

**STATISTICAL COMPENDIUM:
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2001
NEW HAMPSHIRE**

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TABLE D.2
 CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a,b}
 DUAL ELIGIBLE BENEFICIARIES, NEW HAMPSHIRE, 2001

Beneficiary Characteristics	No. of Benes							No. of Bene Mos						
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown		
All	19,648	11,421	7,422	790	15	0	196,599	110,660	78,798	6,994	147	0		
Age														
5 and younger	1	0	0	0	1	0	12	0	0	0	12	0		
6-14	4	0	0	0	4	0	48	0	0	0	48	0		
15-20	36	0	26	0	10	0	366	0	279	0	87	0		
21-44	3,907	0	3,290	617	0	0	40,846	0	35,285	5,561	0	0		
45-64	4,187	4	4,021	162	0	0	43,791	48	42,384	1,359	0	0		
65-74	3,210	3,131	68	11	0	0	31,717	30,986	657	74	0	0		
75-84	3,991	3,984	7	0	0	0	38,505	38,429	76	0	0	0		
85 and older	4,312	4,302	10	0	0	0	41,314	41,197	117	0	0	0		
Unknown	0	0	0	0	0	0	0	0	0	0	0	0		
Gender														
Female	13,353	8,918	3,887	539	9	0	134,979	88,343	41,553	4,996	87	0		
Male	6,295	2,503	3,535	251	6	0	61,620	22,317	37,245	1,998	60	0		
Unknown	0	0	0	0	0	0	0	0	0	0	0	0		
Race														
White	19,316	11,258	7,274	769	15	0	193,343	109,087	77,306	6,803	147	0		
African American	114	30	74	10	0	0	1,151	292	772	87	0	0		
Other/unknown	218	133	74	11	0	0	2,105	1,281	720	104	0	0		
Use of Nursing Facilities^c														
Entire year	4,664	4,454	209	1	0	0	47,788	45,452	2,333	3	0	0		
Part year	2,219	2,070	149	0	0	0	19,058	17,559	1,499	0	0	0		
None	12,765	4,897	7,064	789	15	0	129,753	47,649	74,966	6,991	147	0		
Maintenance Assistance Status														
Cash	3,473	1,222	2,194	57	0	0	38,832	13,810	24,627	395	0	0		
Medically needy	7,729	4,715	2,516	495	3	0	71,380	42,077	24,781	4,489	33	0		
Poverty-related	678	348	293	35	2	0	5,700	2,877	2,554	245	24	0		
Other/unknown	7,768	5,136	2,419	203	10	0	80,687	51,896	26,836	1,865	90	0		
Dual Medicare Status^d														
Full dual, all year	18,454	10,888	6,803	748	15	0	185,361	105,790	72,869	6,555	147	0		
Full dual, part year	1,194	533	619	42	0	0	11,238	4,870	5,929	439	0	0		
Managed Care Status														
FFS all year	19,635	11,421	7,422	777	15	0	196,520	110,660	78,798	6,915	147	0		
FFS part year, with Rx claims	13	0	0	13	0	0	79	0	0	79	0	0		
FFS part year, no Rx claims	0	0	0	0	0	0	0	0	0	0	0	0		

Source: Data for this table are from the MAX 2001 file for New Hampshire, released by CMS in 03/2005. This table was produced on 09/19/2006.

- a. Table D.2 includes the beneficiaries represented by Cell G of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- b. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services. The total includes some beneficiaries with unknown basis of eligibility and some whose age categories are not consistent with basis of eligibility.
- c. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.
- d. The "Full dual, all year" group contains beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefits during all months of Medicaid enrollment in 2001. The "Full dual, part year" group contains beneficiaries who had such benefits for some, but not all, months of their enrollment. Refer to footnote g of Table 1 for more information about how we determined dual eligibility status.

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

TABLE D.3
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC^{a,b}
 DUAL ELIGIBLE BENEFICIARIES, NEW HAMPSHIRE, 2001

Beneficiary Characteristics	% with at Least One Rx	Mean No. of Rx	Mean Rx \$	\$ per Rx	Mean \$, All Services	Rx \$ as % of All Services	No. of Benes
All	90.9 %	50.3	\$2,719	\$54	\$20,150	13.5 %	19,648
Age							
5 and younger	100.0	59.0	6,082	103	71,003	8.6	1
6-14	100.0	42.8	6,616	155	29,861	22.2	4
15-20	91.7	23.6	1,734	74	19,086	9.1	36
21-44	87.5	40.1	3,147	79	20,089	15.7	3,907
45-64	91.7	57.1	3,726	65	20,899	17.8	4,187
65-74	86.6	49.9	2,484	50	14,375	17.3	3,210
75-84	92.0	53.2	2,304	43	19,311	11.9	3,991
85 and older	95.2	50.9	1,917	38	24,542	7.8	4,312
Unknown	0.0	0.0	0	0	0	0.0	0
Basis of Eligibility^c							
Aged	91.8	51.4	2,209	43	19,914	11.1	11,421
Disabled	90.2	50.5	3,564	71	22,169	16.1	7,422
Adults	84.3	32.8	2,134	65	4,635	46.0	790
Children	93.3	34.7	4,089	118	17,889	22.9	15
Unknown	0.0	0.0	0	0	0	0.0	0
Gender							
Female	92.9	53.8	2,694	50	19,489	13.8	13,353
Male	86.6	42.9	2,773	65	21,553	12.9	6,295
Unknown	0.0	0.0	0	0	0	0.0	0
Race							
White	91.0	50.6	2,729	54	20,308	13.4	19,316
African American	83.3	41.2	3,025	74	16,256	18.6	114
Other/unknown	85.3	29.6	1,700	57	8,231	20.6	218
Use of Nursing Facilities^d							
Entire year	98.2	64.6	2,678	42	34,612	7.7	4,664
Part year	95.7	52.7	2,190	42	19,988	11.0	2,219
None	87.3	44.7	2,826	63	14,894	19.0	12,765
Maintenance Assistance Status							
Cash	90.5	45.7	2,819	62	21,315	13.2	3,473
Medically needy	90.3	50.1	2,749	55	17,215	16.0	7,729
Poverty related	77.9	23.1	1,182	51	5,817	20.3	678
Other/unknown	92.7	55.0	2,779	51	23,801	11.7	7,768

Source: Data for this table are from the MAX 2001 file for New Hampshire, released by CMS in 03/2005. This table was produced on 09/19/2006.

- a. Table D.3 includes beneficiaries represented by Cell G of Table 1.
 - b. The Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
 - c. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.
 - d. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.
- Bene(s) = beneficiary (or beneficiaries); CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; OTC = over-the-counter; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.4
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a,b}
 DUAL ELIGIBLE BENEFICIARIES, NEW HAMPSHIRE, 2001

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	5.0	\$272	13.5 %	9.1 %	13.8 %	11.0 %	29.9 %	27.4 %	8.9 %	\$2,014	19,648	196,599
Age												
5 and younger	4.9	507	8.6	0.0	0.0	0.0	100.0	0.0	0.0	5,917	1	12
6-14	3.6	551	22.2	0.0	25.0	0.0	50.0	25.0	0.0	2,488	4	48
15-20	2.3	171	9.1	8.3	41.7	16.7	22.2	11.1	0.0	1,877	36	366
21-44	3.8	301	15.7	12.5	23.0	14.0	27.6	17.3	5.7	1,922	3,907	40,846
45-64	5.5	356	17.8	8.3	13.8	10.4	29.1	27.5	10.9	1,998	4,187	43,791
65-74	5.0	251	17.3	13.4	12.8	10.1	27.8	26.7	9.2	1,455	3,210	31,717
75-84	5.5	239	11.9	8.0	9.7	10.0	29.9	31.8	10.6	2,002	3,991	38,505
85 and older	5.3	200	7.8	4.8	9.7	10.3	34.3	32.9	8.1	2,562	4,312	41,314
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Basis of Eligibility^c												
Aged	5.3	228	11.1	8.2	10.5	10.1	31.1	30.8	9.3	2,055	11,421	110,660
Disabled	4.8	336	16.1	9.8	17.7	12.2	28.4	23.3	8.7	2,088	7,422	78,798
Adults	3.7	241	46.0	15.7	23.8	11.9	26.6	16.8	5.2	524	790	6,994
Children	3.5	417	22.9	6.7	33.3	0.0	40.0	20.0	0.0	1,825	15	147
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Gender												
Female	5.3	267	13.8	7.1	12.0	10.8	30.6	29.7	9.8	1,928	13,353	134,979
Male	4.4	283	12.9	13.4	17.6	11.2	28.3	22.4	7.0	2,202	6,295	61,620
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	5.1	273	13.4	9.0	13.6	10.9	30.0	27.5	9.0	2,029	19,316	193,343
African American	4.1	300	18.6	16.7	17.5	14.0	21.1	26.3	4.4	1,610	114	1,151
Other/unknown	3.1	176	20.6	14.7	30.7	13.8	21.6	17.9	1.4	852	218	2,105
use or nursing Facilities^d												
Entire year	6.3	261	7.7	1.8	6.4	7.9	31.6	38.3	13.9	3,378	4,664	47,788
Part year	6.1	255	11.0	4.3	8.2	9.9	30.1	34.9	12.7	2,327	2,219	19,058
None	4.4	278	19.0	12.7	17.5	12.3	29.2	22.1	6.4	1,465	12,765	129,753
Maintenance Assistance Status												
Cash	4.1	252	13.2	9.5	20.2	13.0	29.7	22.4	5.3	1,906	3,473	38,832
Medically needy	5.4	298	16.0	9.7	11.0	10.5	30.8	28.2	9.8	1,864	7,729	71,380
Poverty related	2.7	141	20.3	22.1	25.2	13.3	22.7	12.4	4.3	692	678	5,700
Other/unknown	5.3	268	11.7	7.3	12.7	10.3	29.6	30.1	10.0	2,291	7,768	80,687

Table D4

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2001 file for New Hampshire, released by CMS in 03/2005. This table was produced on 09/19/2006.

