

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

LIST OF TABLES

OVERVIEW OF STUDY POPULATION

TABLE 1. OVERVIEW OF BENEFICIARY SELECTION CRITERIA FOR STUDY POPULATION

FOR ALL MEDICAID BENEFICIARIES

TABLE 2. CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY

TABLE 3. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC

TABLE 4. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC

TABLE 5. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC

TABLE 6. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY

TABLE 7-7D. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP

TABLE 8. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS, BY BENEFICIARY CHARACTERISTIC

TABLE 9. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NF RESIDENTS, BY BRAND STATUS AND THERAPEUTIC CATEGORY

TABLE 10-10D. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NF RESIDENTS, BY TOP 10 DRUG GROUP

APPENDIX TABLE A.1. CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY

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

FOR DUAL ELIGIBLE BENEFICIARIES

TABLE 11. CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY

TABLE 12. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC

TABLE 13. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC

TABLE 14. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC

TABLE 15. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY

TABLE 16-16D. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP

TABLE 17. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS, BY BENEFICIARY CHARACTERISTIC

TABLE 18. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NF RESIDENTS, BY BRAND STATUS AND THERAPEUTIC CATEGORY

APPENDIX TABLE A.3. CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY

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

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

Inclusion Criteria (1999)	No. of Dual and Non-dual Eligible Benes (Cell)	No. of Dual Eligible Benes (Cell) ^g
1. Benes who were eligible for Medicaid during at least one month ^a	106,887 (A)	19,411 (E)
2. Benes who had Medicaid pharmacy benefits during at least one month ^b	106,195 (B)	18,734 (F)
3. Benes who had fee-for-service pharmacy benefit coverage during at least one month ^{c, d, e}	104,360 (C)	18,732 (G)
4. Benes who were all-year nursing facility residents ^f	4,545 (D)	4,356 (H)

Source: Data for this table are from the MAX 1999 file for New Hampshire, 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 Hampshire in 1999 was \$67,304,068, of which \$555,256 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/mmcns699.asp> and at <http://www.cms.hhs.gov/medicaid/managedcare/mmcns99.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 1.0 percent were restricted benefit months without a pharmacy benefit in New Hampshire, 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^{a,b}
 NEW HAMPSHIRE, 1999

Beneficiary Characteristics	No. of Benes							No. of Bene Mos						
	All	Aged	Disabled	Adults	Children	Other/ Unknown		All	Aged	Disabled	Adults	Children	Other/ Unknown	
All	104,360	12,272	13,092	16,196	62,799	1		963,099	119,844	136,740	125,444	581,068	3	
Age														
5 and younger	22,293	0	38	0	22,255	0		199,284	0	445	0	198,839	0	
6-14	28,770	0	69	0	28,701	0		279,358	0	795	0	278,563	0	
15-20	12,014	0	351	0	11,663	0		106,422	0	3,553	0	102,869	0	
21-44	21,154	3	6,040	14,943	168	0		180,374	28	63,977	115,599	770	0	
45-64	7,787	58	6,486	1,242	1	0		77,287	578	66,924	9,773	12	0	
65-74	3,466	3,367	87	11	0	1		34,835	33,904	856	72	0	3	
75-84	4,206	4,199	7	0	0	0		40,867	40,788	79	0	0	0	
85 and older	4,659	4,645	14	0	0	0		44,657	44,546	111	0	0	0	
Unknown	11	0	0	0	11	0		15	0	0	0	15	0	
Gender														
Female	62,160	9,573	7,113	14,174	31,299	1		570,366	94,907	75,306	111,988	288,162	3	
Male	42,200	2,699	5,979	2,022	31,500	0		392,733	24,937	61,434	13,456	292,906	0	
Unknown	0	0	0	0	0	0		0	0	0	0	0	0	
Race														
White	99,875	12,001	12,810	15,250	59,813	1		924,101	116,957	133,980	118,354	554,807	3	
African American	1,381	33	115	296	937	0		12,142	342	1,110	2,303	8,387	0	
Other/unknown	3,104	238	167	650	2,049	0		26,856	2,545	1,650	4,787	17,874	0	
Use of Nursing Facilities														
All year	4,545	4,303	242	0	0	0		48,930	46,209	2,721	0	0	0	
Part year	2,668	2,412	244	4	8	0		23,486	20,866	2,486	47	87	0	
None	97,147	5,557	12,606	16,192	62,791	1		890,683	52,769	131,533	125,397	580,981	3	
Maintenance Assistance Status														
Cash	25,463	1,633	6,161	5,599	12,070	0		245,310	18,231	67,877	46,565	112,637	0	
Medically needy	11,267	4,394	2,660	2,441	1,772	0		100,085	39,229	25,436	18,835	16,585	0	
Poverty-related	42,788	188	158	2,819	39,623	0		382,262	1,588	1,447	17,449	361,778	0	
Other/unknown	24,842	6,057	4,113	5,337	9,334	1		235,442	60,796	41,980	42,595	90,068	3	
Dual Medicare Status^c														
Full dual, all year	18,130	10,884	6,532	698	15	1		183,951	107,499	69,933	6,368	148	3	
Full dual, part year	602	284	293	25	0	0		5,868	2,739	2,873	256	0	0	
Non-dual, all year	85,628	1,104	6,267	15,473	62,784	0		773,280	9,606	63,934	118,820	580,920	0	
Managed Care Status														
FFS all year	103,322	12,272	13,092	16,080	61,877	1		956,878	119,844	136,740	124,684	575,607	3	
FFS part year, with Rx claims	811	0	0	109	702	0		5,002	0	0	721	4,281	0	
FFS part year, no Rx claims	227	0	0	7	220	0		1,219	0	0	39	1,180	0	

Source: Data for this table are from the MAX 1999 file for New Hampshire, 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^{a,b}
 NEW HAMPSHIRE, 1999

Beneficiary Characteristics	% with at Least One Rx	Mean No. of Rx	Mean Rx \$	\$ per Rx	Mean \$, All Services	Rx \$ as % of All Services	Mean OTC Drug \$ ^c	No. of Beneficiaries
All	67.5 %	14.2	\$640	\$45	\$5,880	10.9 %	\$22	104,360
Age								
5 and younger	63.5	3.0	67	22	1,313	5.1	3	22,293
6-14	58.2	4.1	176	43	2,305	7.6	3	28,770
15-20	60.0	5.2	235	45	3,190	7.4	4	12,014
21-44	71.3	16.3	935	58	7,020	13.3	14	21,154
45-64	83.0	42.6	2,257	53	13,854	16.3	61	7,787
65-74	84.4	44.0	1,803	41	12,664	14.2	80	3,466
75-84	88.0	47.5	1,735	37	17,419	10.0	107	4,206
85 and older	90.2	44.6	1,388	31	22,795	6.1	137	4,659
Unknown	0.0	0.0	0	0	0	0.0	0	11
Basis of Eligibility								
Aged	87.9	45.5	1,625	36	18,091	9.0	111	12,272
Disabled	84.1	40.4	2,401	60	17,839	13.5	53	13,092
Adults	66.8	9.7	402	42	1,965	20.5	6	16,196
Children	60.3	3.8	141	37	2,011	7.0	3	62,799
Unknown	100.0	6.0	405	68	2,846	14.2	0	1
Gender								
Female	70.0	16.5	692	42	5,997	11.5	27	62,160
Male	63.8	10.8	563	52	5,708	9.9	15	42,200
Unknown	0.0	0.0	0	0	0	0.0	0	0
Race								
White	68.0	14.6	657	45	6,051	10.9	23	99,875
African American	58.7	6.6	306	46	2,825	10.8	10	1,381
Other/unknown	55.5	5.4	223	41	1,730	12.9	8	3,104
Use of Nursing Facilities								
Entire year	97.6	62.3	2,146	34	34,745	6.2	202	4,545
Part year	94.8	47.2	1,628	35	19,364	8.4	125	2,668
None	65.4	11.1	542	49	4,159	13.0	11	97,147
Maintenance Assistance Status								
Cash	72.8	15.8	773	49	6,415	12.1	17	25,463
Medically needy	78.1	31.2	1,500	48	10,727	14.0	58	11,267
Poverty related	57.9	3.2	105	33	1,332	7.9	3	42,788
Other/unknown	74.0	23.8	1,033	43	10,967	9.4	46	24,842

