67	0.4	26	0.9	18
Adults	1.0	55	0.4	58	0.1	7	0.4	5
Children	0.3	11	0.1	32	0.0	1	0.2	2
Unknown	0.0	0	0.0	0	0.0	0	0.0	0
<b>Gender</b>								
Female	1.5	76	0.6	52	0.2	13	0.5	9
Male	1.1	76	0.5	68	0.2	11	0.4	8
Unknown	0.1	2	0.0	26	0.0	0	0.1	1
<b>Race</b>								
White	1.6	89	0.7	55	0.2	15	0.6	12
African American	1.1	74	0.5	64	0.2	9	0.4	7
Other/unknown	1.2	67	0.5	57	0.2	10	0.4	7
<b>Use of Nursing Facilities</b>								
Entire year	0.5	40	0.3	87	0.1	3	0.1	2
Part year	1.8	119	0.8	65	0.3	15	0.6	12
None	1.3	76	0.5	57	0.2	12	0.5	9
<b>Maintenance Assistance</b>								
<b>Status</b>								
Cash	1.8	104	0.7	58	0.3	17	0.6	12
Medically needy	0.9	50	0.4	55	0.1	7	0.4	6
Poverty related	0.3	9	0.1	26	0.0	1	0.2	2
Other/unknown	0.8	52	0.4	63	0.1	6	0.3	5

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

a. Table 5 includes the beneficiaries represented by Cell C 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 5

All Medicaid Beneficiaries

c. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In New York, 7.4 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all combined. For information about this classification method, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](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 6  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY<sup>a, b, c, d</sup>  
 NEW YORK, 1999

Therapeutic Category	No. of Rx per Bene Mo among Users				\$ per Bene Mo among Users				Total No. of Rx	Total Rx \$	No.	As % of All Benes	No. of Bene Mos				
	Patented		Off-Patent		Patented		Off-Patent										
	Total	Brand-Name	Generic	Total	Brand-Name	Generic	Total	Brand-Name									
Anti-infective Agents	0.3	0.2	0.0	0.1	\$34	\$32	\$0	\$2	\$104	\$170	\$69	\$13	3,355,002	\$349,819,399	1,031,814	37.2 %	10,215,911
Biologics	0.2	0.1	0.0	0.0	178	89	58	30	1057	755	2,476	1,142	15,458	16,339,966	8,416	0.3	91,914
Antineoplastic Agents	0.5	0.2	0.1	0.2	117	79	28	10	232	343	228	68	138,760	32,220,688	25,770	0.9	274,799
Endocrine/Metabolic Drugs	0.6	0.3	0.1	0.2	29	23	2	3	48	75	28	17	2,627,110	126,596,713	426,341	15.4	4,326,051
Cardiovascular Agents	1.3	0.5	0.3	0.5	48	27	15	7	38	52	47	14	6,296,575	236,322,115	450,721	16.2	4,882,911
Respiratory Agents	0.5	0.3	0.0	0.2	21	16	1	4	39	52	42	19	3,033,101	119,209,796	562,755	20.3	5,711,014
Gastrointestinal Agents	0.4	0.2	0.1	0.2	33	22	8	4	74	113	84	25	1,522,200	113,242,112	316,332	11.4	3,397,205
Genitourinary Agents	0.2	0.2	0.0	0.1	9	8	0	1	38	43	37	19	395,053	14,952,962	160,753	5.8	1,584,300
CNS Drugs	0.9	0.5	0.2	0.3	75	52	16	6	80	114	100	20	4,446,688	356,287,408	447,945	16.1	4,744,096
Stimulants/Anti-obesity/Anorexia	0.5	0.1	0.2	0.3	23	4	8	11	46	45	51	43	146,907	6,717,191	28,362	1.0	288,803
Miscellaneous Psychological/Neurological Agents	0.4	0.3	0.0	0.1	46	42	1	2	109	132	68	28	69,330	7,554,823	14,820	0.5	166,011
Analgesics and Anesthetics	0.4	0.1	0.0	0.2	15	9	3	3	41	98	67	14	2,430,100	99,504,332	657,005	23.7	6,662,913
Neuromuscular Agents	0.7	0.3	0.1	0.3	39	26	6	7	54	96	47	21	1,599,061	86,484,166	209,704	7.6	2,227,460
Nutritional Products	0.4	0.0	0.1	0.2	8	1	3	3	22	60	23	17	465,513	10,159,088	132,638	4.8	1,298,161
Hematological Agents	0.5	0.1	0.1	0.3	55	44	5	6	111	526	36	23	590,569	65,620,071	112,815	4.1	1,198,204
Topical Products	0.3	0.1	0.1	0.1	11	6	3	2	33	47	38	16	2,496,231	82,725,596	709,555	25.6	7,264,133
Miscellaneous Products	0.6	0.3	0.2	0.2	144	95	40	8	231	339	248	47	82,516	19,029,041	12,261	0.4	132,394
Unknown Therapeutic Category	0.4	0.0	0.0	0.0	14	0	0	0	38	0	0	0	2,161,560	81,688,000	565,019	20.4	5,904,619
<b>TOTAL NO. OF RX AND RX \$</b>	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	31,871,734	1,824,473,467	n.a.	n.a.	n.a.

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

- a. Table 6 includes the beneficiaries represented by Cell C 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 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.
- 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 New York, 7.4 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](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 7  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP<sup>a, b, c</sup>  
 NEW YORK, 1999

Top 10 Drug Groups	Users					Among Users		
	Total Medicaid Rx \$	No. As	% of All Benes	No. of Bene Mos	No. of Rx per Bene Mo	\$ per Rx	Rx \$ per Bene Mo	
ANTIVIRAL	\$229,195,151	124,020	4.5 %	1,340,277	0.5	\$314	\$171	
ANTIPSYCHOTICS	183,228,235	200,804	7.2	2,233,446	0.7	125	82	
ANTIDEPRESSANTS	107,916,852	311,822	11.2	3,387,280	0.5	65	32	
ULCER DRUGS	89,453,117	286,646	10.3	3,179,577	0.3	85	28	
ANTICONVULSANT	70,230,915	138,842	5.0	1,542,574	0.7	68	46	
ANTIASTHMATIC	67,675,136	483,374	17.4	5,171,697	0.4	37	13	
ANTIHYPERTENSIVE	64,315,555	278,618	10.0	3,117,571	0.6	37	21	
ANTIDIABETIC	62,817,344	217,276	7.8	2,410,385	0.6	42	26	
ANTIHYPERLIPIDEMIC	60,357,889	135,099	4.9	1,526,348	0.6	71	40	
CALCIUM BLOCKERS	60,002,410	170,778	6.2	1,911,339	0.6	51	31	

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

- a. Table 7 includes the beneficiaries represented by Cell C of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 1999. A beneficiary who used drugs from two or more groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
- c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 1999. For information about these drug groups, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).
- Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE 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>  
 NEW YORK, 1999