- a. Table D.4 includes the beneficiaries represented by Cell G of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- b. The Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
- c. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.
- d. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.

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

TABLE D.5
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, NEW HAMPSHIRE, 2001

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	\$ per Rx	No. of Rx	\$ per Rx
All	5.0	\$272	\$54	\$89	0.4	\$23	\$57	\$51
Age								
5 and younger	4.9	507	103	137	0.0	0	0	16
6-14	3.6	551	155	228	0.3	11	34	17
15-20	2.3	171	74	125	0.2	16	75	30
21-44	3.8	301	79	124	0.4	35	98	43
45-64	5.5	356	65	103	0.4	33	77	55
65-74	5.0	251	50	81	0.3	15	47	52
75-84	5.5	239	43	72	0.4	15	35	55
85 and older	5.3	200	38	66	0.4	13	29	50
Unknown	0.0	0	0	0	0.0	0	0	0
Basis of Eligibility^d								
Aged	5.3	228	43	73	0.4	14	35	52
Disabled	4.8	336	71	111	0.4	35	86	50
Adults	3.7	241	65	109	0.2	18	80	35
Children	3.5	417	118	208	0.4	29	75	41
Unknown	0.0	0	0	0	0.0	0	0	0
Gender								
Female	5.3	267	50	83	0.4	20	48	52
Male	4.4	283	65	106	0.4	29	78	49
Unknown	0.0	0	0	0	0.0	0	0	0
Race								
White	5.1	273	54	89	0.4	23	57	51
African American	4.1	300	74	122	0.3	16	64	42
Other/unknown	3.1	176	57	93	0.3	16	59	26
Use of Nursing Facilities^e								
Entire year	6.3	261	42	71	0.5	16	31	67
Part year	6.1	255	42	73	0.5	17	35	62
None	4.4	278	63	101	0.3	26	75	44
Maintenance Assistance Status								
Cash	4.1	252	62	99	0.3	23	73	42
Medically needy	5.4	298	55	89	0.4	26	60	54
Poverty related	2.7	141	51	88	0.2	12	59	28
Other/unknown	5.3	268	51	86	0.4	20	48	54

Table D5

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2001 file for New Hampshire, released by CMS in 03/2005. This table was produced on 09/19/2006.

- a. Table D.5 includes the beneficiaries represented by Cell G of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- b. The Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
- c. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In New Hampshire, 0.7 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).
- d. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.
- e. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.

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

TABLE D.6

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, NEW HAMPSHIRE, 2001

Therapeutic Category	No. of Rx per Bene Mo among Users			\$ per Bene Mo among Users			Total No. of Rx			Total Rx \$	Users						
	Patented			Off-Patent			Generic				No. Dual Benes	As % of					
	Total	Brand-Name	Off-Patent	Brand-Name	Off-Patent	Generic	Total	Brand-Name	Off-Patent				Generic				
Anti-infective Agents	0.3	0.2	0.0	0.2	\$19	\$16	\$0	\$2	\$53	\$89	\$106	\$14	38,380	10,172	\$2,041,285	51.8 %	110,214
Biologics	0.1	0.1	0.0	0.0	1	0	0	1	13	9	0	19	1,066	973	14,215	5.0	10,513
Antineoplastic Agents	0.6	0.3	0.1	0.2	116	90	14	12	191	279	142	63	4,008	655	764,857	3.3	6,599
Endocrine/Metabolic Drugs	1.0	0.5	0.2	0.3	35	27	3	4	35	56	16	14	85,107	8,096	2,980,330	41.2	85,523
Cardiovascular Agents	1.8	0.6	0.1	1.0	56	33	3	19	32	53	31	19	204,458	11,117	6,449,675	56.6	115,586
Respiratory Agents	0.9	0.5	0.0	0.4	40	30	1	10	44	59	35	26	69,223	7,088	3,060,146	36.1	76,049
Gastrointestinal Agents	0.8	0.4	0.0	0.4	62	48	3	11	76	125	86	27	68,817	8,055	5,249,298	41.0	85,204
Genitourinary Agents	0.5	0.3	0.0	0.2	23	20	0	3	47	61	40	18	14,045	2,643	666,946	13.5	28,556
CNS Drugs	1.7	0.9	0.1	0.7	136	100	17	19	80	112	118	29	220,795	12,373	17,728,650	63.0	130,181
Stimulants/Anti-obesity/Anorexia	0.6	0.2	0.0	0.4	29	16	1	11	47	105	50	26	2,056	316	96,499	1.6	3,370
Miscellaneous Psychological/Neurological Agents	0.6	0.5	0.0	0.0	71	68	0	3	121	125	98	71	7,620	1,247	922,879	6.3	12,964
Analgesics and Anesthetics	0.9	0.4	0.1	0.5	53	40	5	8	58	109	73	17	95,062	9,817	5,484,344	50.0	102,816
Neuromuscular Agents	1.2	0.5	0.1	0.6	67	48	4	15	58	100	53	24	78,303	6,214	4,518,968	31.6	67,266
Nutritional Products	0.7	0.0	0.1	0.5	11	0	2	8	17	15	30	15	21,211	3,176	355,666	16.2	32,493
Hematological Agents	0.8	0.1	0.2	0.5	35	25	4	6	42	182	17	13	29,868	3,447	1,253,431	17.5	35,618
Topical Products	0.5	0.2	0.0	0.3	16	10	1	4	32	52	32	16	44,413	8,254	1,413,818	42.0	90,301
Miscellaneous Products	0.3	0.2	0.0	0.1	60	42	10	8	181	260	255	59	1,825	518	329,911	2.6	5,475
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	11	0	0	0	33	0	0	0	2,805	816	93,657	4.2	8,918
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.	989,062	n.a.	53,424,575	n.a.	n.a.

Source: Data for this table are from the MAX 2001 file for New Hampshire, released by CMS in 03/2005. This table was produced on 09/19/2006.

- a. Table D.6 includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 2001. A beneficiary who used drugs from two or more categories was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
- c. For information about these therapeutic categories, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (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, 0.7 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 D.7

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, NEW HAMPSHIRE, 2001

Top 10 Drug Groups	Users			Among Users			
	Total Medicaid Rx \$	No.	As % of Dual Benes	No. of Bene Mos	No. of Rx per Bene Mo	\$ per Rx	Rx \$ per Bene Mo
ANTIPSYCHOTICS	\$10,200,966	7,618	38.8 %	82,188	0.9	\$133	\$124
ANTIDEPRESSANTS	5,888,343	11,788	60.0	125,561	0.8	62	47
ULCER DRUGS	4,520,703	7,277	37.0	77,811	0.6	94	58
ANTICONVULSANT	3,644,146	5,814	29.6	63,674	0.9	63	57
ANALGESICS - Narcotic	3,109,839	10,623	54.1	112,266	0.5	55	28
ANTIASTHMATIC	2,043,972	8,355	42.5	88,583	0.5	44	23
ANTIDIABETIC	2,013,659	5,195	26.4	55,247	0.8	48	36
ANALGESICS - ANTI-INFLAMMATORY	1,983,354	6,364	32.4	69,855	0.4	64	28
ANTIHYPERTENSIVE	1,940,332	3,308	16.8	36,091	0.7	80	54
ANTIHYPERTENSIVE	1,504,389	5,671	28.9	59,435	0.7	35	25
Total	36,849,703	72,013		770,711	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2001 file for New Hampshire, released by CMS in 03/2005. This table was produced on 09/19/2006.

a. Table D.7 includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2001. 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 2001. 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; n.a. = not applicable.