Source: Data for this table are from the MAX 1999 file for New Hampshire, 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^{a,b}
 NEW HAMPSHIRE, 1999

Beneficiary Characteristics	Mean No. of Rx	Mean Rx \$	Rx \$ as % of All Services	No. of Rx, % with:						Mean \$, All Services	Benes	Bene Mos
				None	More than 0, but 1 or Less	More than 1, but 2 or Less	More than 2, but 5 or Less	More than 5, but 10 or Less	More than 10			
All	1.5	\$69	10.9 %	32.5 %	44.3 %	6.3 %	9.5 %	5.8 %	1.7 %	\$637	104,360	963,099
Age												
5 and younger	0.3	8	5.1	36.5	60.7	1.9	0.8	0.1	0.0	147	22,293	199,284
6-14	0.4	18	7.6	41.8	51.7	3.8	2.2	0.3	0.1	237	28,770	279,358
15-20	0.6	27	7.4	40.0	50.1	5.7	3.8	0.5	0.1	360	12,014	106,422
21-44	1.9	110	13.3	28.7	40.9	10.1	12.9	5.7	1.6	823	21,154	180,374
45-64	4.3	227	16.3	17.0	18.9	10.6	27.3	19.2	7.0	1,396	7,787	77,287
65-74	4.4	179	14.2	15.6	16.8	11.3	27.6	21.6	7.2	1,260	3,466	34,835
75-84	4.9	179	10.0	12.0	12.1	11.6	29.2	27.1	8.0	1,793	4,206	40,867
85 and older	4.7	145	6.1	9.8	12.0	11.6	34.2	26.3	6.1	2,378	4,659	44,657
Unknown	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	0	11	15
Basis of Eligibility												
Aged	4.7	166	9.0	12.1	13.3	11.5	30.8	25.3	7.0	1,853	12,272	119,844
Disabled	3.9	230	13.5	15.9	21.8	12.0	26.7	17.5	6.1	1,708	13,092	136,740
Adults	1.3	52	20.5	33.2	45.7	9.0	8.8	2.8	0.6	254	16,196	125,444
Children	0.4	15	7.0	39.7	54.6	3.4	1.9	0.3	0.1	217	62,799	581,068
Unknown	2.0	135	14.2	0.0	0.0	100.0	0.0	0.0	0.0	949	1	3
Gender												
Female	1.8	75	11.5	30.0	43.4	6.7	10.8	7.1	2.1	654	62,160	570,366
Male	1.2	61	9.9	36.2	45.6	5.7	7.5	3.8	1.1	613	42,200	392,733
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	1.6	71	10.9	32.0	44.2	6.4	9.7	5.9	1.8	654	99,875	924,101
African American	0.8	35	10.8	41.3	47.3	4.0	5.1	2.0	0.3	321	1,381	12,142
Other/unknown	0.6	26	12.9	44.5	45.7	4.2	4.1	1.2	0.3	200	3,104	26,856
Use of Nursing Facilities												
Entire year	5.8	199	6.2	2.4	8.6	10.1	32.8	34.1	12.0	3,227	4,545	48,930
Part year	5.4	185	8.4	5.2	10.9	10.7	34.3	29.2	9.7	2,200	2,668	23,486
None	1.2	59	13.0	34.6	46.9	6.0	7.7	3.8	1.0	454	97,147	890,683
Maintenance Assistance Status												
Cash	1.6	80	12.1	27.2	46.5	7.8	11.4	5.6	1.6	666	25,463	245,310
Medically needy	3.5	169	14.0	21.9	24.8	9.8	22.2	16.5	4.8	1,208	11,267	100,085
Poverty related	0.4	12	7.9	42.1	53.3	2.8	1.4	0.2	0.0	149	42,788	382,262
Other/unknown	2.5	109	9.4	26.0	35.2	9.2	15.7	10.5	3.4	1,157	24,842	235,442

Source: Data for this table are from the MAX 1999 file for New Hampshire, 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^{a, b, c}
 NEW HAMPSHIRE, 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 \$
All	1.5	\$69	0.5	\$44	0.2	\$11	0.8	\$12
Age								
5 and younger	0.3	8	0.1	5	0.0	1	0.2	2
6-14	0.4	18	0.2	12	0.0	2	0.2	4
15-20	0.6	27	0.3	19	0.1	4	0.3	4
21-44	1.9	110	0.7	72	0.2	20	0.9	15
45-64	4.3	227	1.7	146	0.6	40	1.9	34
65-74	4.4	179	1.6	106	0.6	28	2.1	38
75-84	4.9	179	1.6	102	0.7	28	2.4	42
85 and older	4.7	145	1.4	78	0.7	24	2.5	39
Unknown	0.0	0	0.0	0	0.0	0	0.0	0
Basis of Eligibility								
Aged	4.7	166	1.5	94	0.7	27	2.3	40
Disabled	3.9	230	1.5	150	0.5	42	1.7	32
Adults	1.3	52	0.4	34	0.1	8	0.7	9
Children	0.4	15	0.1	10	0.0	2	0.2	3
Unknown	2.0	135	1.3	131	0.0	0	0.7	4
Gender								
Female	1.8	75	0.6	47	0.2	12	0.9	14
Male	1.2	61	0.4	39	0.1	10	0.6	10
Unknown	0.0	0	0.0	0	0.0	0	0.0	0
Race								
White	1.6	71	0.6	45	0.2	12	0.8	13
African American	0.8	35	0.3	24	0.1	4	0.4	5
Other/unknown	0.6	26	0.2	16	0.1	4	0.3	4
Use of Nursing Facilities								
Entire year	5.8	199	1.8	110	0.8	30	3.1	54
Part year	5.4	185	1.6	104	0.7	28	2.8	47
None	1.2	59	0.4	38	0.1	10	0.6	9
Maintenance Assistance Status								
Cash	1.6	80	0.6	52	0.2	14	0.8	13
Medically needy	3.5	169	1.3	105	0.5	30	1.6	30
Poverty related	0.4	12	0.1	7	0.0	1	0.2	3
Other/unknown	2.5	109	0.9	67	0.3	18	1.2	21
\$ per Rx								
		\$69		\$44		\$11		\$12
		\$17		\$59		\$59		\$17

Source: Data for this table are from the MAX 1999 file for New Hampshire, released by CMS in 1/2003. 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 Hampshire, 3.8 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 (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^{a, b, c, d}
 NEW HAMPSHIRE, 1999