Beneficiary Characteristics	All Top 10 Drug Groups					ANTIVIRAL					ANTIPSYCHOTICS				
	No. of Rx	Rx \$	No. of Users	Users as % of All Benes	Mean No. of Rx	No. of Users	Users as % of All Benes	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	Mean No. of Rx	Mean Rx \$		
<b>All</b>	<b>13,058,172</b>	<b>\$995,192,604</b>	<b>124,020</b>	<b>4.5 %</b>	<b>0.5</b>	<b>1,340,277</b>	<b>4.5 %</b>	<b>0.5</b>	<b>\$171</b>	<b>200,804</b>	<b>7.2 %</b>	<b>0.7</b>	<b>\$82</b>		
<b>Female</b>	8,107,514	551,073,145	53,324	3.4	0.5	571,275	3.4	0.5	153	108,443	7.0	0.6	71		
<b>Disabled</b>	4,545,511	335,308,986	28,487	9.1	0.5	315,512	9.1	0.5	165	68,314	21.7	0.7	85		
5 and younger	18,620	1,050,032	255	3.8	0.8	2,846	3.8	0.8	116	31	0.5	0.3	22		
6-14	64,655	5,292,856	973	5.4	0.7	11,044	5.4	0.7	178	1,076	5.9	0.5	54		
15-20	49,547	3,997,300	333	2.5	0.4	3,695	2.5	0.4	128	1,457	11.0	0.6	68		
21-44	1,073,027	105,416,395	15,380	17.4	0.5	167,984	17.4	0.5	167	27,611	31.3	0.7	93		
45-64	2,446,460	170,161,502	10,566	7.8	0.5	118,398	7.8	0.5	171	31,645	23.4	0.7	84		
65-74	774,305	42,970,019	870	2.0	0.3	10,235	2.0	0.3	74	5,280	12.2	0.6	65		
75-84	107,867	5,826,685	100	1.4	0.2	1,192	1.4	0.2	34	1,002	13.6	0.6	58		
85 and older	11,030	594,197	10	0.6	0.1	118	0.6	0.1	7	212	13.2	0.6	50		
<b>Other Eligibles</b>	3,561,957	215,762,650	24,836	2.0	0.4	255,757	2.0	0.4	139	40,129	3.2	0.5	47		
5 and younger	76,931	2,315,663	1,146	0.6	0.5	12,152	0.6	0.5	65	223	0.1	0.2	7		
6-14	97,874	5,367,296	1,272	0.7	0.6	13,783	0.7	0.6	136	1,436	0.7	0.4	39		
15-20	51,946	3,024,635	1,083	0.9	0.3	10,807	0.9	0.3	58	1,296	1.0	0.3	35		
21-44	537,353	49,607,153	15,193	3.9	0.5	151,678	3.9	0.5	162	8,095	2.1	0.3	38		
45-64	474,335	30,520,227	3,598	4.4	0.5	37,747	4.4	0.5	182	3,246	4.0	0.4	45		
65-74	861,378	46,813,822	1,010	1.4	0.2	11,661	1.4	0.2	46	5,761	7.8	0.6	60		
75-84	1,022,862	54,885,139	1,066	1.1	0.2	12,543	1.1	0.2	20	10,132	10.4	0.5	52		
85 and older	439,278	23,228,715	468	0.5	0.1	5,386	0.5	0.1	9	9,940	11.4	0.5	43		
<b>Male</b>	4,946,268	444,045,213	70,635	6.4	0.6	768,552	6.4	0.6	184	92,357	8.3	0.7	95		
<b>Disabled</b>	3,222,468	320,621,407	48,171	16.3	0.6	539,114	16.3	0.6	190	69,761	23.5	0.8	107		
5 and younger	28,302	1,525,067	269	2.7	0.7	2,861	2.7	0.7	124	127	1.3	0.4	32		
6-14	133,275	9,729,927	1,097	3.2	0.7	12,464	3.2	0.7	177	3,881	11.1	0.5	63		
15-20	77,120	6,644,112	320	1.4	0.4	3,644	1.4	0.4	148	2,934	13.0	0.6	80		
21-44	1,179,340	145,339,672	25,616	24.1	0.6	285,375	24.1	0.6	183	36,458	34.3	0.8	115		
45-64	1,495,561	139,391,787	20,203	20.2	0.6	227,188	20.2	0.6	203	23,723	23.7	0.8	107		
65-74	281,910	16,553,075	638	3.2	0.5	7,257	3.2	0.5	144	2,321	11.6	0.7	78		
75-84	24,940	1,334,929	27	1.2	0.3	313	1.2	0.3	73	277	12.5	0.7	61		
85 and older	2,020	102,838	1	0.3	0.2	12	0.3	0.2	17	40	11.6	0.6	34		
<b>Other Eligibles</b>	1,723,721	123,421,612	22,464	2.8	0.5	229,438	2.8	0.5	171	22,595	2.8	0.5	56		
5 and younger	108,070	3,035,976	979	0.5	0.4	10,243	0.5	0.4	62	309	0.1	0.2	15		
6-14	143,663	7,466,938	1,076	0.5	0.6	11,864	0.5	0.6	141	3,294	1.7	0.5	47		
15-20	43,456	2,871,409	380	0.4	0.3	4,008	0.4	0.3	76	1,462	1.7	0.5	62		
21-44	301,473	37,599,954	12,724	8.3	0.5	126,719	8.3	0.5	181	5,947	3.9	0.4	58		
45-64	297,362	26,403,021	5,879	9.2	0.6	60,273	9.2	0.6	204	2,265	3.6	0.4	54		
65-74	407,958	23,139,348	893	2.0	0.4	10,191	2.0	0.4	105	3,305	7.6	0.6	71		
75-84	332,330	18,087,591	433	1.1	0.2	4,995	1.1	0.2	52	3,941	10.1	0.6	55		
85 and older	89,409	4,817,375	100	0.5	0.2	1,145	0.5	0.2	29	2,072	10.6	0.5	45		
<b>Unknown</b>	4,515	77,949	62	0.1	0.2	456	0.1	0.2	19	5	0.0	0.1	7		

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

a. Table 7A includes the beneficiaries represented by Cell C of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 1999. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