TABLE D.7A
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR TOP 10 DRUG GROUPS COMBINED
 AND FIRST AND SECOND GROUPS SEPARATELY, BY SEX, BOE, AND AGE^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, NEW HAMPSHIRE, 2001

Beneficiary Characteristics	All Top 10 Drug Groups					ANTIPSYCHOTICS					ANTIDEPRESSANTS						
	No. of Rx	Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
All	520,715	\$36,849,703	7,618	38.8 %	82,188	0.9	\$124	11,788	60.0 %	125,561	0.8	\$47					
Female	361,956	24,190,092	4,841	36.3	52,230	0.8	101	8,639	64.7	92,397	0.8	46					
Disabled	133,041	10,711,920	1,948	50.1	22,105	1.0	140	3,350	86.2	37,354	0.7	50					
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
6-14	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
15-20	118	8,741	6	75.0	68	0.9	84	5	62.5	56	0.5	32					
21-44	42,770	3,759,728	884	60.0	10,026	0.9	138	1,283	87.0	14,286	0.7	49					
45-64	88,544	6,857,504	1,043	44.3	11,872	1.0	144	2,041	86.7	22,806	0.7	50					
65-74	1,397	72,525	13	32.5	115	1.3	101	19	47.5	190	0.9	36					
75-84	28	2,561	0	0.0	0	0.0	0	1	20.0	4	0.5	19					
85 and older	184	10,861	2	28.6	24	0.6	97	1	14.3	12	1.0	31					
Other Eligibles	228,915	13,478,172	2,893	30.6	30,125	0.7	72	5,289	55.9	55,043	0.8	44					
5 and younger	10	410	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
6-14	10	459	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
15-20	69	2,849	0	0.0	0	0.0	0	7	100.0	70	0.4	28					
21-44	9,804	746,323	151	34.2	1,620	0.5	62	427	96.8	4,470	0.5	46					
45-64	2,369	159,129	22	22.9	253	0.6	88	82	85.4	899	0.6	46					
65-74	61,703	3,959,722	556	25.5	6,072	0.9	103	1,079	49.5	11,648	0.8	44					
75-84	79,562	4,581,877	948	30.7	9,692	0.7	74	1,752	56.8	18,162	0.8	44					
85 and older	75,388	4,027,403	1,216	33.3	12,488	0.6	56	1,942	53.2	19,794	0.8	43					
Male	158,759	12,659,611	2,777	44.1	29,958	1.1	165	3,149	50.0	33,164	0.8	49					
Disabled	100,604	9,224,982	2,026	57.3	22,684	1.2	191	1,933	54.7	21,379	0.8	53					
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
6-14	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
15-20	149	12,427	10	55.6	114	0.6	67	7	38.9	80	0.5	39					
21-44	45,829	4,634,573	1,151	63.4	12,930	1.2	195	959	52.8	10,731	0.8	55					
45-64	53,751	4,517,441	857	51.4	9,548	1.3	187	956	57.3	10,445	0.8	52					
65-74	770	56,336	8	28.6	92	0.9	137	8	28.6	87	0.7	56					
75-84	92	3,923	0	0.0	0	0.0	0	3	150.0	36	0.8	22					
85 and older	13	282	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
Other Eligibles	58,155	3,434,629	751	27.2	7,274	0.7	84	1,216	44.1	11,785	0.8	42					
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
6-14	16	668	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
15-20	38	1,087	0	0.0	0	0.0	0	2	66.7	23	0.2	9					
21-44	2,642	206,491	23	13.1	221	0.6	99	86	48.9	833	0.5	38					
45-64	1,248	94,806	2	2.9	24	0.9	145	24	34.3	231	0.6	49					
65-74	20,963	1,317,316	217	22.6	2,341	0.9	109	332	34.6	3,449	0.8	44					
75-84	19,964	1,138,174	284	31.6	2,598	0.8	81	451	50.2	4,337	0.8	42					
85 and older	13,284	676,087	225	34.7	2,090	0.6	57	321	49.5	2,912	0.8	43					
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 2001 file for New Hampshire, released by CMS in 03/2005. This table was produced on 09/19/2006.

- a. Table D.7A includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2001. 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 2001. 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 D.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}
 DUAL ELIGIBLE BENEFICIARIES, NEW HAMPSHIRE, 2001

Beneficiary Characteristics	ULCER DRUGS				ANTICONVULSANT				ANALGESICS - Narcotic						
	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
All	7,277	37.0 %	77,811	0.6	\$58	5,814	29.6 %	63,674	0.9	\$57	10,623	54.1 %	112,266	0.5	\$28
Female	5,319	39.8	57,203	0.6	58	3,719	27.9	40,991	0.9	53	7,775	58.2	82,719	0.5	26
Disabled	1,617	41.6	18,264	0.6	62	2,023	52.0	22,951	0.9	62	2,815	72.4	31,702	0.5	31
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	1	12.5	12	0.1	7	2	25.0	23	0.7	43	4	50.0	39	0.2	3
21-44	528	35.8	6,034	0.5	56	871	59.1	9,912	0.8	61	1,082	73.4	12,214	0.4	28
45-64	1,071	45.5	12,033	0.6	66	1,142	48.5	12,932	0.9	63	1,694	72.0	19,098	0.5	33
65-74	15	37.5	161	0.6	41	7	17.5	72	1.2	63	29	72.5	279	0.9	33
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	20.0	12	0.1	1
85 and older	2	28.6	24	1.0	111	1	14.3	12	0.9	41	5	71.4	60	0.3	11
Other Eligibles	3,702	39.1	38,939	0.6	56	1,696	17.9	18,040	0.9	41	4,960	52.4	51,017	0.5	24
5 and younger	3	300.0	36	0.3	11	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	1	100.0	12	0.8	37	1	100.0	12	0.1	1	0	0.0	0	0.0	0
15-20	2	28.6	17	0.2	4	3	42.9	32	0.7	20	4	57.1	44	0.1	1
21-44	147	33.3	1,582	0.4	37	213	48.3	2,259	0.7	41	444	100.7	4,776	0.5	36
45-64	40	41.7	421	0.4	40	38	39.6	430	0.8	61	80	83.3	843	0.5	25
65-74	943	43.2	10,277	0.6	57	485	22.2	5,327	1.0	51	1,134	52.0	12,360	0.5	22
75-84	1,252	40.6	13,225	0.6	57	532	17.2	5,663	0.9	37	1,511	49.0	15,562	0.5	21
85 and older	1,314	36.0	13,369	0.7	56	424	11.6	4,317	0.8	31	1,787	48.9	17,432	0.5	24
Male	1,958	31.1	20,608	0.6	59	2,095	33.3	22,683	1.0	66	2,848	45.2	29,547	0.5	31
Disabled	1,036	29.3	11,524	0.6	58	1,508	42.7	16,887	1.0	72	1,617	45.7	17,741	0.5	35
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	6	33.3	70	0.3	11	2	11.1	24	0.3	17	4	22.2	48	0.1	1
21-44	415	22.9	4,687	0.6	57	789	43.4	8,888	0.9	70	784	43.2	8,854	0.4	34
45-64	600	36.0	6,592	0.6	59	713	42.7	7,936	1.0	75	811	48.6	8,654	0.5	36
65-74	13	46.4	151	0.7	73	4	14.3	39	1.2	29	17	60.7	173	0.6	50
75-84	2	100.0	24	0.5	13	0	0.0	0	0.0	0	1	50.0	12	0.1	1
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	922	33.4	9,084	0.7	60	587	21.3	5,796	0.9	47	1,231	44.6	11,806	0.5	26
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	1	33.3	12	1.0	37	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	100.0	36	0.2	2
21-44	35	19.9	338	0.5	59	56	31.8	535	0.7	65	150	85.2	1,449	0.6	47
45-64	20	28.6	192	0.6	61	10	14.3	84	0.7	76	47	67.1	483	0.8	70
65-74	317	33.0	3,375	0.6	56	219	22.8	2,296	0.9	54	361	37.6	3,738	0.5	21
75-84	314	34.9	2,990	0.7	67	178	19.8	1,740	0.9	38	382	42.5	3,441	0.5	22
85 and older	236	36.4	2,189	0.7	59	123	19.0	1,129	0.8	32	288	44.4	2,659	0.5	18
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Table D7B

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2001 file for New Hampshire, released by CMS in 03/2005. This table was produced on 09/19/2006.