Therapeutic Category	No. of Rx per Bene Mo among Users			\$ per Bene Mo among Users			\$ per Rx			Users						
	Total	Patented	Off-Patent	Total	Patented	Off-Patent	Total	Patented	Off-Patent	Generic	Total No. of Rx	Total Rx \$	No.	As % of All Benes	No. of Bene Mos	
																Brand-Name
Anti-infective Agents	0.3	0.1	0.0	0.1	\$10	\$8	\$0	\$2	\$40	\$64	\$10	119,436	\$4,759,675	44,383	42.5%	470,092
Biologics	0.1	0.1	0.0	0.0	21	16	3	2	207	223	1,518	1,396	288,684	1,226	1.2	13,601
Antineoplastic Agents	0.5	0.3	0.1	0.1	113	90	17	6	208	315	127	4,146	860,665	723	0.7	7,648
Endocrine/Metabolic Drugs	0.6	0.3	0.1	0.2	21	15	3	3	34	58	21	108,870	3,659,484	16,905	16.2	178,119
Cardiovascular Agents	1.4	0.4	0.2	0.7	40	20	10	10	29	50	41	222,598	6,486,175	15,226	14.6	161,410
Respiratory Agents	0.5	0.3	0.0	0.3	19	14	0	5	36	52	30	132,280	4,750,782	22,927	22.0	244,668
Gastrointestinal Agents	0.7	0.3	0.1	0.3	46	31	8	8	70	111	81	79,870	5,630,525	11,286	10.8	121,275
Genitourinary Agents	0.3	0.2	0.0	0.2	11	8	0	3	33	45	33	18,240	608,769	5,157	4.9	55,231
CNS Drugs	1.3	0.6	0.2	0.5	86	57	20	10	68	99	103	305,562	20,775,414	22,726	21.8	240,845
Stimulants/Anti-obesity/Anorexia	0.6	0.2	0.1	0.4	22	6	4	13	37	37	48	23,993	879,654	3,636	3.5	39,138
Miscellaneous Psychological/Neurological Agents	0.3	0.3	0.0	0.0	32	29	3	1	93	99	94	5,335	496,226	1,437	1.4	15,417
Analgesics and Anesthetics	0.6	0.1	0.1	0.4	22	13	4	5	37	106	70	145,950	5,432,742	23,277	22.3	242,982
Neuromuscular Agents	0.9	0.4	0.1	0.5	49	32	6	11	52	87	47	117,543	6,076,823	11,423	10.9	124,233
Nutritional Products	0.3	0.0	0.0	0.2	4	0	1	3	14	15	28	37,621	517,627	12,320	11.8	129,134
Hematological Agents	0.7	0.1	0.2	0.5	28	14	7	7	38	254	36	29,955	1,133,991	3,864	3.7	40,739
Topical Products	0.3	0.1	0.0	0.2	7	4	1	2	25	45	30	79,395	1,979,306	25,993	24.9	280,563
Miscellaneous Products	0.4	0.2	0.1	0.2	86	60	18	9	193	319	269	2,167	417,320	459	0.4	4,854
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	14	0	0	0	41	0	0	48,450	1,994,950	13,162	12.6	143,019
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.	1,482,807	66,748,812	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 1999 file for New Hampshire, 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 (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 Hampshire, 3.8 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).

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

TABLE 7
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP^{a, b, c}
 NEW HAMPSHIRE, 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		
ANTIPSYCHOTICS	\$10,531,628	10.691	117,711	0.8	\$112	\$89		
ANTIDEPRESSANTS	8,010,935	21,856	234,145	0.6	56	34		
ANTICONVULSANT	5,060,869	9,665	106,921	0.8	58	47		
ULCER DRUGS	4,438,445	10,243	111,031	0.5	83	40		
ANALGESICS - Narcotic	3,227,028	24,949	264,232	0.4	35	12		
ANTIASTHMATIC	2,883,156	19,759	211,469	0.4	35	14		
ANTIDIABETIC	1,788,070	5,775	61,622	0.7	39	29		
ANTIANSIETY AGENTS	1,741,328	9,333	100,509	0.5	33	17		
ANTIHYPERTENSIVE	1,734,756	7,394	79,056	0.7	32	22		
ANALGESICS - ANTI-INFLAMMATORY	1,647,214	13,897	150,108	0.3	39	11		

Source: Data for this table are from the MAX 1999 file for New Hampshire, 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 (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^{a,b,c}
 NEW HAMPSHIRE, 1999

Beneficiary Characteristics	All Top 10 Drug Groups					ANTIPSYCHOTICS					ANTIDEPRESSANTS						
	No. of Rx	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 \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
All	745,108	\$41,063,429	10,691	10.2 %	117,711	0.8	\$90	21,856	20.9 %	234,145	0.6	\$34					
Female																	
Disabled																	
5 and younger	119	8,104	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0	0.0	0	0
6-14	315	21,354	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0	0.0	0	0
15-20	1,385	110,731	40	27.0	448	0.4	66	61	41.2	674	0.5	43					
21-44	73,433	5,150,997	1,499	51.0	17,137	0.8	103	2,321	78.9	26,212	0.6	39					
45-64	118,852	7,057,176	1,398	35.8	15,993	1.0	104	2,953	75.7	33,259	0.7	41					
65-74	1,675	76,821	14	23.7	166	1.0	78	25	42.4	266	0.7	35					
75-84	147	7,776	1	16.7	7	0.4	9	2	33.3	19	1.1	7					
85 and older	191	7,795	3	27.3	36	0.6	28	3	27.3	35	0.4	15					
Other Eligibles																	
5 and younger	309,973	13,649,576	3,711	6.7	39,328	0.6	45	10,360	18.8	107,692	0.6	30					
6-14	4,156	111,713	8	0.1	88	0.3	22	16	0.1	174	0.3	11					
15-20	14,466	624,360	156	1.1	1,764	0.5	39	584	4.2	6,513	0.5	26					
21-44	13,841	604,220	219	3.3	2,298	0.4	39	942	14.3	9,963	0.4	25					
45-64	66,088	2,705,392	628	4.7	6,457	0.4	29	3,832	28.5	38,336	0.4	27					
65-74	11,676	599,130	77	8.4	815	0.7	61	443	48.2	4,549	0.6	36					
75-84	55,327	2,685,911	544	23.3	6,108	0.8	71	1,048	44.9	11,506	0.7	33					
85 and older	71,964	3,289,643	926	28.6	9,865	0.7	56	1,569	48.4	16,621	0.8	36					
	72,455	3,029,207	1,153	29.2	11,933	0.5	34	1,926	48.7	20,030	0.8	33					
Male																	
Disabled																	
5 and younger	239,018	14,973,099	4,025	9.5	44,596	0.9	118	6,131	14.5	65,988	0.6	35					
6-14	128,337	9,849,236	2,512	42.0	28,568	1.1	153	2,732	45.7	30,413	0.7	41					
15-20	181	10,641	0	0.0	0	0.0	0	1	4.8	12	0.6	3					
21-44	570	43,251	2	5.1	24	0.6	51	5	12.8	60	0.3	16					
45-64	1,764	152,682	44	21.7	480	0.6	94	57	28.1	611	0.5	39					
65-74	64,785	5,486,673	1,516	48.9	17,382	1.1	162	1,465	47.3	16,470	0.6	42					
85 and older	60,487	4,124,879	942	36.5	10,599	1.0	141	1,198	46.4	13,188	0.7	39					
	453	28,241	7	25.0	72	1.2	210	4	14.3	48	1.0	47					
75-84	26	315	0	0.0	0	0.0	0	1	100.0	12	0.5	3					
85 and older	71	2,554	1	33.3	11	1.2	65	1	33.3	12	0.6	20					
Other Eligibles																	
5 and younger	110,681	5,123,863	1,513	4.2	16,028	0.6	57	3,399	9.4	35,575	0.6	31					
6-14	6,696	187,105	15	0.1	156	0.4	50	30	0.3	347	0.3	11					
15-20	29,540	1,307,343	419	2.8	4,802	0.6	61	1,219	8.2	13,636	0.5	28					
21-44	11,639	636,930	247	4.8	2,626	0.6	63	679	13.3	7,087	0.5	32					
45-64	7,026	381,161	67	4.1	610	0.4	44	300	18.2	2,691	0.4	28					
65-74	3,688	198,559	18	4.7	185	0.5	28	91	23.8	926	0.5	33					
75-84	19,818	995,385	225	21.5	2,353	0.8	79	309	29.6	3,221	0.8	35					
85 and older	19,983	891,727	307	32.0	3,181	0.6	49	458	47.7	4,642	0.8	35					
	12,291	525,653	215	31.1	2,115	0.5	35	313	45.2	3,025	0.7	33					
Unknown																	
	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					

