

## Ten Year Pharmacy Program Overview

<b>FY</b>	<b>Ave Elig</b>	<b>Ave Rx \$</b>	<b>Gen Util</b>	<b>Brand \$</b>	<b>Gen \$</b>	<b>PEPM</b>	<b>PUPM</b>	<b>Claims (M)</b>	<b>Spend (M)</b>
<b>2001</b>	434	\$50	48%			\$39	\$169	4.1	\$204
<b>2002</b>	466	\$56	49%			\$47	\$193	4.6	\$260
<b>2003</b>	482	\$63	53%			\$49	\$199	4.5	\$286
<b>2004</b>	513	\$65	57%			\$60	\$204	5.5	\$367
<b>2005</b>	531	\$66	62%	\$146	\$16	\$73	\$211	7.0	\$466
<b>2006</b>	568	\$66	63%	\$143	\$21	\$58	\$165	5.9	\$393
<b>2007</b>	600	\$67	69%	\$169	\$21	\$41	\$162	4.4	\$297
<b>2008</b>	606	\$69	76%	\$228	\$18	\$45	\$172	4.7	\$325
<b>2009</b>	620	\$71	75%	\$233	\$20	\$47	\$178	4.9	\$350
<b>2010</b>	671	\$66	77%	\$241	\$20	\$47	\$169	5.6	\$375

- 2001 – Members are limited to 3 prescriptions per month; metro members enrolled in capitated managed care plans for pharmacy benefit
- 2004 – MCO's exit. All members included in FFS pharmacy benefit. Monthly benefit expanded to 6 per month with 3 brand cap.
- 2006 – Medicare Dual Eligible members switch to Medicare Part D for most of the pharmacy benefit
- 2010 – Budget shortfall requires reduction in brand limit from 3 to 2 per month