- a. Table D.7B includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2001. 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 2001. 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 D.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}
 DUAL ELIGIBLE BENEFICIARIES, NEW HAMPSHIRE, 2001

Beneficiary Characteristics	ANTI-ASTHMATIC				ANTI-DIABETIC				ANALGESICS - ANTI-INFLAMMATORY						
	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
All	8,355	42.5 %	88,563	0.5	\$23	5,195	26.4 %	55,247	0.8	\$36	6,364	32.4 %	69,955	0.4	\$28
Female															
Disabled	6,211	46.5	66,379	0.5	23	3,717	27.8	39,949	0.8	36	4,856	36.4	53,375	0.5	31
5 and younger	2,074	53.4	23,356	0.4	23	1,026	26.4	11,499	0.7	43	1,735	44.6	19,768	0.4	26
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	624	42.3	7,061	0.4	20	175	11.9	1,935	0.6	39	598	40.6	6,792	0.3	15
45-64	1,430	60.8	16,085	0.5	24	821	34.9	9,260	0.8	44	1,119	47.6	12,781	0.4	32
65-74	17	42.5	174	0.9	43	24	60.0	232	1.0	50	14	35.0	148	0.5	29
75-84	3	60.0	36	0.3	18	0	0.0	0	0.0	0	1	20.0	12	0.1	1
85 and older	0	0.0	0	0.0	0	6	85.7	72	0.7	38	1	14.3	12	1.0	6
Other Eligibles	4,137	43.7	43,023	0.5	23	2,691	28.4	28,450	0.8	33	3,121	33.0	33,607	0.5	33
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	1	14.3	10	0.2	4	0	0.0	0	0.0	0	2	28.6	21	0.1	1
21-44	161	36.5	1,679	0.3	12	58	13.2	624	0.7	46	219	49.7	2,314	0.3	19
45-64	25	26.0	206	0.3	15	27	28.1	241	0.6	31	47	49.0	503	0.4	15
65-74	1,222	56.0	12,977	0.6	28	894	41.0	9,842	0.7	37	766	35.1	8,470	0.5	39
75-84	1,420	46.0	14,586	0.6	25	1,060	34.4	11,091	0.8	32	1,044	33.8	11,245	0.5	35
85 and older	1,308	35.8	13,565	0.5	18	652	17.8	6,652	0.8	27	1,043	28.6	11,054	0.6	31
Male															
Disabled	2,144	34.1	22,204	0.6	24	1,478	23.5	15,298	0.8	38	1,508	24.0	16,480	0.4	21
5 and younger	894	25.3	9,750	0.5	23	686	19.4	7,448	0.8	42	878	24.8	9,877	0.3	19
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	3	16.7	36	0.1	4	0	0.0	0	0.0	0	3	16.7	36	0.1	4
21-44	309	17.0	3,429	0.4	16	179	9.9	2,012	0.8	37	418	23.0	4,759	0.3	13
45-64	565	33.9	6,111	0.6	26	497	29.8	5,329	0.8	43	445	26.7	4,946	0.4	25
65-74	16	57.1	165	0.8	38	8	28.6	83	0.7	39	9	32.1	103	0.5	25
75-84	0	0.0	0	0.0	0	2	100.0	24	0.4	52	2	100.0	24	0.2	12
85 and older	1	33.3	9	0.6	16	0	0.0	0	0.0	0	1	33.3	9	0.9	16
Other Eligibles	1,250	45.3	12,454	0.6	25	792	28.7	7,850	0.8	35	630	22.8	6,603	0.5	24
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	2	66.7	24	0.9	30	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	32	18.2	323	0.4	16	17	9.7	162	0.8	38	64	36.4	644	0.2	12
45-64	25	35.7	253	0.4	15	20	28.6	188	0.6	42	23	32.9	241	0.3	15
65-74	422	44.0	4,631	0.6	27	324	33.7	3,387	0.8	38	196	20.4	2,159	0.4	22
75-84	447	49.7	4,240	0.6	24	291	32.4	2,780	0.8	34	202	22.5	2,057	0.5	28
85 and older	322	49.6	2,983	0.6	24	140	21.6	1,333	0.8	28	145	22.3	1,502	0.5	30
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Table D7C

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2001 file for New Hampshire, released by CMS in 03/2005. This table was produced on 09/19/2006.

- a. Table D.7C includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2001. 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 2001. 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 D.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}
 DUAL ELIGIBLE BENEFICIARIES, NEW HAMPSHIRE, 2001

Beneficiary Characteristics	ANTIHYPERLIPIIDIC				ANTIHYPERTENSIVE				Mean Rx \$	Mean No. of Rx	Users as % of Dual Benes	No. of Bene Mos among Users	Mean Rx \$	Mean No. of Rx	Users as % of Dual Benes	No. of Bene Mos among Users	No. of Bene Mos
	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean Rx \$	Mean No. of Rx	Users as % of Dual Benes	No. of Bene Mos among Users	Mean Rx \$									
All	3,308	16.8 %	36,091	0.7	\$54	5,671	28.9 %	59,435	0.7	\$25	19,648	196,599					
Female																	
Disabled	2,290	17.1	25,089	0.7	55	4,006	30.0	42,414	0.7	26	13,353	134,979					
5 and younger	769	19.8	8,685	0.7	54	770	19.8	8,555	0.7	25	3,887	41,553					
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0					
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0					
21-44	101	6.9	1,132	0.6	48	120	8.1	1,343	0.5	20	1,474	15,766					
45-64	652	27.7	7,383	0.7	56	631	26.8	7,004	0.7	25	2,353	25,195					
65-74	16	40.0	170	0.6	41	12	30.0	124	0.7	29	40	378					
75-84	0	0.0	0	0.0	0	2	40.0	24	0.6	75	5	52					
85 and older	0	0.0	0	0.0	0	5	71.4	60	0.8	26	7	84					
Other Eligibles	1,521	16.1	16,404	0.7	55	3,236	34.2	33,859	0.7	26	9,466	93,426					
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12					
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12					
15-20	0	0.0	0	0.0	0	2	28.6	24	0.3	5	7	63					
21-44	28	6.3	295	0.4	41	42	9.5	447	0.5	20	441	4,129					
45-64	20	20.8	186	0.7	52	21	21.9	192	0.6	17	96	879					
65-74	672	30.8	7,336	0.7	57	857	39.3	9,290	0.7	25	2,182	22,205					
75-84	621	20.1	6,662	0.7	55	1,152	37.3	12,135	0.7	26	3,085	30,568					
85 and older	180	4.9	1,925	0.7	49	1,162	31.8	11,771	0.8	27	3,653	35,558					
Male																	
Disabled	1,018	16.2	11,002	0.7	52	1,665	26.4	17,021	0.7	25	6,295	61,620					
5 and younger	636	18.0	7,040	0.7	51	672	19.0	7,207	0.7	24	3,535	37,245					
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0					
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0					
21-44	191	10.5	2,198	0.6	45	188	10.4	2,042	0.6	16	18	201					
45-64	439	26.3	4,770	0.7	54	470	28.2	5,015	0.7	25	1,816	19,519					
65-74	4	14.3	48	0.9	66	12	42.9	126	0.7	23	1,668	17,189					
75-84	2	100.0	24	0.9	33	1	50.0	12	1.0	39	2	279					
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	24					
Other Eligibles	382	13.8	3,962	0.7	53	993	36.0	9,814	0.7	26	2,760	24,375					
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0					
6-14	0	0.0	0	0.0	0	1	33.3	12	0.3	19	3	36					
15-20	0	0.0	0	0.0	0	1	33.3	12	0.4	9	3	24					
21-44	17	9.7	145	0.6	46	21	11.9	197	0.6	28	176	1,432					
45-64	16	22.9	147	0.7	60	23	32.9	210	0.6	21	70	528					
65-74	213	22.2	2,272	0.7	55	351	36.6	3,671	0.7	26	960	8,855					
75-84	116	12.9	1,187	0.7	51	359	39.9	3,508	0.7	25	899	7,861					
85 and older	20	3.1	211	0.6	45	237	36.5	2,204	0.8	26	649	5,639					
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 2001 file for New Hampshire, released by CMS in 03/2005. This table was produced on 09/19/2006.

a. Table D.7D includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2001. 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 2001. 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 D.8
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BENEFICIARY CHARACTERISTIC^{a, b}
 DUAL ELIGIBLE BENEFICIARIES, NEW HAMPSHIRE, 2001

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	\$261	6.3	4,664	47,788
Age				
0-64	437	7.9	200	2,217
65-74	357	7.6	486	4,961
75-84	283	6.6	1,463	14,699
85 and older	216	5.7	2,515	25,911
Unknown	0	0.0	0	0
Gender				
Female	252	6.2	3,718	38,695
Male	301	6.6	946	9,093
Unknown	0	0.0	0	0
Race				
White	261	6.3	4,639	47,528
African American	315	8	11	99
Other/unknown	272	6.1	14	161
Basis of Eligibility^c				
Aged	252	6.2	4,454	45,452
Disabled	435	7.9	209	2,333
Adults	530	9.7	1	3
Children	0	0.0	0	0
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 2001 file for New Hampshire, released by CMS in 03/2005. This table was produced on 09/19/2006.

a. Table D.8 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their 2001 Medicaid enrollment. A total of 2,219 beneficiaries who were in nursing facilities for part of their enrollment and their 19,058 benefit months were excluded from the analysis. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

c. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.