All Medicaid Beneficiaries

Table 7A

Source: Data for this table are from the MAX 1999 file for New Hampshire, released by CMS in 1/2003. 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 (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^{a, b, c}
 NEW HAMPSHIRE, 1999

Beneficiary Characteristics	ANTICONVULSANT					ULCER DRUGS					ANALGESICS - Narcotic				
	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 \$
All	9,665	9.3 %	106,921	0.8	\$47	10,243	9.8 %	111,031	0.5	\$40	24,949	23.9 %	264,232	0.4	\$12
Female	5,931	9.5	65,482	0.8	44	7,451	12.0	81,233	0.5	39	18,790	30.2	199,053	0.3	11
Disabled	2,922	41.1	33,185	0.8	53	2,466	34.7	28,119	0.5	43	4,667	65.6	53,004	0.4	18
5 and younger	6	35.3	61	0.8	87	6	35.3	72	0.5	24	1	5.9	12	0.1	1
6-14	22	73.3	255	0.8	61	8	26.7	94	0.3	35	2	6.7	24	0.2	1
15-20	63	42.6	714	0.6	52	15	10.1	168	0.3	19	50	33.8	557	0.1	1
21-44	1,403	47.7	16,012	0.8	57	875	29.8	10,027	0.4	37	2,016	68.6	23,130	0.4	17
45-64	1,407	36.1	15,912	0.9	50	1,532	39.3	17,443	0.5	47	2,557	65.5	28,841	0.5	19
65-74	19	32.2	207	0.8	33	23	39.0	246	0.6	48	36	61.0	397	0.5	14
75-84	1	16.7	12	0.9	24	5	83.3	45	0.6	49	2	33.3	19	2.2	154
85 and older	1	9.1	12	1.1	42	2	18.2	24	1.0	100	3	27.3	24	0.6	24
Other Eligibles	3,009	5.5	32,297	0.7	34	4,985	9.1	53,114	0.5	38	14,123	25.7	146,049	0.3	9
5 and younger	85	0.8	931	0.6	30	102	1.0	1,051	0.3	19	281	2.6	3,136	0.1	1
6-14	309	2.2	3,504	0.7	42	168	1.2	1,913	0.2	16	744	5.4	8,312	0.1	1
15-20	248	3.8	2,665	0.7	45	223	3.4	2,370	0.2	14	1,479	22.5	15,293	0.1	1
21-44	946	7.0	9,715	0.5	29	1,059	7.9	11,091	0.3	22	6,696	49.7	67,531	0.3	6
45-64	137	14.9	1,460	0.7	37	209	22.7	2,210	0.4	39	493	53.6	5,234	0.4	14
65-74	443	19.0	4,918	1.0	45	824	35.3	9,167	0.5	45	1,113	47.7	12,413	0.4	15
75-84	485	15.0	5,280	0.9	30	1,131	34.9	12,051	0.6	47	1,433	44.2	14,989	0.5	15
85 and older	356	9.0	3,824	0.8	24	1,269	32.1	13,261	0.6	45	1,884	47.7	19,141	0.5	18
Male	3,734	8.8	41,439	0.9	53	2,792	6.6	29,798	0.5	42	6,159	14.6	65,179	0.4	16
Disabled	2,175	36.4	24,689	0.9	61	1,323	22.1	14,821	0.5	46	2,501	41.8	27,798	0.5	25
5 and younger	3	14.3	36	0.8	40	5	23.8	60	1.0	116	0	0.0	0	0.0	0
6-14	30	76.9	360	1.0	87	10	25.6	120	0.6	49	6	15.4	72	0.2	3
15-20	85	41.9	950	0.8	59	19	9.4	220	0.5	53	31	15.3	357	0.2	9
21-44	1,238	39.9	14,097	0.9	62	582	18.8	6,627	0.5	43	1,289	41.6	14,372	0.4	23
45-64	814	31.5	9,193	0.9	58	703	27.2	7,757	0.6	48	1,161	44.9	12,850	0.5	28
65-74	4	14.3	41	1.1	38	4	14.3	37	0.9	53	9	32.1	89	0.3	13
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	200.0	24	0.2	2
85 and older	1	33.3	12	1.1	35	0	0.0	0	0.0	0	3	100.0	34	0.2	6
Other Eligibles	1,559	4.3	16,750	0.8	41	1,469	4.1	14,977	0.5	37	3,658	10.1	37,381	0.3	10
5 and younger	105	0.9	1,201	0.6	38	142	1.2	1,401	0.3	13	375	3.2	4,118	0.1	1
6-14	562	3.8	6,342	0.8	45	161	1.1	1,843	0.3	22	812	5.5	9,065	0.1	2
15-20	283	5.6	3,012	0.7	43	82	1.6	880	0.2	13	631	12.4	6,791	0.1	1
21-44	116	7.0	1,056	0.6	39	143	8.7	1,333	0.3	28	663	40.1	5,741	0.5	25
45-64	40	10.5	392	0.6	37	60	15.7	563	0.4	40	178	46.6	1,749	0.6	32
65-74	205	19.6	2,233	0.9	43	325	31.1	3,398	0.5	45	364	34.8	3,800	0.4	15
75-84	174	18.1	1,780	0.9	32	311	32.4	3,105	0.6	48	352	36.7	3,512	0.5	14
85 and older	74	10.7	734	0.8	22	245	35.4	2,454	0.7	50	283	40.9	2,605	0.4	11
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

All Medicaid Beneficiaries

Table 7B

Source: Data for this table are from the MAX 1999 file for New Hampshire, 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 (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^{a, b, c}
 NEW HAMPSHIRE, 1999

