Background

The Medicare Part D prescription drug benefit was introduced in January 2006 to alleviate the high cost of prescription drugs for Medicare beneficiaries. The objectives of this study were to: (1) describe Medicare beneficiaries who filled at least one prescription drug during the study period and (2) assess the impact of Medicare Part D on the use of prescription medications.

Methods

- **Data source:** This study utilized survey data from a 4-wave panel (Spring 2005, March 2006, March 2007, March 2008) of the Household Compendium from the Medicare Expenditure Panel Survey (MEPS) and survey on national representative sample of the U.S. civilian non-institutionalized population from 2005 to 2008.
- **Study design and population:** An atrisk-stratified longitudinal study conducted 46 times 65 years and older with diabetes and other chronic conditions.
- **Variables evaluated:** Potential confounding variables were considered in the analysis: Age, race/ethnicity, gender, income, education, marital status, and health insurance status.
- **Quality of data:** This study analyzed the Charlson Comorbidity Index (CCI) and identified high-risk patients.
- **Logistic regression:** The following outcomes were determined for each year of the panel:
  - Annual number of prescription fills
  - Annual drug expenditures
  - Medi-Drugs used
  - Standard errors
  - **Results:**
    - On average, 2,460 participants were included:
      - 2005: 1,164
      - 2006: 1,446
      - 2007: 1,143
      - 2008: 1,288
    - The mean age of participants was 75.3 ± 6.3 years.
    - 64% were female, 16% were White, 56% were Black, and 15% were Hispanic.
    - Residing in a metropolitan statistical area, 72.4%.
    - Median income was $27,079 (2005-2008).

Objective

- **To evaluate the impact of Medicare Part D on prescription utilization, drug expenditures, and healthcare expenditures among a nationally representative sample of beneficiaries living in metropolitan areas in the U.S.**

Discussion

- **Results:** The results showed substantial increases in payments for prescription drugs by Medicare Part D beneficiaries. The mean total expenditures for pharmacy care increased from $4,446 in 2005 to $9,187 in 2008.
- **Limitations:** The study period was relatively short (4 years), so the sample size may be limited. Only patients aged 65 or older were included.
- **Conclusions:** The study showed that the Medicare Part D benefit increased the use of prescription medications, leading to the conclusion that the Medicare Part D benefit was successful.