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

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

TABLE 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>  
 NEW YORK, 1999

Beneficiary Characteristics	ANTIDEPRESSANTS					ULCER DRUGS					ANTICONVULSANT				
	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
<b>All</b>	<b>311,822</b>	<b>11.2 %</b>	<b>3,387,280</b>	<b>0.5</b>	<b>\$32</b>	<b>286,646</b>	<b>10.3 %</b>	<b>3,179,577</b>	<b>0.3</b>	<b>\$28</b>	<b>138,842</b>	<b>5.0 %</b>	<b>1,542,574</b>	<b>0.7</b>	<b>\$46</b>
<b>Female</b>	206,071	13.2	2,244,191	0.5	32	194,005	12.4	2,159,992	0.3	28	75,076	4.8	833,663	0.6	42
<b>Disabled</b>	117,631	37.4	1,328,240	0.5	37	88,811	28.3	1,011,486	0.4	31	53,368	17.0	606,974	0.7	49
5 and younger	13	0.2	143	0.3	13	507	7.5	5,588	0.4	16	494	7.3	5,484	0.6	41
6-14	892	4.9	9,721	0.4	27	642	3.5	7,329	0.3	24	1,940	10.7	22,213	0.7	52
15-20	1,661	12.5	18,438	0.4	30	804	6.1	9,030	0.3	23	1,683	12.7	19,134	0.7	56
21-44	38,023	43.1	422,808	0.6	40	18,020	20.4	201,335	0.3	31	22,506	25.5	254,461	0.8	56
45-64	64,294	47.5	729,036	0.6	37	48,652	35.9	552,594	0.4	32	22,849	16.9	260,476	0.7	45
65-74	11,169	25.7	129,786	0.5	27	17,340	40.0	202,464	0.4	30	3,451	8.0	40,037	0.6	28
75-84	1,409	19.1	16,392	0.5	25	2,554	34.6	29,806	0.4	33	408	5.5	4,752	0.6	24
85 and older	170	10.6	1,916	0.5	26	292	18.2	3,340	0.4	39	37	2.3	417	0.5	16
<b>Other Eligibles</b>	88,440	7.1	915,951	0.4	25	105,193	8.5	1,148,498	0.3	25	21,708	1.7	226,689	0.5	25
5 and younger	55	0.0	553	0.2	12	1,848	0.9	19,285	0.1	4	224	0.1	2,255	0.4	16
6-14	1,619	0.8	17,086	0.4	20	2,682	1.4	28,833	0.1	4	848	0.4	8,844	0.5	29
15-20	2,862	2.3	28,208	0.3	20	2,308	1.9	23,316	0.1	9	890	0.7	8,911	0.5	29
21-44	34,018	8.8	322,338	0.4	24	23,422	6.1	230,256	0.2	18	7,400	1.9	69,894	0.5	28
45-64	16,390	20.2	164,661	0.4	26	14,515	17.9	150,365	0.3	22	3,173	3.9	32,004	0.4	25
65-74	12,206	16.5	139,700	0.4	25	22,077	29.9	253,588	0.3	28	3,585	4.9	40,961	0.5	26
75-84	14,460	14.9	166,537	0.4	25	26,238	26.9	304,781	0.4	30	3,943	4.0	45,186	0.5	20
85 and older	6,830	7.8	76,868	0.5	25	12,103	13.9	138,074	0.4	33	1,645	1.9	18,634	0.5	20
<b>Male</b>	105,750	9.6	1,143,081	0.5	32	92,396	8.3	1,017,442	0.3	29	63,758	5.8	708,861	0.7	49
<b>Disabled</b>	65,486	22.1	740,949	0.5	37	47,572	16.1	539,658	0.4	33	48,931	16.5	558,231	0.8	55
5 and younger	64	0.6	658	0.3	15	637	6.5	6,944	0.3	18	639	6.5	6,986	0.6	39
6-14	2,435	7.0	27,034	0.4	27	967	2.7	10,939	0.3	22	3,316	9.5	37,510	0.7	45
15-20	2,121	9.4	23,833	0.5	33	790	3.5	8,982	0.3	26	2,588	11.5	29,409	0.7	56
21-44	28,358	26.6	320,392	0.6	40	14,370	13.5	162,861	0.4	32	24,503	23.0	280,532	0.8	62
45-64	28,882	28.8	327,122	0.5	37	24,452	24.4	276,412	0.4	34	16,161	16.1	183,988	0.7	49
65-74	3,341	16.7	38,635	0.5	28	5,704	28.6	65,932	0.4	31	1,573	7.9	18,076	0.6	30
75-84	260	11.7	3,019	0.5	27	592	26.7	6,811	0.4	34	144	6.5	1,649	0.7	26
85 and older	25	7.2	256	0.4	18	70	20.2	777	0.4	35	7	2.0	81	0.7	23
<b>Other Eligibles</b>	40,263	5.0	402,128	0.4	24	44,823	5.5	477,779	0.3	24	14,827	1.8	150,630	0.5	29
5 and younger	81	0.0	890	0.2	9	2,062	1.0	21,117	0.2	5	303	0.1	3,037	0.5	20
6-14	2,658	1.4	27,836	0.4	20	2,174	1.1	23,444	0.1	5	1,316	0.7	13,918	0.5	29
15-20	1,793	2.1	18,008	0.4	25	1,178	1.4	12,175	0.2	11	906	1.1	9,198	0.5	36
21-44	16,688	10.9	151,863	0.4	24	10,258	6.7	98,107	0.3	22	5,646	3.7	51,954	0.5	32
45-64	9,025	14.2	89,462	0.4	26	8,049	12.7	81,358	0.3	25	2,572	4.0	25,922	0.5	28
65-74	4,746	10.9	54,156	0.4	25	10,085	23.1	114,900	0.3	28	2,096	4.8	23,924	0.6	29
75-84	3,995	10.2	45,695	0.4	24	8,359	21.4	96,686	0.4	30	1,584	4.1	18,160	0.5	22
85 and older	1,277	6.5	14,218	0.4	25	2,658	13.6	29,992	0.4	31	404	2.1	4,517	0.5	18
<b>Unknown</b>	2	0.0	12	0.4	27	247	0.2	2,156	0.2	4	8	0.0	50	0.3	15

Table 7B  
 All Medicaid Beneficiaries

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

a. Table 7B includes the beneficiaries represented by Cell C of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 1999. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