Beneficiary Characteristics	ANTI-ASTHMATIC				ANTI-DIABETIC				ANTI-ANXIETY AGENTS						
	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 \$
All	19,759	18.9 %	211,469	0.4	\$14	5,775	5.5 %	61,622	0.7	\$29	9,333	8.9 %	100,509	0.5	\$17
Female	12,636	20.3	135,417	0.4	14	4,117	6.6	44,375	0.7	29	6,917	11.1	74,633	0.5	16
Disabled	3,231	45.4	36,527	0.5	18	1,419	19.9	15,909	0.7	34	2,319	32.6	26,311	0.6	21
5 and younger	5	29.4	60	0.6	17	0	0.0	0	0.0	0	1	5.9	12	0.2	6
6-14	4	13.3	48	0.3	25	0	0.0	0	0.0	0	10	33.3	111	0.6	12
15-20	31	20.9	355	0.3	16	0	0.0	0	0.0	0	24	16.2	269	0.4	15
21-44	1,083	36.8	12,267	0.4	13	256	8.7	2,943	0.6	30	1,007	34.3	11,455	0.5	20
45-64	2,067	53.0	23,356	0.5	21	1,134	29.1	12,661	0.8	36	1,264	32.4	14,322	0.6	22
65-74	37	62.7	393	0.9	37	24	40.7	255	0.7	26	11	18.6	123	0.7	24
75-84	0	0.0	0	0.0	0	3	50.0	26	0.7	22	2	33.3	19	0.4	12
85 and older	4	36.4	48	0.8	19	2	18.2	24	1.1	26	0	0.0	0	0.0	0
Other Eligibles	9,405	17.1	98,890	0.4	13	2,698	4.9	28,466	0.7	26	4,598	8.4	48,322	0.5	13
5 and younger	1,149	10.7	12,127	0.2	3	12	0.1	124	0.8	37	92	0.9	1,011	0.2	5
6-14	1,600	11.5	17,756	0.2	8	43	0.3	481	0.9	40	178	1.3	2,023	0.2	7
15-20	901	13.7	9,241	0.2	6	29	0.4	264	0.9	36	199	3.0	2,163	0.2	6
21-44	2,101	15.6	20,962	0.3	9	255	1.9	2,500	0.6	26	1,372	10.2	13,891	0.4	10
45-64	294	32.0	3,021	0.4	14	116	12.6	1,200	0.7	32	200	21.8	2,066	0.5	12
65-74	1,111	47.6	12,344	0.6	24	800	34.3	8,875	0.7	29	620	26.6	6,894	0.6	19
75-84	1,187	36.6	12,427	0.6	24	885	27.3	9,314	0.8	24	878	27.1	9,178	0.6	17
85 and older	1,062	26.9	11,012	0.5	18	558	14.1	5,708	0.8	21	1,059	26.8	11,096	0.5	15
Male	7,123	16.9	76,052	0.4	12	1,658	3.9	17,247	0.8	30	2,416	5.7	25,876	0.5	21
Disabled	1,360	22.7	15,122	0.5	20	836	14.0	9,053	0.7	32	1,266	21.2	14,137	0.6	28
5 and younger	7	33.3	84	0.5	13	0	0.0	0	0.0	0	1	4.8	12	0.9	72
6-14	11	28.2	132	0.4	12	0	0.0	0	0.0	0	6	15.4	72	0.3	12
15-20	19	9.4	219	0.2	9	1	0.5	12	1.3	29	29	14.3	328	0.4	23
21-44	497	16.0	5,658	0.5	16	227	7.3	2,568	0.7	28	646	20.8	7,324	0.6	29
45-64	821	31.8	8,993	0.6	23	601	23.3	6,410	0.8	34	581	22.5	6,376	0.7	27
65-74	4	14.3	24	2.0	65	5	17.9	39	0.7	23	2	7.1	13	1.5	32
75-84	0	0.0	0	0.0	0	2	200.0	24	0.3	9	1	100.0	12	0.7	2
85 and older	1	33.3	12	1.6	60	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	5,763	15.9	60,930	0.3	11	822	2.3	8,194	0.8	27	1,150	3.2	11,739	0.4	13
5 and younger	1,828	15.8	19,444	0.2	5	2	0.0	14	0.2	3	97	0.8	1,093	0.2	5
6-14	2,032	13.7	22,294	0.2	8	35	0.2	361	1.0	35	207	1.4	2,332	0.2	8
15-20	566	11.1	5,956	0.3	9	27	0.5	270	1.1	46	75	1.5	817	0.3	15
21-44	151	9.1	1,311	0.3	10	49	3.0	394	0.7	30	112	6.8	914	0.4	8
45-64	82	21.5	812	0.6	23	51	13.4	485	0.6	27	40	10.5	390	0.6	30
65-74	440	42.1	4,414	0.7	27	280	26.8	2,898	0.8	30	206	19.7	2,153	0.6	18
75-84	377	39.3	3,889	0.6	25	243	25.3	2,417	0.8	24	250	26.0	2,472	0.6	15
85 and older	287	41.5	2,810	0.7	23	135	19.5	1,355	0.7	20	163	23.6	1,568	0.5	15
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Table 7C

All Medicaid Beneficiaries

Source: Data for this table are from the MAX 1999 file for New Hampshire, 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 (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^{a, b, c}
 NEW HAMPSHIRE, 1999

Beneficiary Characteristics	ANTIHYPERTENSIVE				ANALGESICS - ANTI-INFLAMMATORY					
	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean Rx \$	No. of Bene Mos	
All	7,394	7.1 %	79,056	0.7	13,897	13.3 %	150,108	0.3	104,360	963,099
Female	4,567	7.3	48,856	0.7	10,673	17.2	115,225	0.3	62,155	570,358
Disabled	1,125	15.8	12,581	0.6	2,895	40.7	33,277	0.3	7,113	75,306
5 and younger	0	0.0	0	0.0	0	0.0	0	0.0	0	193
6-14	0	0.0	0	0.0	1	3.3	12	0.2	30	327
15-20	3	2.0	31	0.5	31	20.9	346	0.2	148	1,531
21-44	199	6.8	2,279	0.5	1,170	39.8	13,474	0.3	2,940	31,398
45-64	901	23.1	10,044	0.6	1,673	42.9	19,237	0.4	3,902	41,110
65-74	16	27.1	170	0.6	17	28.8	179	0.5	59	593
75-84	3	50.0	31	0.6	1	16.7	7	0.3	6	67
85 and older	3	27.3	26	1.1	2	18.2	22	0.6	11	87
Other Eligibles	3,442	6.3	36,275	0.7	7,778	14.1	81,948	0.3	55,042	495,052
5 and younger	28	0.3	298	0.5	324	3.0	3,572	0.1	10,692	95,597
6-14	185	1.3	1,991	0.6	442	3.2	5,044	0.2	13,876	134,520
15-20	55	0.8	605	0.6	871	13.3	9,097	0.2	6,567	57,302
21-44	202	1.5	2,041	0.5	3,262	24.2	32,730	0.2	13,462	105,599
45-64	115	12.5	1,069	0.6	350	38.1	3,617	0.3	919	7,615
65-74	736	31.5	8,127	0.7	742	31.8	8,456	0.4	2,334	24,018
75-84	1,039	32.1	10,932	0.8	905	27.9	9,926	0.4	3,239	31,960
85 and older	1,082	27.4	11,212	0.8	882	22.3	9,506	0.5	3,953	38,441
Male	2,827	6.7	30,200	0.7	3,224	7.6	34,883	0.3	42,194	392,726
Disabled	891	14.9	9,797	0.6	1,230	20.6	13,890	0.3	5,979	61,434
5 and younger	1	4.8	12	0.3	1	4.8	12	1.8	21	252
6-14	4	10.3	48	0.5	5	12.8	60	0.3	39	468
15-20	8	3.9	96	0.6	11	5.4	119	0.1	203	2,022
21-44	258	8.3	2,899	0.6	601	19.4	6,802	0.2	3,100	32,579
45-64	608	23.5	6,639	0.7	605	23.4	6,819	0.3	2,584	25,814
65-74	12	42.9	103	0.9	6	21.4	66	0.5	28	263
75-84	0	0.0	0	0.0	0	0.0	0	0.0	1	12
85 and older	0	0.0	0	0.0	1	33.3	12	1.0	3	24
Other Eligibles	1,936	5.3	20,403	0.7	1,994	5.5	20,993	0.2	36,215	331,292
5 and younger	80	0.7	877	0.6	359	3.1	4,021	0.2	11,563	103,242
6-14	721	4.9	8,089	0.7	339	2.3	3,850	0.1	14,825	144,043
15-20	110	2.2	1,211	0.6	394	7.7	4,034	0.1	5,096	45,567
21-44	57	3.5	512	0.5	302	18.3	2,694	0.2	1,652	10,798
45-64	71	18.6	630	0.6	93	24.3	930	0.3	382	2,748
65-74	350	33.5	3,748	0.7	211	20.2	2,291	0.4	1,045	9,961
75-84	351	36.6	3,419	0.8	185	19.3	2,027	0.4	960	8,828
85 and older	196	28.3	1,917	0.8	111	16.0	1,146	0.5	692	6,105
Unknown	0	0.0	0	0.0	0	0.0	0	0.0	11	15

Table 7D

All Medicaid Beneficiaries

Source: Data for this table are from the MAX 1999 file for New Hampshire, 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 (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^{a, b}
 NEW HAMPSHIRE, 1999