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

TABLE D.9
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d, e}
 DUAL ELIGIBLE BENEFICIARIES, NEW HAMPSHIRE, 2001

Therapeutic Category	No. of Rx per Bene Mo among Users			\$ per Bene Mo among Users			Total # of Rx	Total Rx \$	No. Residents	As % of Dual All-Year NF Residents	No. of Bene Mos				
	Total	Patented	Off-Patent	Brand-Name	Generic	Total						Patented	Off-Patent	Brand-Name	Generic
Anti-infective Agents	0.4	0.2	0.0	0.2	\$14	\$12	\$0	\$2	\$98	\$13	12,176	\$463,247	2,949	63.2 %	32,017
Biologics	0.1	0.1	0.0	0.0	1	0	0	1	7	0	854	10,131	781	16.7	8,568
Antineoplastic Agents	0.7	0.3	0.2	0.3	97	60	19	18	196	123	1,457	198,523	202	4.3	2,044
Endocrine/Metabolic Drugs	1.2	0.5	0.3	0.4	34	25	4	5	48	13	23,473	663,365	1,898	40.7	19,594
Cardiovascular Agents	2.1	0.5	0.2	1.4	51	22	3	25	41	21	68,426	1,677,645	3,200	68.6	32,946
Respiratory Agents	1.0	0.4	0.0	0.5	35	21	0	14	53	26	16,820	618,350	1,646	35.3	17,611
Gastrointestinal Agents	1.0	0.3	0.0	0.6	52	33	2	17	101	69	23,643	1,298,762	2,360	50.6	24,739
Genitourinary Agents	0.6	0.4	0.0	0.2	25	21	0	4	56	31	5,297	234,527	861	18.5	9,258
CNS Drugs	1.7	1.0	0.1	0.6	104	83	6	15	84	82	58,320	3,615,793	3,330	71.4	34,749
Stimulants/Anti-obesity/Anorexia	0.9	0.1	0.0	0.8	27	13	0	14	109	16	608	18,222	63	1.4	682
Miscellaneous Psychological/Neurological Agents	0.8	0.8	0.0	0.0	93	93	0	0	113	0	4,146	465,182	500	10.7	4,994
Analgesics and Anesthetics	1.0	0.5	0.1	0.4	50	40	5	6	78	56	24,830	1,222,447	2,346	50.3	24,468
Neuromuscular Agents	1.3	0.4	0.1	0.8	68	36	3	29	80	62	17,139	894,768	1,230	26.4	13,180
Nutritional Products	0.8	0.0	0.0	0.7	12	0	1	11	21	19	8,663	129,364	1,047	22.4	10,778
Hematological Agents	1.2	0.2	0.4	0.6	31	20	5	5	131	13	14,463	381,819	1,204	25.8	12,501
Topical Products	0.6	0.2	0.0	0.4	17	11	1	5	48	27	19,684	551,319	2,905	62.3	31,781
Miscellaneous Products	0.2	0.1	0.0	0.1	7	3	0	4	26	0	466	14,724	197	4.2	2,102
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	13	0	0	0	0	0	780	30,542	214	4.6	2,423
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.	301,245	12,488,730	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2001 file for New Hampshire, released by CMS in 03/2005. This table was produced on 09/19/2006.

- a. Table D.9 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2001. A total of 2,219 beneficiaries who were in nursing facilities for part of their enrollment and their 19,058 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 2001. 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, 0.7 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 D.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}
 DUAL ELIGIBLE BENEFICIARIES, NEW HAMPSHIRE, 2001

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	\$1,645,709	2,003	42.9 %	21,395	0.7	\$103	\$77
ANTIDEPRESSANTS	1,602,699	2,999	64.3	31,816	0.9	54	50
ULCER DRUGS	1,116,406	1,690	36.2	17,630	0.8	82	63
ANALGESICS - Narcotic	700,165	1,992	42.7	20,516	0.7	49	34
ANTICONVULSANT	558,247	1,032	22.1	11,186	1.1	47	50
ANALGESICS - ANTI-INFLAMMATORY	499,731	1,373	29.4	14,961	0.6	55	33
ASTHMATIC	469,740	1,925	41.3	20,483	0.6	37	23
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	467,189	512	11.0	5,134	0.8	111	91
ANTIDIABETIC	455,306	1,245	26.7	13,088	1.0	36	35
ANTIHYPERTENSIVE	449,659	1,450	31.1	15,071	0.9	33	30
Total	7,964,851	16,221		171,280	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2001 file for New Hampshire, released by CMS in 03/2005. This table was produced on 09/19/2006.

a. Table D.10 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2001. A total of 2,219 beneficiaries who were in nursing facilities for part of their enrollment and their 19,058 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 2001. 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 2001 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 D.10A

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR TOP 10 DRUG GROUPS COMBINED AND FIRST AND SECOND TOP DRUG GROUPS SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BOE, AND AGE^{a, b, c, d}
DUAL ELIGIBLE BENEFICIARIES, NEW HAMPSHIRE, 2001

Beneficiary Characteristics	All Top 10 Drug Groups					ANTIPSYCHOTICS					ANTIDEPRESSANTS				
	No. of Rx	Rx \$	Users as %			Mean No. of Rx	No. of Users	Residents	NF	Mos among Users	No. of Bene Mos among Users	Users as %			
			42.9 %	21,395	0.7							2,999	64.3 %	31,816	0.9
All	137,652	\$7,964,851	2,003	42.9 %	21,395	0.7	\$77	2,999	64.3 %	31,816	0.9	\$50			
Female	108,821	6,235,203	1,584	42.6	17,147	0.7	74	2,417	65.0	25,884	0.9	50			
Disabled	6,083	355,349	60	55.0	673	0.8	87	92	84.4	1,063	1.0	62			
64 or younger	5,557	327,904	57	55.9	638	0.8	86	89	87.3	1,027	1.0	63			
65-74	386	18,963	2	66.7	23	0.9	80	2	66.7	24	1.1	65			
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0			
85 and older	140	8,482	1	25.0	12	1.1	192	1	25.0	12	1.0	31			
Other Eligibles	102,738	5,879,854	1,524	42.2	16,474	0.7	74	2,325	64.4	24,821	0.9	50			
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0			
65-74	12,731	815,907	184	58.0	1,979	0.9	117	239	75.4	2,437	1.0	59			
75-84	36,465	2,102,934	512	45.6	5,504	0.8	81	791	70.5	8,447	1.0	53			
85 and older	53,542	2,961,013	828	38.2	8,991	0.7	60	1,295	59.7	13,937	0.9	46			
Male	28,831	1,729,648	419	44.3	4,248	0.8	88	582	61.5	5,932	0.9	51			
Disabled	3,983	328,452	46	46.0	503	1.0	129	59	59.0	673	1.1	73			
64 or younger	3,866	320,699	44	45.4	479	1.0	130	57	58.8	649	1.1	72			
65-74	117	7,753	2	100.0	24	1.0	126	2	100.0	24	1.1	78			
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	0.0	0	0	0.0	0	0.0	0			
Other Eligibles	24,848	1,401,196	373	44.1	3,745	0.8	83	523	61.8	5,259	0.9	49			
64 or younger	11	235	0	0.0	0	0.0	0	1	100.0	3	0.3	9			
65-74	6,284	368,969	99	60.4	1,080	0.9	102	122	74.4	1,311	1.0	52			
75-84	9,940	575,173	143	41.9	1,386	0.8	87	211	61.9	2,110	0.9	49			
85 and older	8,613	456,819	131	38.5	1,279	0.6	63	189	55.6	1,835	0.9	46			
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 2001 file for New Hampshire, released by CMS in 03/2005. This table was produced on 09/19/2006.

a. Table D.10A includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2001. A total of 2,219 beneficiaries who were in nursing facilities for part of their enrollment and their 19,058 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 2001. 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 2001 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 D.10B
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY
 AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BOE, AND AGE^{a,b,c,d}
 DUAL ELIGIBLE BENEFICIARIES, NEW HAMPSHIRE, 2001