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

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



TABLE 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>  
 NEW YORK, 1999

Beneficiary Characteristics	ANTI-ASTHMATIC				ANTI-HYPERTENSIVE				ANTI-DIABETIC						
	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
<b>All</b>	<b>483,374</b>	<b>17.4 %</b>	<b>5,171,697</b>	<b>0.4</b>	<b>\$13</b>	<b>278,618</b>	<b>10.0 %</b>	<b>3,117,571</b>	<b>0.6</b>	<b>\$21</b>	<b>217,276</b>	<b>7.8 %</b>	<b>2,410,385</b>	<b>0.6</b>	<b>\$26</b>
<b>Female</b>	290,140	18.6	3,117,873	0.4	14	178,912	11.5	2,013,036	0.6	21	148,375	9.5	1,654,794	0.6	26
<b>Disabled</b>	118,443	37.7	1,340,483	0.4	18	77,326	24.6	881,438	0.6	22	74,693	23.8	850,214	0.7	29
5 and younger	2,959	43.6	32,663	0.3	11	106	1.6	1,148	0.6	15	15	0.2	167	1.1	41
6-14	5,477	30.2	61,412	0.4	15	653	3.6	7,397	0.6	14	140	0.8	1,546	0.8	37
15-20	2,857	21.5	32,106	0.3	13	260	2.0	2,930	0.5	15	233	1.8	2,617	0.7	33
21-44	26,528	30.1	294,865	0.4	16	6,577	7.5	73,328	0.5	20	7,642	8.7	85,025	0.6	28
45-64	60,610	44.8	687,395	0.5	19	44,320	32.7	501,369	0.6	22	45,084	33.3	510,502	0.7	30
65-74	17,425	40.2	202,310	0.5	19	21,819	50.3	253,737	0.6	22	19,041	43.9	221,035	0.6	28
75-84	2,356	31.9	27,094	0.4	18	3,246	44.0	37,634	0.6	22	2,362	32.0	27,313	0.6	25
85 and older	231	14.4	2,638	0.4	16	345	21.5	3,895	0.6	23	176	11.0	2,009	0.6	18
<b>Other Eligibles</b>	171,679	13.8	1,777,254	0.3	11	101,586	8.2	1,131,598	0.5	20	73,682	5.9	804,580	0.6	23
5 and younger	33,174	16.5	338,438	0.2	4	115	0.1	1,182	0.4	10	46	0.0	414	0.7	29
6-14	26,168	13.5	271,470	0.2	7	625	0.3	6,713	0.5	9	307	0.2	3,149	0.8	32
15-20	10,475	8.5	104,110	0.2	7	214	0.2	2,076	0.3	9	427	0.3	4,037	0.7	26
21-44	41,932	10.8	397,793	0.3	11	7,198	1.9	69,271	0.4	14	8,233	2.1	75,777	0.5	20
45-64	16,738	20.6	171,678	0.4	14	14,774	18.2	150,148	0.5	19	12,832	15.8	130,108	0.6	24
65-74	16,590	22.5	189,603	0.4	17	28,548	38.7	325,808	0.5	20	22,237	30.1	252,315	0.6	25
75-84	19,167	19.7	220,368	0.4	17	34,990	35.9	405,056	0.5	21	22,633	23.2	260,037	0.6	23
85 and older	7,435	8.5	83,794	0.4	15	15,122	17.3	171,344	0.6	20	6,967	8.0	78,743	0.6	19
<b>Male</b>	190,698	17.2	2,031,895	0.3	12	99,702	9.0	1,104,507	0.6	21	68,899	6.2	755,569	0.6	26
<b>Disabled</b>	66,421	22.4	747,912	0.4	17	49,772	16.8	562,471	0.6	22	36,926	12.5	416,778	0.6	28
5 and younger	4,757	48.3	51,962	0.3	13	183	1.9	1,915	0.5	13	29	0.3	325	0.6	64
6-14	11,004	31.6	123,335	0.4	14	2,350	6.8	26,003	0.6	13	145	0.4	1,593	0.7	33
15-20	3,672	16.3	41,641	0.3	13	648	2.9	7,329	0.5	16	243	1.1	2,720	0.8	32
21-44	14,131	13.3	160,322	0.4	15	8,143	7.7	91,951	0.6	20	6,579	6.2	74,028	0.6	27
45-64	25,537	25.5	286,751	0.5	20	28,547	28.5	321,209	0.6	22	23,151	23.1	260,245	0.6	28
65-74	6,589	33.0	75,570	0.5	20	8,994	45.0	103,661	0.6	23	6,305	31.6	72,400	0.6	27
75-84	677	30.6	7,745	0.5	17	844	38.1	9,693	0.6	22	440	19.9	5,088	0.6	27
85 and older	54	15.6	586	0.4	14	63	18.2	710	0.6	22	34	9.8	379	0.6	24
<b>Other Eligibles</b>	124,252	15.3	1,283,725	0.3	9	49,930	6.2	542,036	0.5	20	31,973	3.9	338,791	0.6	23
5 and younger	45,210	21.5	459,464	0.2	5	228	0.1	2,326	0.4	7	57	0.0	595	0.5	28
6-14	32,937	16.8	341,319	0.3	8	2,036	1.0	21,158	0.5	10	267	0.1	2,703	0.7	31
15-20	6,395	7.6	65,881	0.3	8	337	0.4	3,524	0.4	11	307	0.4	3,052	0.7	29
21-44	11,367	7.4	106,207	0.4	12	4,579	3.0	43,751	0.4	15	4,838	3.1	44,914	0.6	21
45-64	7,839	12.3	78,871	0.4	14	9,834	15.5	97,344	0.5	19	8,180	12.9	80,842	0.6	23
65-74	9,366	21.5	105,839	0.4	18	16,055	36.9	181,170	0.5	21	10,096	23.2	113,285	0.6	24
75-84	8,554	21.9	97,421	0.4	19	13,232	33.9	151,978	0.5	21	6,722	17.2	76,714	0.6	23
85 and older	2,584	13.2	28,723	0.4	17	3,629	18.6	40,785	0.5	20	1,506	7.7	16,686	0.6	19
<b>Unknown</b>	2,579	2.4	22,323	0.2	3	4	0.0	28	0.5	6	2	0.0	22	0.5	19

Table 7C  
 All Medicaid Beneficiaries

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

- a. Table 7C includes the beneficiaries represented by Cell C of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 1999. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
  - b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
  - c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 1999. For information about these drug groups, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).
- Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE 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>  
 NEW YORK, 1999

Beneficiary Characteristics	ANTIHYPERTENSIVE				CALCIUM BLOCKERS							
	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Benes	No. of Bene Mos
<b>All</b>	<b>135,099</b>	<b>4.9 %</b>	<b>1,526,348</b>	<b>0.6</b>	<b>\$40</b>	<b>170,778</b>	<b>6.2 %</b>	<b>1,911,339</b>	<b>0.6</b>	<b>\$31</b>	<b>2,774,131</b>	<b>24,339,532</b>
<b>Female</b>	91,869	5.9	1,043,275	0.6	40	120,546	7.7	1,354,625	0.6	31	1,558,654	13,833,705
<b>Disabled</b>	45,406	14.5	520,213	0.6	41	49,776	15.8	567,662	0.6	33	314,221	3,377,156
5 and younger	8	0.1	89	0.3	9	11	0.2	112	0.6	23	6,784	64,222
6-14	22	0.1	259	0.2	12	58	0.3	652	0.6	31	18,141	190,187
15-20	29	0.2	330	0.3	12	101	0.8	1,113	0.5	33	13,267	138,163
21-44	3,256	3.7	36,722	0.5	36	4,139	4.7	45,974	0.6	32	88,270	938,579
45-64	27,842	20.6	316,623	0.6	41	28,350	20.9	320,890	0.6	33	135,400	1,457,130
65-74	12,631	29.1	147,376	0.6	43	14,599	33.7	169,820	0.7	34	43,376	489,503
75-84	1,537	20.8	17,874	0.6	45	2,249	30.5	26,093	0.7	33	7,382	82,605
85 and older	81	5.1	940	0.6	37	269	16.8	3,008	0.6	30	1,601	16,767
<b>Other Eligibles</b>	46,463	3.7	523,062	0.5	38	70,770	5.7	786,963	0.6	30	1,244,433	10,456,549
5 and younger	9	0.0	89	0.1	3	13	0.0	150	0.3	16	200,478	1,619,860
6-14	26	0.0	272	0.3	17	30	0.0	303	0.4	24	193,936	1,689,063
15-20	40	0.0	400	0.2	21	161	0.1	1,434	0.2	11	123,469	953,824
21-44	2,534	0.7	25,151	0.3	24	5,143	1.3	48,711	0.4	21	386,993	2,773,324
45-64	7,767	9.6	80,184	0.5	32	10,031	12.4	101,227	0.6	29	81,170	698,795
65-74	16,783	22.7	192,519	0.6	40	19,434	26.3	221,356	0.6	31	73,842	785,841
75-84	15,742	16.2	183,485	0.6	41	24,776	25.4	286,506	0.6	31	97,372	1,047,476
85 and older	3,562	4.1	40,962	0.5	40	11,182	12.8	127,276	0.6	30	87,173	888,366
<b>Male</b>	43,229	3.9	483,061	0.6	39	50,231	4.5	556,703	0.6	31	1,106,954	9,943,697
<b>Disabled</b>	24,547	8.3	279,448	0.6	41	25,255	8.5	285,756	0.6	34	296,375	3,151,166
5 and younger	7	0.1	72	0.5	20	18	0.2	196	0.3	15	9,855	92,543
6-14	26	0.1	294	0.3	17	76	0.2	867	0.5	26	34,813	362,150
15-20	39	0.2	423	0.3	28	101	0.4	1,120	0.5	39	22,499	234,022
21-44	4,785	4.5	54,529	0.5	36	4,336	4.1	48,912	0.6	35	106,431	1,150,655
45-64	15,310	15.3	173,530	0.6	42	15,595	15.6	175,343	0.6	34	100,239	1,062,686
65-74	4,110	20.6	47,457	0.6	44	4,667	23.4	54,030	0.6	33	19,976	221,469
75-84	260	11.7	3,026	0.6	44	414	18.7	4,748	0.6	31	2,216	24,149
85 and older	10	2.9	117	0.5	45	48	13.9	540	0.7	30	346	3,492
<b>Other Eligibles</b>	18,681	2.3	203,601	0.5	36	24,976	3.1	270,947	0.6	29	810,579	6,792,531
5 and younger	24	0.0	251	0.2	13	12	0.0	135	0.3	10	210,669	1,704,253
6-14	28	0.0	315	0.2	16	47	0.0	496	0.3	17	196,009	1,713,105
15-20	36	0.0	376	0.3	24	64	0.1	684	0.3	20	84,551	726,861
21-44	2,235	1.5	21,981	0.4	27	2,554	1.7	23,854	0.5	25	153,653	1,091,458
45-64	4,697	7.4	46,948	0.5	33	5,521	8.7	54,636	0.5	28	63,607	516,886
65-74	6,835	15.7	77,795	0.5	39	8,001	18.4	90,412	0.6	30	43,565	449,680
75-84	4,209	10.8	48,866	0.5	40	6,897	17.7	79,526	0.6	30	38,981	402,266
85 and older	617	3.2	7,069	0.5	39	1,880	9.6	21,204	0.6	27	19,544	188,022
<b>Unknown</b>	2	0.0	24	0.2	7	1	0.0	11	0.1	9	108,523	562,130