Beneficiary Characteristics	Rx \$ per Bene Mo	No. of Rx per Bene Mo	No. of All-Year NF Residents	Bene Mos among All-Year NF Residents
All	\$199	5.8	4,545	48,930
Age				
0-64	341	7.4	230	2,593
65-74	270	6.9	456	5,008
75-84	217	6.2	1,440	15,208
85 and older	161	5.2	2,419	26,121
Unknown	0	0.0	0	0
Gender				
Female	191	5.7	3,600	39,226
Male	232	6.0	945	9,704
Unknown	0	0.0	0	0
Race				
White	199	5.8	4,537	48,834
African American	135	4.9	4	48
Other/unknown	315	8.1	4	48
Basis of Eligibility				
Aged	191	5.7	4,303	46,209
Disabled	337	7.3	242	2,721
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 1999 file for New Hampshire, 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 2,668 beneficiaries who were in nursing facilities for part of their enrollment and their 23,486 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^{a, b, c, d, e}
 NEW HAMPSHIRE, 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	Total	Patented Brand-Name	Off-Patent Brand-Name	No.	As % of All-Year NF Residents	No. of Bene Mos		
Anti-infective Agents	0.3	0.2	0.0	0.2	\$13	\$10	\$0	\$2	\$37	\$59	\$35	\$15	10,846	\$398,463	2,823	62.1 %	31,639
Biologics	0.1	0.1	0.0	0.0	1	1	0	1	16	13	0	26	947	15,353	911	20.0	10,327
Antineoplastic Agents	0.6	0.2	0.2	0.1	81	52	24	5	141	227	105	42	1,016	143,631	167	3.7	1,763
Endocrine/Metabolic Drugs	1.1	0.4	0.3	0.5	22	13	4	5	20	36	12	11	19,646	388,406	1,592	35.0	17,383
Cardiovascular Agents	1.9	0.4	0.4	1.2	43	15	11	17	22	36	32	15	63,284	1,418,649	3,029	66.6	32,842
Respiratory Agents	0.9	0.3	0.0	0.6	32	15	1	16	34	44	23	29	14,226	487,965	1,372	30.2	15,120
Gastrointestinal Agents	0.9	0.3	0.1	0.5	51	28	8	15	53	88	65	29	22,113	1,178,430	2,102	46.2	23,300
Genitourinary Agents	0.5	0.2	0.0	0.3	18	11	0	7	35	50	24	25	4,679	165,143	819	18.0	9,177
CNS Drugs	1.6	0.8	0.1	0.7	80	57	9	13	51	75	73	19	54,469	2,755,504	3,149	69.3	34,527
Stimulants/Anti-obesity/Anorexia	0.6	0.0	0.0	0.5	11	2	1	8	18	98	35	15	361	6,669	58	1.3	620
Miscellaneous Psychological/Neurological Agents	0.8	0.7	0.0	0.0	80	80	0	0	107	109	0	21	1,763	188,313	220	4.8	2,349
Analgesics and Anesthetics	0.9	0.3	0.1	0.6	33	20	5	8	35	74	53	14	21,312	753,169	2,096	46.1	23,139
Neuromuscular Agents	1.3	0.4	0.3	0.7	60	25	13	22	46	72	48	32	17,732	810,194	1,209	26.6	13,573
Nutritional Products	0.8	0.0	0.1	0.7	12	0	2	10	14	18	25	13	9,307	131,179	1,032	22.7	11,382
Hematological Agents	1.1	0.1	0.3	0.8	19	6	5	8	17	118	18	10	13,238	231,255	1,119	24.6	12,170
Topical Products	0.6	0.2	0.1	0.3	13	7	3	4	23	39	28	11	18,871	432,672	2,866	63.1	32,265
Miscellaneous Products	0.2	0.0	0.0	0.2	5	1	0	4	22	22	311	20	282	6,082	115	2.5	1,250
Unknown Therapeutic Category	0.5	0.0	0.0	0.0	13	0	0	0	26	0	0	0	9,211	242,940	1,665	36.6	19,061
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.	283,303	9,754,017	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 1999 file for New Hampshire, 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 2,668 beneficiaries who were in nursing facilities for part of their enrollment and their 23,486 benefit months were excluded from the analysis.

b. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 1999. A beneficiary who used drugs from two or more categories was counted as a user for each category. Therefore, the sum of users across categories may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

d. For information about these therapeutic categories, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).

e. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. For information about this classification method, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).

In New Hampshire, 3.8 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 9

All Medicaid 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 10
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS,
 BY TOP-10 DRUG GROUP^{a, b, c, d}
 NEW HAMPSHIRE, 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	
ANTIDEPRESSANTS	\$1,244,768	2,829	62.2 %	31,281	0.9	\$45	\$40	
ANTIPSYCHOTICS	1,164,158	1,883	41.4	21,014	0.7	81	55	
ULCER DRUGS	934,683	1,594	35.1	17,563	0.7	73	53	
ANALGESICS - Narcotic	466,860	1,857	40.9	20,483	0.6	37	23	
ANTICONVULSANT	444,695	941	20.7	10,607	1.1	39	42	
ANTIHYPERTENSIVE	408,545	1,310	28.8	14,080	0.9	32	29	
ANTIASTHMATIC	392,850	1,456	32.0	15,906	0.7	36	25	
CALCIUM BLOCKERS	310,310	829	18.2	9,013	0.9	38	34	
ANTIANSIETY AGENTS	309,459	1,426	31.4	15,754	0.7	29	20	
LAXATIVES	304,579	5,890	129.6	66,322	0.6	8	5	

Source: Data for this table are from the MAX 1999 file for New Hampshire, 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 2,668 beneficiaries who were in nursing facilities for part of their enrollment and their 23,486 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 (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^{a, b, c, d} NEW HAMPSHIRE, 1999

Beneficiary Characteristics	All Top 10 Drug Groups				ANTIDEPRESSANTS				ANTIPSYCHOTICS			
	No. of Rx	Rx \$	No. of Users	Mean No. of Rx	Residents	NF Mos among Users	Mean Rx \$	No. of Users	Residents	NF Mos among Users	Mean Rx \$	No. of Rx
All	159,420	\$5,980,907	2,829	0.9	62.2 %	31,281	\$40	1,883	41.4 %	21,014	\$55	0.7
Female	125,892	4,603,603	2,245	0.9	62.4	25,121	39	1,460	40.6	16,440	53	0.7
Disabled	7,495	317,703	110	0.9	76.9	1,277	48	58	40.6	670	113	1.2
64 or younger	7,167	306,078	106	1.0	78.5	1,229	50	54	40.0	622	120	1.3
65-74	15	962	1	0.1	100.0	12	1	1	100.0	12	3	0.2
75-84	83	2,715	1	1.1	50.0	12	7	0	0.0	0	0	0.0
85 and older	230	7,948	2	0.6	40.0	24	21	3	60.0	36	28	0.6
Other Eligibles	118,397	4,285,900	2,135	0.9	61.8	23,844	39	1,402	40.6	15,770	50	0.7
64 or younger	0	0	0	0.0	0.0	0	0	0	0.0	0	0	0.0
65-74	13,853	586,504	198	0.9	69.7	2,225	47	170	59.9	1,938	74	0.9
75-84	41,169	1,542,291	733	0.9	67.5	8,131	41	519	47.8	5,789	60	0.7
85 and older	63,375	2,157,105	1,204	0.8	57.7	13,488	36	713	34.2	8,043	37	0.6
Male	33,528	1,377,304	584	0.9	61.8	6,160	42	423	44.8	4,574	66	0.7
Disabled	5,273	282,784	70	1.0	70.7	774	59	53	53.5	587	103	0.7
64 or younger	5,054	272,674	68	1.0	71.6	750	59	50	52.6	563	100	0.7
65-74	147	8,167	1	1.1	33.3	12	45	3	100.0	24	173	1.0
75-84	0	0	0	0.0	0.0	0	0	0	0.0	0	0	0.0
85 and older	72	1,943	1	0.6	100.0	12	20	0	0.0	0	0	0.0
Other Eligibles	28,255	1,094,520	514	0.9	60.8	5,386	40	370	43.7	3,987	60	0.7
64 or younger	0	0	0	0.0	0.0	0	0	0	0.0	0	0	0.0
65-74	7,427	314,241	107	1.0	63.7	1,140	46	89	53.0	971	104	1.0
75-84	11,996	448,188	234	0.9	66.5	2,478	40	165	46.9	1,798	50	0.6
85 and older	8,832	332,091	173	0.8	53.1	1,768	36	116	35.6	1,218	40	0.6
Unknown	0	0	0	0.0	0.0	0	0	0	0.0	0	0	0.0