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	Mean No. of Rx	Mean No. of Rx	No. of Users	No. of Bene Users	Mean No. of Rx	Mean No. of Rx	Mean No. of Rx	No. of Users	No. of Bene Users	Mean No. of Rx	Mean No. of Rx	Mean No. of Rx	No. of Users	No. of Bene Users	Mean No. of Rx	Mean No. of Rx	Mean No. of Rx	No. of Users	No. of Bene Users	Mean No. of Rx	Mean No. of Rx	Mean No. of Rx	No. of Users	No. of Bene Users	Mean No. of Rx	Mean No. of Rx	Mean No. of Rx	
All	1,690	36.2 %	17,630	0.8	\$63	1,992	42.7 %	20,516	0.7	\$34	1,032	22.1 %	11,186	1.1	\$50																
Female	1,332	35.8	14,134	0.8	62	1,626	43.7	16,951	0.7	33	747	20.1	8,222	1.1	49																
Disabled	33	30.3	393	0.9	76	50	45.9	568	1.6	76	85	78.0	969	1.3	80																
64 or younger	30	29.4	358	0.9	78	46	45.1	521	1.5	68	81	79.4	922	1.3	82																
65-74	2	66.7	23	0.6	37	3	100.0	35	3.7	211	3	100.0	35	1.3	27																
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0																
85 and older	1	25.0	12	1.0	107	1	25.0	12	1.0	51	1	25.0	12	0.9	41																
Other Eligibles	1,299	36.0	13,741	0.8	62	1,576	43.7	16,383	0.7	31	662	18.3	7,253	1.0	45																
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0																
65-74	121	38.2	1,235	0.8	72	157	49.5	1,609	0.8	37	153	48.3	1,642	1.2	65																
75-84	428	38.1	4,550	0.7	63	467	41.6	4,856	0.7	31	252	22.5	2,811	1.1	44																
85 and older	750	34.6	7,956	0.8	60	952	43.9	9,918	0.6	31	257	11.8	2,800	0.9	34																
Male	358	37.8	3,496	0.8	68	366	38.7	3,565	0.7	40	285	30.1	2,964	1.1	53																
Disabled	38	38.0	402	0.8	65	38	38.0	408	1.2	146	53	53.0	602	1.2	86																
64 or younger	37	38.1	390	0.8	65	37	38.1	396	1.2	150	52	53.6	590	1.2	87																
65-74	1	50.0	12	0.8	81	1	50.0	12	0.4	2	1	50.0	12	1.0	21																
75-84	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	0.0	0	0.0	0	0	0.0	0	0.0	0																
Other Eligibles	320	37.8	3,094	0.8	68	328	38.8	3,157	0.6	26	232	27.4	2,362	1.0	45																
64 or younger	1	100.0	3	0.3	19	2	200.0	6	0.8	11	2	200.0	6	0.3	7																
65-74	68	41.5	702	0.7	64	61	37.2	632	0.6	22	70	42.7	780	1.1	58																
75-84	127	37.2	1,165	0.8	74	127	37.2	1,150	0.7	35	92	27.0	905	1.1	41																
85 and older	124	36.5	1,224	0.8	64	138	40.6	1,369	0.6	22	68	20.0	671	0.9	34																
Unknown	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 2001 file for New Hampshire, released by CMS in 03/2005. This table was produced on 09/19/2006.

a. Table D.10B includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2001. A total of 2,219 beneficiaries who were in nursing facilities for part of their enrollment and their 19,058 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 2001. 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 2001 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 D.10C
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY
 AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BOE, AND AGE^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, NEW HAMPSHIRE, 2001

Beneficiary Characteristics	ANALGESICS - ANTI-INFLAMMATORY						ANTI-ASTHMATIC						MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL					
	Users as %			Users as %			Users as %			Users as %			Users as %			Users as %		
	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	No. of Users	No. of Bene Mos among Users	Mean No. of Rx
All	1,373	29.4 %	0.6	14,961	0.6	\$33	1,925	41.3 %	0.6	20,483	\$23	512	11.0 %	0.8	5,134	\$91		
Female	1,152	31.0	0.6	12,574	0.6	33	1,498	40.3	0.6	16,085	22	419	11.3	0.8	4,296	89		
Disabled	41	37.6	0.7	491	0.7	29	66	60.6	0.8	750	30	10	9.2	0.8	112	82		
64 or younger	39	38.2	0.7	467	0.7	30	61	59.8	0.7	691	26	10	9.8	0.8	112	82		
65-74	1	33.3	0.3	12	0.3	24	5	166.7	1.6	59	74	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		
85 and older	1	25.0	1.0	12	1.0	6	0	0.0	0.0	0	0	0	0.0	0.0	0	0		
Other Eligibles	1,111	30.8	0.6	12,083	0.6	33	1,432	39.7	0.6	15,335	22	409	11.3	0.8	4,184	89		
64 or younger	0	0.0	0.0	0	0.0	0	0	0.0	0.0	0	0	0	0.0	0.0	0	0		
65-74	99	31.2	0.6	1,032	0.6	37	152	47.9	0.8	1,568	29	31	9.8	0.8	303	82		
75-84	363	32.4	0.6	3,945	0.6	35	493	43.9	0.7	5,154	25	149	13.3	0.9	1,512	92		
85 and older	649	29.9	0.6	7,106	0.6	31	787	36.3	0.5	8,613	19	229	10.6	0.8	2,369	88		
Male	221	23.4	0.6	2,387	0.6	37	427	45.1	0.7	4,398	26	93	9.8	0.8	838	102		
Disabled	26	26.0	0.6	294	0.6	77	23	23.0	0.9	217	25	10	10.0	0.8	119	154		
64 or younger	24	24.7	0.6	270	0.6	80	23	23.7	0.9	217	25	10	10.3	0.8	119	154		
65-74	2	100.0	0.6	24	0.6	37	0	0.0	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		
85 and older	0	0.0	0.0	0	0.0	0	0	0.0	0.0	0	0	0	0.0	0.0	0	0		
Other Eligibles	195	23.0	0.6	2,093	0.6	31	404	47.8	0.7	4,181	26	83	9.8	0.8	719	93		
64 or younger	0	0.0	0.0	0	0.0	0	0	0.0	0.0	0	0	0	0.0	0.0	0	0		
65-74	25	15.2	0.6	272	0.6	23	86	52.4	0.7	912	27	8	4.9	0.7	69	62		
75-84	83	24.3	0.6	887	0.6	31	163	47.8	0.7	1,651	26	38	11.1	0.9	336	96		
85 and older	87	25.6	0.6	934	0.6	33	155	45.6	0.7	1,618	25	37	10.9	0.8	314	97		
Unknown	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 2001 file for New Hampshire, released by CMS in 03/2005. This table was produced on 09/19/2006.

a. Table D.10C includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2001. A total of 2,219 beneficiaries who were in nursing facilities for part of their enrollment and their 19,058 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 2001. 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 2001 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 D.10D
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR NINTH AND TENTH TOP DRUG GROUPS
 SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BOE, AND AGE^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, NEW HAMPSHIRE, 2001

Beneficiary Characteristics	ANTIDIABETIC				ANTIHYPERTENSIVE				Mean Rx \$	Mean No. of Rx	No. of Bene Mos among Users	Users as % of All-Year NF Residents	Mean Rx \$	Mean No. of Rx	All-Year NF Residents	Bene Mos among All-Year NF Residents
	Users as % of All-Year NF Residents		No. of Bene Mos among Users		Users as % of All-Year NF Residents		No. of Bene Mos among Users									
	No. of Users	26.7 %	13,088	1.0	Mean Rx \$	Mean No. of Rx	No. of Users	31.1 %								
All	1,245	26.7 %	13,088	1.0	\$35	1.450	31.1 %	15,071	0.9	\$30	4,664	47,788				
Female	946	25.4	10,006	0.9	34	1,103	29.7	11,587	0.9	29	3,718	38,695				
Disabled	45	41.3	525	1.1	44	31	28.4	370	0.9	29	109	1,231				
64 or younger	40	39.2	466	1.1	44	26	25.5	310	0.9	28	102	1,148				
65-74	2	66.7	23	1.7	40	1	33.3	12	1.0	67	3	35				
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0				
85 and older	3	75.0	36	0.8	55	4	100.0	48	0.8	29	4	48				
Other Eligibles	901	25.0	9,481	0.9	33	1,072	29.7	11,217	0.9	29	3,609	37,464				
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0				
65-74	123	38.8	1,245	1.1	41	95	30.0	932	0.8	29	317	3,252				
75-84	377	33.6	4,001	1.0	34	353	31.5	3,687	0.9	28	1,122	11,526				
85 and older	401	18.5	4,235	0.9	29	624	28.8	6,598	0.9	30	2,170	22,686				
Male	299	31.6	3,082	1.0	39	347	36.7	3,484	0.9	31	946	9,093				
Disabled	37	37.0	435	1.1	49	24	24.0	268	0.9	36	100	1,102				
64 or younger	37	38.1	435	1.1	49	22	22.7	244	0.9	37	97	1,066				
65-74	0	0.0	0	0.0	0	2	100.0	24	1.0	29	2	24				
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	0	0.0	0	0.0	0	1	12				
Other Eligibles	262	31.0	2,647	1.0	37	323	38.2	3,216	0.9	31	846	7,991				
64 or younger	1	100.0	3	0.3	8	1	100.0	3	0.3	5	1	3				
65-74	69	42.1	778	1.0	38	67	40.9	718	0.9	31	164	1,650				
75-84	113	33.1	1,088	0.9	40	135	39.6	1,308	0.9	32	341	3,173				
85 and older	79	23.2	778	1.0	31	120	35.3	1,187	0.9	30	340	3,165				
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 2001 file for New Hampshire, released by CMS in 03/2005. This table was produced on 09/19/2006.