All Medicaid Beneficiaries

Table 7D

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

- a. Table 7D includes the beneficiaries represented by Cell C of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 1999. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
- c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 1999. For information about these drug groups, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).

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

TABLE 8  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,  
 BY BENEFICIARY CHARACTERISTIC<sup>a, b</sup>  
 NEW YORK, 1999

Beneficiary Characteristics	Rx \$ per Bene Mo \$40	No. of Rx per Bene Mo	No. of All-Year NF Residents	Bene Mos among All-Year NF Residents
<b>All</b>		<b>0.5</b>	<b>97,546</b>	<b>1,021,635</b>
<b>Age</b>				
0-64	149	1.2	10,150	112,721
65-74	61	0.9	12,548	136,328
75-84	32	0.5	29,199	306,755
85 and older	14	0.2	45,649	465,831
Unknown	0	0.0	0	0
<b>Gender</b>				
Female	32	0.4	70,193	738,890
Male	63	0.6	27,353	282,745
Unknown	0	0.0	0	0
<b>Race</b>				
White	27	0.3	59,548	603,112
African American	94	0.9	5,281	56,251
Other/unknown	55	0.6	32,717	362,272
<b>Basis of Eligibility</b>				
Aged	25	0.3	81,938	848,288
Disabled	114	1.1	15,471	171,945
Adults	760	4.0	110	1,130
Children	174	1.2	27	272
Unknown	0	0.0	0	0

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

a. Table 8 includes the beneficiaries represented by Cell D of Table 1, those who resided in nursing facilities throughout their 1999 Medicaid enrollment. A total of 44,191 beneficiaries who were in nursing facilities for part of their enrollment and their 441,584 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 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>  
 NEW YORK, 1999

Therapeutic Category	No. of Rx per Bene Mo among Users			\$ per Bene Mo among Users			Total # of Rx			Total 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	Patented Brand-Name	Off-Patent Brand-Name	Generic	No.	As % of All-Year NF Residents	No. of Bene Mos	
Anti-infective Agents	0.9	0.8	0.0	0.1	###	\$160	\$0	\$1	\$172	\$189	\$79	\$15	\$15	45,957	\$7,923,601	4,231	4.3 %	48,929
Biologicals	0.1	0.1	0.0	0.0	130	37	48	45	961	412	4,653	####	225	225	216,175	149	0.2	1,660
Antineoplastic Agents	0.6	0.4	0.1	0.1	156	136	13	7	273	379	175	53	1,712	467,806	261	0.3	2,996	
Endocrine/Metabolic Drugs	0.9	0.5	0.1	0.3	58	47	4	8	64	92	43	25	26,327	1,694,587	2,514	2.6	29,036	
Cardiovascular Agents	1.6	0.6	0.4	0.5	59	31	19	8	38	52	46	15	90,460	3,409,314	4,973	5.1	57,784	
Respiratory Agents	0.6	0.4	0.0	0.2	24	19	1	4	42	51	45	22	14,966	630,085	2,267	2.3	26,295	
Gastrointestinal Agents	0.5	0.2	0.1	0.2	35	21	9	5	69	116	78	24	17,407	1,200,427	2,922	3.0	34,146	
Genitourinary Agents	0.4	0.3	0.0	0.1	19	16	0	3	46	58	44	22	5,483	253,031	1,152	1.2	13,372	
CNS Drugs	0.9	0.7	0.0	0.1	94	88	3	3	108	118	87	31	167,893	18,107,513	17,256	17.7	193,325	
Stimulants/Anti-obesity/Anorexia	0.3	0.1	0.2	0.1	17	7	8	2	50	105	47	22	95	4,769	25	0.0	289	
Miscellaneous Psychological/Neurological Agents	0.4	0.4	0.0	0.0	53	51	0	1	119	124	73	43	2,864	342,199	554	0.6	6,513	
Analgesics and Anesthetics	0.4	0.2	0.1	0.2	22	15	4	3	50	87	63	15	14,874	746,938	2,956	3.0	34,578	
Neuromuscular Agents	0.8	0.3	0.2	0.4	41	24	8	8	49	94	47	20	16,279	793,471	1,685	1.7	19,386	
Nutritional Products	0.5	0.0	0.2	0.3	9	0	5	3	16	28	20	13	4,856	79,869	812	0.8	9,373	
Hematological Agents	0.6	0.3	0.1	0.2	130	122	4	4	213	384	40	21	15,139	3,224,882	2,231	2.3	24,767	
Topical Products	0.6	0.3	0.1	0.2	21	13	5	3	36	46	40	17	26,658	965,869	3,894	4.0	45,589	
Miscellaneous Products	0.5	0.2	0.1	0.1	130	99	27	4	280	431	237	33	453	126,669	85	0.1	971	
Unknown Therapeutic Category	0.5	0.0	0.0	0.0	23	0	0	0	43	0	0	0	25,149	1,085,826	4,011	4.1	46,443	
<b>TOTAL NO. OF RX AND RX \$</b>	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	476,797	41,273,031	n.a.	n.a.	n.a.

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

- a. Table 9 includes the beneficiaries represented by Cell D of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 1999. A total of 44,191 beneficiaries who were in nursing facilities for part of their enrollment and their 441,584 benefit months were excluded from the analysis.
- b. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 1999. A beneficiary who used drugs from two or more categories was counted as a user for each category. Therefore, the sum of users across categories may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- c. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
- d. For information about these therapeutic categories, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).
- e. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. For information about this classification method, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003). In New York, 7.4 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.