Source: Data for this table are from the MAX 1999 file for New Hampshire, 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 2,668 beneficiaries who were in nursing facilities for part of their enrollment and their 23,486 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 (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^{a, b, c, d}
 NEW HAMPSHIRE, 1999

Beneficiary Characteristics	ULCER DRUGS						ANALGESICS - Narcotic						ANTICONVULSANT					
	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
All	1,594	35.1 %	\$53	1,857	40.9 %	\$23	941	20.483	0.6	20.7 %	\$23	10,607	1.1	\$42				
Female	1,228	34.1	53	1,575	43.8	22	680	17,582	0.6	18.9	22	7,740	1.1	42				
Disabled	50	35.0	59	57	39.9	20	91	652	0.7	63.6	20	1,026	1.2	64				
64 or younger	44	32.6	59	55	40.7	20	89	628	0.7	65.9	20	1,002	1.2	64				
65-74	2	200.0	16	0	0.0	0	0	0	0.0	0.0	0	0	0.0	0				
75-84	2	100.0	64	1	50.0	23	1	12	1.1	50.0	23	12	0.9	24				
85 and older	2	40.0	100	1	20.0	47	1	12	1.1	20.0	47	12	1.1	42				
Other Eligibles	1,178	34.1	52	1,518	43.9	22	589	16,930	0.6	17.0	22	6,714	1.0	39				
64 or younger	0	0.0	0	0	0.0	0	0	0	0.0	0.0	0	0	0.0	0				
65-74	107	37.7	52	123	43.3	28	125	1,372	0.8	44.0	28	1,421	1.3	66				
75-84	383	35.3	55	490	45.1	19	242	5,421	0.6	22.3	19	2,759	1.0	35				
85 and older	688	33.0	51	905	43.4	22	222	10,137	0.6	10.6	22	2,534	0.9	27				
Male	366	38.7	55	282	29.8	30	261	2,901	0.7	27.6	30	2,867	1.1	42				
Disabled	41	41.4	62	31	31.3	131	71	301	1.2	71.7	131	773	1.3	62				
64 or younger	40	42.1	61	29	30.5	139	70	283	1.3	73.7	139	761	1.3	62				
65-74	1	33.3	139	1	33.3	1	0	6	0.2	0.0	1	0	0.0	0				
75-84	0	0.0	0	0	0.0	0	0	0	0.0	0.0	0	0	0.0	0				
85 and older	0	0.0	0	1	100.0	0	1	12	0.1	100.0	0	12	1.1	35				
Other Eligibles	325	38.4	55	251	29.7	18	190	2,600	0.6	22.5	18	2,094	1.0	35				
64 or younger	0	0.0	0	0	0.0	0	0	0	0.0	0.0	0	0	0.0	0				
65-74	59	35.1	54	45	26.8	17	65	503	0.6	38.7	17	735	1.1	49				
75-84	126	35.8	49	102	29.0	22	83	1,067	0.6	23.6	22	920	1.0	31				
85 and older	140	42.9	59	104	31.9	15	42	1,030	0.5	12.9	15	439	0.8	21				
Unknown	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 Hampshire, 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 2,668 beneficiaries who were in nursing facilities for part of their enrollment and their 23,486 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 (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^{a, b, c, d}
 NEW HAMPSHIRE, 1999

Beneficiary Characteristics	ANTIHYPERTENSIVE					ANTIASTHMATIC					CALCIUM BLOCKERS						
	Users as %					Users as %					Users as %						
	No. of Users	No. of Bene Mos among Residents	Mean No. of Rx	Mean Rx \$	Mean No. of Rx	No. of Users	No. of Bene Mos among Residents	Mean No. of Rx	Mean Rx \$	Mean No. of Rx	No. of Users	No. of Bene Mos among Residents	Mean No. of Rx	Mean Rx \$	No. of Users	No. of Bene Mos among Residents	Mean No. of Rx
All	1,310	28.8 %	0.9	\$29	0.9	1,456	32.0 %	0.7	\$25	0.7	829	18.2 %	0.9	\$34	9,013	0.9	\$34
Female	997	27.7	0.9	28	0.9	1,081	30.0	0.7	23	0.7	696	19.3	0.9	34	7,620	0.9	34
Disabled	29	20.3	1.1	32	1.1	50	35.0	0.7	34	0.7	24	16.8	0.9	38	271	0.9	38
64 or younger	26	19.3	1.1	33	1.1	46	34.1	0.7	36	0.7	20	14.8	0.9	37	223	0.9	37
65-74	0	0.0	0.0	0	0.0	0	0.0	0.0	0	0.0	1	100.0	0.8	45	12	0.8	45
75-84	0	0.0	0.0	0	0.0	0	0.0	0.0	0	0.0	1	50.0	1.0	38	12	1.0	38
85 and older	3	60.0	1.1	26	1.1	4	80.0	0.8	19	0.8	2	40.0	1.0	42	24	1.0	42
Other Eligibles	968	28.0	0.9	28	0.9	1,031	29.8	0.7	22	0.7	672	19.4	0.9	34	7,349	0.9	34
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	0.0	0
65-74	82	28.9	0.9	32	0.9	112	39.4	0.8	29	0.8	50	17.6	0.9	37	561	0.9	37
75-84	328	30.2	0.9	30	0.9	383	35.3	0.7	23	0.7	222	20.4	0.9	33	2,390	0.9	33
85 and older	558	26.7	0.9	27	0.9	536	25.7	0.6	21	0.6	400	19.2	0.9	35	4,398	0.9	35
Male	313	33.1	0.9	31	0.9	375	39.7	0.8	30	0.8	133	14.1	0.9	35	1,393	0.9	35
Disabled	24	24.2	0.9	37	0.9	39	39.4	0.9	41	0.9	12	12.1	0.9	36	134	0.9	36
64 or younger	22	23.2	0.9	37	0.9	34	35.8	0.8	39	0.8	12	12.6	0.9	36	134	0.9	36
65-74	2	66.7	1.1	32	1.1	4	133.3	2.0	65	2.0	0	0.0	0.0	0	0	0.0	0
75-84	0	0.0	0.0	0	0.0	0	0.0	0.0	0	0.0	0	0.0	0.0	0	0	0.0	0
85 and older	0	0.0	0.0	0	0.0	1	100.0	1.6	60	1.6	0	0.0	0.0	0	0	0.0	0
Other Eligibles	289	34.2	0.9	31	0.9	336	39.7	0.8	29	0.8	121	14.3	0.9	35	1,259	0.9	35
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	0.0	0
65-74	60	35.7	0.9	28	0.9	70	41.7	1.0	37	1.0	21	12.5	0.9	36	235	0.9	36
75-84	128	36.4	0.9	32	0.9	138	39.2	0.8	27	0.8	58	16.5	0.9	35	579	0.9	35
85 and older	101	31.0	0.8	31	0.8	128	39.3	0.7	26	0.7	42	12.9	0.8	33	445	0.8	33
Unknown	0	0.0	0.0	0	0.0	0	0.0	0.0	0	0.0	0	0.0	0.0	0	0	0.0	0