a. Table D.10D includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2001. A total of 2,219 beneficiaries who were in nursing facilities for part of their enrollment and their 19,058 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 2001. 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 2001 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 D.11
 USE OF AND REIMBURSEMENT FOR PART D EXCLUDED DRUGS AMONG DUALS
 BY BENEFICIARY CHARACTERISTIC^{a,b}
 NEW HAMPSHIRE, 2001

Beneficiary Characteristics	No. of Benes with at Least One Part D Excl Rx	% Benes with at Least One Part D Excl Rx	No. of Part D		Total No. Part D Excl Rx	Total Part D Excl Rx \$	\$ per Part D Excl Rx	Part D Excl Rx as % of All Rx \$	Total No. of Benes
			Excl Rx	Bene					
All	13,835	70.4 %	14.1	277,514	\$146	\$2,864,955	\$10	5.4 %	19,648
Age									
5 and younger	1	100.0	9.0	9	255	255	28	4.2	1
6-14	3	75.0	8.5	34	449	449	13	1.7	4
15-20	15	41.7	4.1	148	3,520	3,520	24	5.6	36
21-44	2,163	55.4	6.5	25,266	438,300	438,300	17	3.6	3,907
45-64	2,810	67.1	10.3	42,942	623,593	623,593	15	4.0	4,187
65-74	1,989	62.0	11.3	36,328	394,117	394,117	11	4.9	3,210
75-84	3,044	76.3	17.6	70,420	612,693	612,693	9	6.7	3,991
85 and older	3,810	88.4	23.7	102,367	792,028	792,028	8	9.6	4,312
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Basis of Eligibility^c									
Aged	8,786	76.9	18.2	207,988	1,786,841	1,786,841	9	7.1	11,421
Disabled	4,631	62.4	8.9	65,977	999,108	999,108	15	3.8	7,422
Adults	410	51.9	4.4	3,454	76,299	76,299	22	4.5	790
Children	8	53.3	6.3	95	2,707	2,707	28	4.4	15
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Gender									
Female	9,997	74.9	15.9	212,168	2,125,839	2,125,839	10	5.9	13,353
Male	3,838	61.0	10.4	65,346	739,116	739,116	11	4.2	6,295
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Race									
White	13,663	70.7	14.3	275,475	2,841,532	2,841,532	10	5.4	19,316
African American	70	61.4	7.8	889	10,695	10,695	12	3.1	114
Other/unknown	102	46.8	5.3	1,150	12,728	12,728	11	3.4	218
Use of Nursing Facilities^d									
Entire year	4,499	96.5	31.2	145,488	1,164,923	1,164,923	8	9.3	4,664
Part year	2,040	91.9	19.3	42,720	361,086	361,086	8	7.4	2,219
None	7,296	57.2	7.0	89,306	1,338,946	1,338,946	15	3.7	12,765
Maintenance Assistance Status									
Cash	2,161	62.2	8.3	28,773	390,296	390,296	14	4.0	3,473
Medically needy	5,501	71.2	14.4	111,085	1,124,447	1,124,447	10	5.3	7,729
Poverty related	317	46.8	5.3	3,599	45,277	45,277	13	5.7	678
Other/unknown	5,856	75.4	17.3	134,057	1,304,935	1,304,935	10	6.0	7,768

Source: Data for this table are from the MAX 2001 file for New Hampshire, released by CMS in 03/2005. This table was produced on 09/19/2006.

- a. Table D.11 includes the beneficiaries represented by Cell G of Table 1. Beneficiaries include all dual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2001.
- b. Excluded drugs include benzodiazepines; barbiturates; nonprescription (OTC) medications; prescription vitamins and minerals (not including prenatal vitamins and fluoride preparations); and drugs used for anorexia, weight loss, or weight gain. Other excluded drugs include those that promote fertility; those used for cosmetic purposes or hair growth, for symptomatic relief of coughs and colds; or drugs for which the manufacturer requires that associated tests or monitoring services be purchased exclusively from the manufacturer.
- c. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.
- d. Please refer to footnote f on Table 1 for methodology used to determine use of nursing facilities.
- Bene(s) = beneficiary (or beneficiaries); CMS = Center for Medicare and Medicaid Services; Excl = excluded; MAX = Medicaid Analytic Extract; OTC = over-the-counter; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.12
 USE OF AND REIMBURSEMENT FOR PART D EXCLUDED DRUGS AMONG DUALS PER BENEFIT MONTH
 BY BENEFICIARY CHARACTERISTIC^{a,b}
 NEW HAMPSHIRE, 2001

Beneficiary Characteristics	No. Rx per Bene Mo.	Rx \$ per Bene Mo.	\$ per Rx	Barbiturate \$ per Bene Mo.	Benzodiazapine \$ per Bene Mo.	No. of Bene Mos
	1.4	\$15	\$10	\$0	\$4	196,599
All						
Age						
5 and younger	0.8	21	28	0	0	12
6-14	0.7	9	13	0	0	48
15-20	0.4	10	24	0	3	366
21-44	0.6	11	17	0	6	40,846
45-64	1.0	14	15	0	6	43,791
65-74	1.1	12	11	0	4	31,717
75-84	1.8	16	9	0	3	38,505
85 and older	2.5	19	8	0	3	41,314
Unknown	0.0	0	0	0	0	0
Basis of Eligibility^c						
Aged	1.9	16	9	0	3	110,660
Disabled	0.8	13	15	0	6	78,798
Adults	0.5	11	22	0	7	6,994
Children	0.6	18	28	0	3	147
Unknown	0.0	0	0	0	0	0
Gender						
Female	1.6	16	10	0	5	134,979
Male	1.1	12	11	0	4	61,620
Unknown	0.0	0	0	0	0	0
Race						
White	1.4	15	10	0	5	193,343
African American	0.8	9	12	0	3	1,151
Other/unknown	0.5	6	11	0	1	2,105
Use of Nursing Facilities^d						
Entire year	3.0	24	8	0	4	47,788
Part year	2.2	19	8	0	4	19,058
None	0.7	10	15	0	5	129,753
Maintenance Assistance Status						
Cash	0.7	10	14	0	4	38,832
Medically needy	1.6	16	10	0	5	71,380
Poverty related	0.6	8	13	0	3	5,700
Other/unknown	1.7	16	10	0	4	80,687

Source: Data for this table are from the MAX 2001 file for New Hampshire, released by CMS in 03/2005. This table was produced on 09/19/2006.

- a. Table D.12 includes the beneficiaries represented by Cell G of Table 1. Beneficiaries include all dual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2001.
- b. Excluded drugs include benzodiazepines; barbiturates; nonprescription (OTC) medications; prescription vitamins and minerals (not including prenatal vitamins and fluoride preparations); and drugs used for anorexia, weight loss, or weight gain. Other excluded drugs include those that promote fertility; those used for cosmetic purposes or hair growth, for symptomatic relief of coughs and colds; or drugs for which the manufacturer requires that associated tests or monitoring services be purchased exclusively from the manufacturer.
- c. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.
- d. Please refer to footnote f on Table 1 for methodology used to determine use of nursing facilities.