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 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>  
 NEW YORK, 1999

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	\$16,383,401	16,084	16.5 %	179,912	0.8	\$118	\$91
ANTIVIRAL	7,136,426	2,908	3.0	32,821	1.1	206	217
HEMATOPOIETIC AGENTS	2,927,631	1,671	1.7	18,261	0.5	301	160
ULCER DRUGS	979,715	2,731	2.8	32,146	0.4	83	30
ANTIHYPERTENSIVE	963,625	3,780	3.9	44,485	0.6	39	22
ANTIDEPRESSANTS	929,868	2,767	2.8	32,326	0.5	59	29
ANTIHYPERLIPIDEMIC	847,557	1,745	1.8	20,538	0.6	73	41
ANTIIDIABETIC	829,630	2,531	2.6	29,456	0.7	43	28
CALCIUM BLOCKERS	825,302	2,158	2.2	25,346	0.7	49	33
MISC. ENDOCRINE	842,034	479	0.5	5,581	0.5	329	151

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

a. Table 10 includes the beneficiaries represented by Cell D of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 1999. A total of 44,191 beneficiaries who were in nursing facilities for part of their enrollment and their 441,584 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 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.

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 1999 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 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> NEW YORK, 1999

Beneficiary Characteristics	All Top 10 Drug Groups					ANTIPSYCHOTICS					ANTIVIRAL					
	No. of Rx	Rx \$	No. of Users	Residents	Mean No. of Rx	No. of Users	Residents	Mean No. of Rx	Mean Rx \$	No. of Users	Residents	Mean No. of Rx	Mean Rx \$	No. of Users	Residents	Mean No. of Rx
<b>All</b>	<b>285,108</b>	<b>\$32,665,189</b>	<b>16,084</b>	<b>16.5 %</b>	<b>179,912</b>	<b>0.8</b>	<b>\$91</b>	<b>2,908</b>	<b>3.0 %</b>	<b>32,821</b>	<b>1.1</b>	<b>\$217</b>				
<b>Female</b>	180,339	18,099,814	10,949	15.6	122,972	0.7	84	829	1.2	9,093	1.0	202				
<b>Disabled</b>	53,964	6,304,828	1,839	22.8	21,025	0.9	131	683	8.5	7,486	1.1	214				
64 or younger	33,445	4,532,474	1,053	23.3	12,023	1.0	148	670	14.8	7,339	1.1	218				
65-74	15,646	1,336,369	494	23.1	5,717	0.9	122	12	0.6	135	0.1	6				
75-84	3,724	318,678	208	23.0	2,360	0.8	94	1	0.1	12	0.1	2				
85 and older	1,149	117,307	84	16.2	925	0.8	72	0	0.0	0	0.0	0				
<b>Other Eligibles</b>	126,375	11,794,986	9,110	14.7	101,947	0.7	75	146	0.2	1,607	0.5	149				
64 or younger	1,402	310,296	11	15.7	125	0.9	132	79	112.9	806	0.8	262				
65-74	25,339	2,295,918	1,056	21.2	12,089	0.8	111	16	0.3	189	0.2	39				
75-84	54,558	4,881,788	3,396	17.5	38,303	0.7	81	37	0.2	444	0.3	44				
85 and older	45,076	4,306,984	4,647	12.4	51,430	0.7	61	14	0.0	168	0.1	10				
<b>Male</b>	104,769	14,565,375	5,135	18.8	56,940	0.8	106	2,079	7.6	23,728	1.1	223				
<b>Disabled</b>	56,172	9,346,269	1,813	24.5	20,687	1.0	145	1,894	25.6	21,567	1.1	225				
64 or younger	48,446	8,493,871	1,399	25.4	15,928	1.0	154	1,856	33.7	21,132	1.1	226				
65-74	6,533	737,815	334	22.6	3,835	0.8	121	35	2.4	399	0.8	155				
75-84	1,036	102,176	66	20.4	764	0.8	100	3	0.9	36	0.7	294				
85 and older	157	12,407	14	15.1	160	0.7	58	0	0.0	0	0.0	0				
<b>Other Eligibles</b>	48,597	5,219,106	3,322	16.6	36,253	0.7	83	185	0.9	2,161	0.8	209				
64 or younger	1,152	440,381	8	12.3	96	0.3	26	86	132.3	1,004	0.8	268				
65-74	15,563	1,573,898	803	20.3	8,958	0.8	108	65	1.6	749	0.9	184				
75-84	22,130	2,127,371	1,541	18.1	16,981	0.7	82	31	0.4	372	0.6	121				
85 and older	9,752	1,077,456	970	13.1	10,218	0.7	64	3	0.0	36	0.1	7				
<b>Unknown</b>	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 New York, released by CMS in 11/2003. This table was produced on 06/25/2004.

a. Table 10A includes the beneficiaries represented by Cell D of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 1999. A total of 44,191 beneficiaries who were in nursing facilities for part of their enrollment and their 44,1584 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 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.

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 1999 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 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>  
 NEW YORK, 1999

Beneficiary Characteristics	HEMATOPOIETIC AGENTS						ULCER DRUGS						ANTIHYPERTENSIVE					
	Users as %			Users as %			Users as %			Users as %			Users as %			Users as %		
	No. of Users	No. of Bene Users	Mean No. of Rx	No. of Users	No. of Bene Users	Mean No. of Rx	No. of Users	No. of Bene Users	Mean No. of Rx	No. of Users	No. of Bene Users	Mean No. of Rx	No. of Users	No. of Bene Users	Mean No. of Rx	No. of Users	No. of Bene Users	Mean No. of Rx
<b>All</b>	<b>1,671</b>	<b>1.7 %</b>	<b>\$160</b>	<b>2,731</b>	<b>2.8 %</b>	<b>\$31</b>	<b>3,780</b>	<b>3.9 %</b>	<b>\$31</b>	<b>3,780</b>	<b>3.9 %</b>	<b>\$31</b>	<b>44,485</b>	<b>0.6</b>	<b>\$22</b>			
<b>Female</b>	1,084	1.5	154	1,898	2.7	30	2,596	3.7	30	2,596	3.7	30	30,921	0.6	21			
<b>Disabled</b>	268	3.3	152	567	7.0	34	697	8.6	34	697	8.6	34	8,142	0.6	24			
64 or younger	169	3.7	179	285	6.3	34	302	6.7	34	302	6.7	34	3,498	0.6	25			
65-74	77	3.6	101	233	10.9	31	333	15.6	31	333	15.6	31	3,913	0.6	23			
75-84	13	1.4	26	37	4.1	41	56	6.2	41	56	6.2	41	669	0.7	25			
85 and older	9	1.7	287	12	2.3	79	6	1.2	79	6	1.2	79	62	0.7	30			
<b>Other Eligibles</b>	816	1.3	154	1,331	2.1	29	1,899	3.1	29	1,899	3.1	29	22,479	0.5	20			
64 or younger	10	14.3	179	15	21.4	27	10	14.3	27	10	14.3	27	104	0.9	35			
65-74	128	2.6	106	394	7.9	27	593	11.9	27	593	11.9	27	7,054	0.5	20			
75-84	313	1.6	125	667	3.4	27	1,005	5.2	27	1,005	5.2	27	11,929	0.5	21			
85 and older	365	1.0	199	255	0.7	36	291	0.8	36	291	0.8	36	3,392	0.5	19			
<b>Male</b>	587	2.1	173	833	3.0	31	1,184	4.3	31	1,184	4.3	31	13,864	0.6	22			
<b>Disabled</b>	230	3.1	193	257	3.5	36	310	4.2	36	310	4.2	36	3,575	0.6	25			
64 or younger	198	3.6	200	170	3.1	38	204	3.7	38	204	3.7	38	2,331	0.7	24			
65-74	26	1.8	178	76	5.1	32	92	6.2	32	92	6.2	32	1,076	0.6	26			
75-84	5	1.5	23	8	2.5	29	10	3.1	29	10	3.1	29	120	0.8	25			
85 and older	1	1.1	1	3	3.2	45	4	4.3	45	4	4.3	45	48	0.4	18			
<b>Other Eligibles</b>	357	1.8	159	576	2.9	21	874	4.4	21	874	4.4	21	10,289	0.5	21			
64 or younger	4	6.2	141	13	20.0	29	9	13.8	29	9	13.8	29	102	0.4	13			
65-74	95	2.4	77	209	5.3	28	318	8.1	28	318	8.1	28	3,767	0.5	21			
75-84	123	1.4	160	270	3.2	28	441	5.2	28	441	5.2	28	5,191	0.5	22			
85 and older	135	1.8	222	84	1.1	34	106	1.4	34	106	1.4	34	1,229	0.6	21			
<b>Unknown</b>	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 New York, released by CMS in 11/2003. This table was produced on 06/25/2004.