Source: Data for this table are from the MAX 1999 file for New Hampshire, 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 2,668 beneficiaries who were in nursing facilities for part of their enrollment and their 23,486 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 (May 13 2003).
- Boe 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^{a, b, c, d}
 NEW HAMPSHIRE, 1999

Beneficiary Characteristics	ANTIANXIETY AGENTS					LAXATIVES					Mean Rx\$	Mean No. of Rx	All-Year NF Residents	Bene Mos among All-Year NF Residents	
	Users as %		Users as %		No. of Bene Mos among Users	Users as %		Users as %		Mean Rx\$					Mean No. of Rx
	No. of Users	Residents	No. of Users	Residents		No. of Users	Residents	No. of Users	Residents						
All	1,426	31.4 %	15,754	0.7	\$20	5,890	129.6 %	66,322	0.6	\$5	4,545	48,930			
Female	1,124	31.2	12,581	0.7	19	4,691	130.3	53,304	0.6	5	3,600	39,226			
Disabled	44	30.8	511	1.0	28	237	165.7	2,757	0.7	6	143	1,627			
64 or younger	43	31.9	499	1.0	28	227	168.1	2,637	0.7	6	135	1,541			
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12			
75-84	1	50.0	12	0.3	1	3	150.0	36	0.5	2	2	24			
85 and older	0	0.0	0	0.0	0	7	140.0	84	0.7	4	5	50			
Other Eligibles	1,080	31.2	12,070	0.6	19	4,454	128.8	50,547	0.6	5	3,457	37,599			
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0			
65-74	111	39.1	1,267	0.8	26	389	137.0	4,496	0.7	5	284	3,173			
75-84	365	33.6	3,965	0.7	19	1,426	131.3	16,065	0.6	5	1,086	11,607			
85 and older	604	28.9	6,838	0.6	18	2,639	126.4	29,986	0.6	4	2,087	22,819			
Male	302	32.0	3,173	0.7	21	1,199	126.9	13,018	0.6	5	945	9,704			
Disabled	40	40.4	445	1.1	43	141	142.4	1,536	0.7	7	99	1,094			
64 or younger	39	41.1	439	1.1	43	134	141.1	1,476	0.7	7	95	1,052			
65-74	1	33.3	6	3.0	66	5	166.7	36	0.5	2	3	30			
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0			
85 and older	0	0.0	0	0.0	0	2	200.0	24	1.3	23	1	12			
Other Eligibles	262	31.0	2,728	0.6	17	1,058	125.1	11,482	0.6	5	846	8,610			
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0			
65-74	62	36.9	683	0.7	19	252	150.0	2,806	0.6	5	168	1,793			
75-84	117	33.2	1,191	0.6	17	426	121.0	4,653	0.5	5	352	3,577			
85 and older	83	25.5	854	0.6	16	380	116.6	4,023	0.5	4	326	3,240			
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0			

Source: Data for this table are from the MAX 1999 file for New Hampshire, 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 2,668 beneficiaries who were in nursing facilities for part of their enrollment and their 23,486 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 (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^{a, b}
NEW HAMPSHIRE, 1999

Beneficiary Characteristics	No. of Benes					No. of Bene Mos					
	All	Aged	Disabled	Adults	Unknown	All	Aged	Disabled	Adults	Unknown	
All	106,195	12,272	13,092	16,397	64,433	990,054	119,844	136,740	128,373	605,094	3
Age											
5 and younger	22,829	0	38	0	22,791	207,292	0	445	0	206,847	0
6-14	29,716	0	69	0	29,647	292,958	0	795	0	292,163	0
15-20	12,166	0	351	0	11,815	108,840	0	3,553	0	105,287	0
21-44	21,347	3	6,040	15,136	168	183,193	28	63,977	118,418	770	0
45-64	7,795	58	6,486	1,250	1	77,397	578	66,924	9,883	12	0
65-74	3,466	3,367	87	11	0	34,835	33,904	856	72	0	3
75-84	4,206	4,199	7	0	0	40,867	40,788	79	0	0	0
85 and older	4,659	4,645	14	0	0	44,657	44,546	111	0	0	0
Unknown	11	0	0	0	11	15	0	0	0	15	0
Gender											
Female	63,146	9,573	7,113	14,370	32,089	584,960	94,907	75,306	114,850	299,894	3
Male	43,049	2,699	5,979	2,027	32,344	405,094	24,937	61,434	13,523	305,200	0
Unknown	0	0	0	0	0	0	0	0	0	0	0
Race											
White	101,487	12,001	12,810	15,423	61,252	948,053	116,957	133,980	120,899	576,214	3
African American	1,439	33	115	304	987	12,972	342	1,110	2,415	9,105	0
Other/unknown	3,269	238	167	670	2,194	29,029	2,545	1,650	5,059	19,775	0
Use of Nursing Facilities											
All year	4,545	4,303	242	0	0	48,930	46,209	2,721	0	0	0
Part year	2,668	2,412	244	4	8	23,493	20,866	2,486	47	94	0
None	98,982	5,557	12,606	16,393	64,425	917,631	52,769	131,533	128,326	605,000	3
Maintenance Assistance Status											
Cash	26,192	1,633	6,161	5,740	12,658	255,418	18,231	67,877	48,655	120,655	0
Medically needy	11,269	4,394	2,660	2,441	1,774	100,115	39,229	25,436	18,835	16,615	0
Poverty related	43,643	188	158	2,819	40,478	395,688	1,588	1,447	17,455	375,198	0
Other/unknown	25,091	6,057	4,113	5,397	9,523	238,833	60,796	41,980	43,428	92,626	3
Dual Status^c											
Full dual, all year	18,132	10,884	6,532	700	15	183,978	107,499	69,933	6,395	148	3
Full dual, part year	602	284	293	25	0	5,868	2,739	2,873	256	0	0
Non-dual, all year	87,461	1,104	6,267	15,672	64,418	800,208	9,606	63,934	121,722	604,946	0
Managed Care Status											
FFS all year	103,322	12,272	13,092	16,080	61,877	956,878	119,844	136,740	124,684	575,607	3
FFS part year, with Rx claims	811	0	0	109	702	9,106	0	0	1,224	7,882	0
FFS part year, no Rx claims	227	0	0	7	220	2,296	0	0	56	2,240	0
MC all year, with Rx claims	1,470	0	0	196	1,274	17,522	0	0	2,349	15,173	0
MC all year, no Rx claims	365	0	0	5	360	4,252	0	0	60	4,192	0

Source: Data for this table are from the MAX 1999 file for New Hampshire, 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 HAMPSHIRE, 1999

	Benes and					
	Bene Mos in Cell B of Table 1		Included in Cell C of Table 1		Excluded from Cell C of Table 1	
	No. of Benes	No. of Bene Mos	No. of Benes	No. of Bene Mos	No. of Benes	No. of Bene Mos
All	106,195	990,054	104,360	963,099	1,835	26,955
FFS all year	103,322	956,878	103,322	956,878	0	0
FFS part year, with Rx claims	811	9,106	811	5,002	0	4,104
FFS part year, with no Rx claims	227	2,296	227	1,219	0	1,077
MC all year, with Rx claims	1,470	17,522	0	0	1,470	17,522
MC all year, with no Rx claims	365	4,252	0	0	365	4,252

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