a. Table 10B includes the beneficiaries represented by Cell D of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 1999. A total of 44,191 beneficiaries who were in nursing facilities for part of their enrollment and their 441,584 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 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.

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 1999 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 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>  
 NEW YORK, 1999

Beneficiary Characteristics	ANTIDEPRESSANTS					ANTIHYPERTENSIVES					ANTIDIABETIC						
	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	No. of Users	No. of Bene among Users	Mean No. of Rx	Mean Rx \$	No. of Users	No. of Bene among Users	Mean No. of Rx
<b>All</b>	<b>2,767</b>	<b>32,326</b>	<b>0.5</b>	<b>\$29</b>	<b>1,745</b>	<b>1.8 %</b>	<b>20,538</b>	<b>0.6</b>	<b>\$41</b>	<b>2,531</b>	<b>2.6 %</b>	<b>29,456</b>	<b>0.7</b>	<b>\$28</b>			
<b>Female</b>	1,894	22,128	0.5	29	1,258	1.8	14,841	0.6	42	1,835	2.6	21,401	0.7	29			
<b>Disabled</b>	621	7,214	0.6	36	409	5.1	4,765	0.6	50	667	8.3	7,768	0.7	33			
64 or younger	377	4,360	0.6	40	187	4.1	2,147	0.7	53	332	7.4	3,825	0.7	34			
65-74	218	2,542	0.5	28	192	9.0	2,258	0.6	47	276	12.9	3,235	0.7	32			
75-84	22	264	0.5	25	27	3.0	324	0.6	42	55	6.1	660	0.7	33			
85 and older	4	48	0.9	28	3	0.6	36	1.0	81	4	0.8	48	0.7	18			
<b>Other Eligibles</b>	1,273	14,914	0.4	25	849	1.4	10,076	0.5	38	1,168	1.9	13,633	0.6	26			
64 or younger	32	353	0.5	33	4	5.7	39	1.2	74	16	22.9	161	0.9	30			
65-74	401	4,732	0.4	25	319	6.4	3,774	0.5	35	381	7.6	4,504	0.6	28			
75-84	614	7,219	0.4	26	436	2.2	5,194	0.5	40	607	3.1	7,119	0.6	26			
85 and older	226	2,610	0.5	25	90	0.2	1,069	0.5	38	164	0.4	1,849	0.6	18			
<b>Male</b>	873	10,198	0.5	29	487	1.8	5,697	0.6	40	696	2.5	8,055	0.6	27			
<b>Disabled</b>	358	4,143	0.6	34	166	2.2	1,905	0.6	46	245	3.3	2,792	0.7	29			
64 or younger	278	3,226	0.7	36	100	1.8	1,145	0.7	45	159	2.9	1,825	0.6	28			
65-74	73	833	0.5	26	65	4.4	748	0.6	48	75	5.1	835	0.7	32			
75-84	6	72	0.5	11	1	0.3	12	1.0	52	11	3.4	132	0.8	37			
85 and older	1	12	0.1	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0			
<b>Other Eligibles</b>	515	6,055	0.4	26	321	1.6	3,792	0.5	36	451	2.3	5,263	0.6	26			
64 or younger	20	231	0.4	26	4	6.2	48	0.3	23	8	12.3	90	0.4	20			
65-74	211	2,492	0.4	25	134	3.4	1,557	0.5	36	176	4.5	2,041	0.7	28			
75-84	226	2,666	0.4	25	154	1.8	1,843	0.5	38	217	2.5	2,551	0.6	28			
85 and older	58	666	0.4	32	29	0.4	344	0.5	33	50	0.7	581	0.5	17			
<b>Unknown</b>	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 New York, released by CMS in 11/2003. This table was produced on 06/25/2004.

- a. Table 10C includes the beneficiaries represented by Cell D of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 1999. A total of 44,191 beneficiaries who were in nursing facilities for part of their enrollment and their 441,584 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 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.
- 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 1999 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 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>  
 NEW YORK, 1999

Beneficiary Characteristics	CALCIUM BLOCKERS					MISC. ENDOCRINE					All- Year NF Residents	Bene Mos among All- Year NF Residents	
	Users as %		Mean		No. of Bene Mos among Users	Users as %		Mean		No. of Bene Mos among Users			All-Year NF Residents
	No. of Users	Residents	Rx	Rx-\$		No. of Users	Residents	Rx	Rx-\$				
<b>All</b>	<b>2,158</b>	<b>2.2 %</b>	<b>0.7</b>	<b>\$33</b>	<b>25,346</b>	<b>0.5 %</b>	<b>479</b>	<b>0.5 %</b>	<b>\$151</b>	<b>5,581</b>	<b>97,546</b>	<b>1,021,635</b>	
<b>Female</b>	1,589	2.3	0.7	32	18,697	0.6	414	0.6	56	4,845	70,193	738,890	
<b>Disabled</b>	403	5.0	0.7	36	4,698	1.4	117	1.4	113	1,380	8,077	89,911	
64 or younger	168	3.7	0.8	39	1,946	1.3	59	1.3	195	690	4,514	50,261	
65-74	189	8.8	0.7	35	2,213	2.4	51	2.4	32	606	2,139	24,266	
75-84	40	4.4	0.7	35	477	0.2	2	0.2	8	24	906	10,035	
85 and older	6	1.2	0.7	33	62	1.0	5	1.0	28	60	518	5,349	
<b>Other Eligibles</b>	1,186	1.9	0.7	31	13,999	0.5	297	0.5	33	3,465	62,116	648,979	
64 or younger	6	8.6	0.7	36	69	7.1	5	7.1	647	51	70	712	
65-74	348	7.0	0.7	32	4,138	1.5	77	1.5	18	893	4,986	53,941	
75-84	618	3.2	0.6	30	7,293	0.7	139	0.7	22	1,629	19,441	206,568	
85 and older	214	0.6	0.7	32	2,499	0.2	76	0.2	33	892	37,619	387,758	
<b>Male</b>	569	2.1	0.7	33	6,649	0.2	65	0.2	777	736	27,353	282,745	
<b>Disabled</b>	165	2.2	0.7	40	1,897	0.6	41	0.6	872	480	7,394	82,034	
64 or younger	106	1.9	0.8	43	1,207	0.7	37	0.7	966	432	5,501	61,063	
65-74	52	3.5	0.6	34	606	0.3	4	0.3	26	48	1,476	16,532	
75-84	6	1.9	0.9	28	72	0.0	0	0.0	0	0	324	3,491	
85 and older	1	1.1	0.8	49	12	0.0	0	0.0	0	0	93	948	
<b>Other Eligibles</b>	404	2.0	0.6	30	4,752	0.1	24	0.1	600	256	19,959	200,711	
64 or younger	5	7.7	0.7	38	60	6.2	4	6.2	3,255	45	65	685	
65-74	143	3.6	0.7	35	1,702	0.1	3	0.1	13	26	3,947	41,589	
75-84	207	2.4	0.6	27	2,412	0.6	11	0.1	40	126	8,528	86,661	
85 and older	49	0.7	0.6	29	578	0.1	6	0.1	27	59	7,419	71,776	
<b>Unknown</b>	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 New York, released by CMS in 11/2003. This table was produced on 06/25/2004.

a. Table 10D includes the beneficiaries represented by Cell D of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 1999. A total of 44,191 beneficiaries who were in nursing facilities for part of their enrollment and their 441,584 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 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.

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 1999 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.

APPENDIX TABLE A.1

CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY<sup>a, b</sup>  
NEW YORK, 1999

Beneficiary Characteristics	No. of Benes					No. of Bene Mos						
	All	Aged	Disabled	Adults	Children	Unknown	All	Aged	Disabled	Adults	Children	Unknown
<b>All</b>	<b>3,361,073</b>	<b>371,694</b>	<b>650,943</b>	<b>855,638</b>	<b>1,482,798</b>	<b>0</b>	<b>33,007,908</b>	<b>3,884,415</b>	<b>7,289,712</b>	<b>7,602,783</b>	<b>14,230,998</b>	<b>0</b>
<b>Age</b>												
5 and younger	564,630	26	18,797	0	545,807	0	5,479,879	219	195,837	0	5,283,823	0
6-14	619,445	2	58,495	0	560,948	0	6,500,167	24	658,659	0	5,841,484	0
15-20	303,483	5	38,219	0	265,259	0	2,929,871	49	419,260	0	2,510,562	0
21-44	895,256	2	206,919	682,143	6,192	0	8,315,652	22	2,326,498	5,962,713	26,419	0
45-64	425,016	2	251,759	173,252	3	0	4,453,438	24	2,814,432	1,638,946	36	0
65-74	184,498	119,286	64,976	236	0	0	2,023,885	1,278,486	744,331	1,068	0	0
75-84	147,647	137,839	9,808	0	0	0	1,588,127	1,478,003	110,124	0	0	0
85 and older	109,463	107,499	1,963	1	0	0	1,110,750	1,090,228	20,510	12	0	0
Unknown	111,635	7,033	7	6	104,589	0	606,139	37,360	61	44	568,674	0
<b>Gender</b>												
Female	1,932,389	262,601	336,877	613,470	719,441	0	19,203,839	2,786,780	3,810,953	5,599,287	7,006,819	0
Male	1,346,294	104,610	314,065	242,166	685,453	0	13,311,477	1,069,827	3,478,755	2,003,472	6,759,423	0
Unknown	82,390	4,483	1	2	77,904	0	492,592	27,808	4	24	464,756	0
<b>Race</b>												
White	955,167	152,832	213,022	234,670	354,643	0	9,405,952	1,542,969	2,397,008	2,053,001	3,412,974	0
African American	803,273	36,961	111,614	260,319	394,379	0	7,908,255	390,405	1,252,864	2,370,403	3,894,583	0
Other/unknown	1,602,633	181,901	326,307	360,649	733,776	0	15,693,701	1,951,041	3,639,840	3,179,379	6,923,441	0
<b>Use of Nursing Facilities</b>												
All year	98,030	82,221	15,666	115	28	0	1,030,964	853,277	176,168	1,223	296	0
Part year	44,476	31,733	12,060	558	125	0	451,905	313,546	131,077	5,900	1,382	0
None	3,218,567	257,740	623,217	854,965	1,482,645	0	31,525,039	2,717,592	6,982,467	7,595,660	14,229,320	0
<b>Maintenance Assistance Status</b>												
Cash	1,578,878	180,490	528,382	252,822	617,184	0	16,979,965	2,038,725	6,056,361	2,590,043	6,294,836	0
Medically needy	1,146,755	191,202	122,561	223,490	609,502	0	10,394,137	1,845,675	1,233,351	1,811,273	5,503,838	0
Poverty related	169,015	0	0	15,514	153,501	0	1,490,686	0	0	78,793	1,411,893	0
Other/unknown	466,425	2	0	363,812	102,611	0	4,143,120	15	0	3,122,674	1,020,431	0
<b>Dual Status<sup>c</sup></b>												
Full dual, all year	539,802	312,975	219,436	7,332	59	0	5,863,934	3,322,511	2,476,049	64,845	529	0
Full dual, part year	336	195	138	3	0	0	3,666	2,121	1,522	23	0	0
Non-dual, all year	2,820,935	58,524	431,369	848,303	1,482,739	0	27,140,308	559,783	4,812,141	7,537,915	14,230,469	0
<b>Managed Care Status</b>												
FFS all year	2,177,303	356,600	533,092	493,248	794,363	0	20,516,610	3,718,068	5,922,056	3,918,567	6,957,919	0
FFS part year, with Rx claims	440,444	8,203	66,845	147,027	218,369	0	4,882,492	95,623	785,288	1,568,226	2,433,355	0
FFS part year, no Rx claims	156,384	2,096	10,666	40,687	102,935	0	1,531,968	20,386	119,444	367,041	1,025,097	0
MC all year, with Rx claims	403,089	2,748	33,714	130,267	236,360	0	4,487,650	31,159	396,316	1,421,584	2,638,591	0
MC all year, no Rx claims	183,853	2,047	6,626	44,409	130,771	0	1,589,188	19,179	66,608	327,365	1,176,036	0

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

a. Table A.1 includes the beneficiaries represented by Cell B 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. The "Non-dual, all year" group includes beneficiaries who were never dually eligible or dually eligible but never had pharmacy benefits. Refer to footnote g of Table 1 for more information about how we determined dual eligibility status.

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

APPENDIX TABLE A.2  
 MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS  
 NEW YORK, 1999

	Benes and			Included in Cell C of Table 1		Excluded from Cell C of Table 1	
	Bene Mos in Cell B of Table 1 No. of Benes	No. of Bene Mos	No. of Benes	No. of Benes	No. of Bene Mos	No. of Benes	No. of Bene Mos
<b>All</b>	<b>3,361,073</b>	<b>33,007,908</b>	<b>2,774,131</b>	<b>24,339,532</b>	<b>586,942</b>	<b>8,668,376</b>	
FFS all year	2,177,303	20,516,610	2,177,303	20,516,610	0	0	
FFS part year, with Rx claims	440,444	4,882,492	440,444	2,930,983	0	1,951,509	
FFS part year, with no Rx claims	156,384	1,531,968	156,384	891,939	0	640,029	
MC all year, with Rx claims	403,089	4,487,650	0	0	403,089	4,487,650	
MC all year, with no Rx claims	183,853	1,589,188	0	0	183,853	1,589,188	

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