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

TABLE D.13
 USE OF AND REIMBURSEMENT FOR PART D EXCLUDED DRUGS FOR SELECTED DRUG CATEGORIES AMONG DUALS^{a,b,c}
 NEW HAMPSHIRE, 2001

Drug Category	No. Users	Rx \$ per User	Total Rx \$	Rx \$ as % of All Part D Excl Rx \$	Total No. Rx.	\$ per Rx	No. Rx as % of All Part D Excl Rx
All	22,305	\$128	\$2,864,955	100.0 %	277,514	\$10	100.0 %
Anorexia or weight loss/gain	4	52	208	0.0	6	35	0.0
Fertility drugs	1	40	40	0.0	1	40	0.0
Drugs for cosmetic purposes	4	14	56	0.0	7	8	0.0
Cough and cold medications	2,061	95	196,644	6.9	6,624	30	2.4
Vitamins and minerals	3,067	110	335,999	11.7	20,166	17	7.3
Non-prescription drugs	11,044	126	1,390,450	48.5	204,591	7	73.7
Barbiturates	230	76	17,561	0.6	2,562	7	0.9
Benzodiazepines	5,393	164	884,064	30.9	41,405	21	14.9
Other Part D Excl Rx Drugs	501	80	39,933	1.4	2,152	19	0.8

Source: Data for this table are from the MAX 2001 file for New Hampshire, released by CMS in 03/2005. This table was produced on 09/19/2006.

a. Table D.13 includes the beneficiaries represented by Cell G of Table 1. Beneficiaries include all dual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2001. A user is a beneficiary who had at least one prescription filled for a Part D excluded drug in 2001. A beneficiary who used drugs from two or more Part D excluded categories was counted as a user for each category. Therefore, the sum of users across drug categories may exceed the total number of individual users as noted on Table D11.

b. Includes OTC drugs as well as prescription drugs.

c. Excluded drugs include benzodiazepines; barbiturates; nonprescription (OTC) medications; prescription vitamins and minerals (not including prenatal vitamins and fluoride preparations); and drugs used for anorexia, weight loss, or weight gain. Other excluded drugs include those that promote fertility; those used for cosmetic purposes or hair growth, for symptomatic relief of coughs and colds; or drugs for which the manufacturer requires that associated tests or monitoring services be purchased exclusively from the manufacturer.

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

SUPPLEMENTAL TABLE 1
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES^{a, b}
 NEW HAMPSHIRE, 2001

Total Number of Dual Eligible Beneficiaries 19,648
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries \$53,424,575
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary \$2,719

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	1,795	9.1 %	\$0	0.0 %
1-500	3,331	17.0	717,944	1.3
501-1,000	2,131	10.8	1,578,489	3.0
1,001-1,500	1,786	9.1	2,220,004	4.2
1,501-2,000	1,570	8.0	2,739,058	5.1
2,001-2,500	1,361	6.9	3,059,382	5.7
2,501-3,000	1,191	6.1	3,267,850	6.1
3,001-3,500	999	5.1	3,241,594	6.1
3,501-4,000	865	4.4	3,244,144	6.1
4,001-4,500	728	3.7	3,084,585	5.8
4,501-5,000	570	2.9	2,701,639	5.1
5,001-5,500	517	2.6	2,708,917	5.1
5,501-6,000	455	2.3	2,615,112	4.9
6,001-6,500	381	1.9	2,384,068	4.5
6,501-7,000	298	1.5	2,007,499	3.8
7,001-7,500	249	1.3	1,804,783	3.4
7,501-8,000	194	1.0	1,502,570	2.8
8,001-8,500	149	0.8	1,227,742	2.3
8,501-9,000	171	0.9	1,495,862	2.8
9,001-9,500	118	0.6	1,092,933	2.0
9,501-10,000	91	0.5	886,483	1.7
10,001+	698	3.6	9,843,917	18.4

Source: Data for this table are from the MAX 2001 file for New Hampshire, released by CMS in 03/2005. This table was produced on 09/19/2006.

a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2001.

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

SUPPLEMENTAL TABLE 1A
 MEDICAID PHARMACY REIMBURSEMENT FOR DISABLED DUAL ELIGIBLE BENEFICIARIES UNDER AGE 65^{a, b, c}
 NEW HAMPSHIRE, 2001

Total Number of Disabled Dual Eligible Beneficiaries, Age < 65
 Total Pharmacy Reimbursement for Disabled Dual Eligible Beneficiaries, Age < 65
 Mean Pharmacy Reimbursement per Disabled Dual Eligible Beneficiary, Age < 65

7,337
 \$26,248,396
 \$3,578

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Disabled Dual Beneficiaries, Age < 65		Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
		9.8 %	0.0 %		
\$0	718			0	0.0 %
1-500	1,129	15.4		233,959	0.9
501-1,000	661	9.0		486,708	1.9
1,001-1,500	506	6.9		631,069	2.4
1,501-2,000	467	6.4		814,695	3.1
2,001-2,500	374	5.1		842,255	3.2
2,501-3,000	356	4.9		976,912	3.7
3,001-3,500	332	4.5		1,080,326	4.1
3,501-4,000	322	4.4		1,211,533	4.6
4,001-4,500	263	3.6		1,115,588	4.3
4,501-5,000	249	3.4		1,181,775	4.5
5,001-5,500	208	2.8		1,090,185	4.2
5,501-6,000	205	2.8		1,176,736	4.5
6,001-6,500	208	2.8		1,301,814	5.0
6,501-7,000	165	2.2		1,112,901	4.2
7,001-7,500	148	2.0		1,072,019	4.1
7,501-8,000	125	1.7		966,851	3.7
8,001-8,500	106	1.4		873,394	3.3
8,501-9,000	110	1.5		961,900	3.7
9,001-9,500	68	0.9		630,060	2.4
9,501-10,000	66	0.9		643,899	2.5
10,001+	551	7.5		7,843,817	29.9

Source: Data for this table are from the MAX 2001 file for New Hampshire, released by CMS in 03/2005. This table was produced on 09/19/2006.

a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2001.

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

c. This table is limited to dual eligible beneficiaries who were under age 65 and also indicated as disabled in the MAX files. Therefore, dual eligible beneficiaries under age 65 in "adults" or "children" basis-of-eligibility categories in Table D.2 are excluded because they were not classified as disabled in the MAX files. Disabled dual eligible beneficiaries age 65 and older are included in Supplemental Tables 1B through 1E, depending on their age.

SUPPLEMENTAL TABLE 1B
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 AND OLDER^{a, b}
 NEW HAMPSHIRE, 2001

Total Number of Dual Eligible Beneficiaries, Age 65+ 11,513
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65+ \$25,432,769
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65+ \$2,209

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 65+	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	956	8.3%	0	0.0%
1-500	2,002	17.4	447,692	1.8
501-1,000	1,371	11.9	1,016,541	4.0
1,001-1,500	1,211	10.5	1,504,398	5.9
1,501-2,000	1,057	9.2	1,844,488	7.3
2,001-2,500	952	8.3	2,139,024	8.4
2,501-3,000	794	6.9	2,176,403	8.6
3,001-3,500	644	5.6	2,087,558	8.2
3,501-4,000	519	4.5	1,943,547	7.6
4,001-4,500	448	3.9	1,896,815	7.5
4,501-5,000	307	2.7	1,453,801	5.7
5,001-5,500	293	2.5	1,534,683	6.0
5,501-6,000	235	2.0	1,352,053	5.3
6,001-6,500	164	1.4	1,026,065	4.0
6,501-7,000	127	1.1	854,393	3.4
7,001-7,500	91	0.8	660,013	2.6
7,501-8,000	62	0.5	481,291	1.9
8,001-8,500	41	0.4	337,814	1.3
8,501-9,000	55	0.5	481,458	1.9
9,001-9,500	47	0.4	434,848	1.7
9,501-10,000	22	0.2	213,086	0.8
10,001+	115	1.0	1,546,798	6.1

Source: Data for this table are from the MAX 2001 file for New Hampshire, released by CMS in 03/2005. This table was produced on 09/19/2006.

a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2001.

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

SUPPLEMENTAL TABLE 1C
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 TO 74^{a, b}
 NEW HAMPSHIRE, 2001

Total Number of Dual Eligible Beneficiaries, Age 65-74 3,210
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65-74 \$7,972,316
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65-74 \$2,484

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 65-74	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	431	13.4 %	0	0.0 %
1-500	516	16.1	112,071	1.4
501-1,000	315	9.8	236,534	3.0
1,001-1,500	271	8.4	337,633	4.2
1,501-2,000	236	7.4	411,407	5.2
2,001-2,500	245	7.6	552,469	6.9
2,501-3,000	189	5.9	517,645	6.5
3,001-3,500	156	4.9	504,614	6.3
3,501-4,000	131	4.1	489,193	6.1
4,001-4,500	128	4.0	542,727	6.8
4,501-5,000	96	3.0	454,209	5.7
5,001-5,500	96	3.0	502,424	6.3
5,501-6,000	77	2.4	442,979	5.6
6,001-6,500	57	1.8	356,385	4.5
6,501-7,000	51	1.6	343,132	4.3
7,001-7,500	33	1.0	239,620	3.0
7,501-8,000	25	0.8	192,861	2.4
8,001-8,500	21	0.7	173,500	2.2
8,501-9,000	25	0.8	218,763	2.7
9,001-9,500	23	0.7	213,014	2.7
9,501-10,000	13	0.4	125,774	1.6
10,001+	75	2.3	1,005,362	12.6

Source: Data for this table are from the MAX 2001 file for New Hampshire, released by CMS in 03/2005. This table was produced on 09/19/2006.

a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2001.
 b. Medicaid reimbursement amounts in this table do not reflect federally required rebates from drug manufacturers to states.

SUPPLEMENTAL TABLE 1D
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 75 TO 84^{a, b}
 NEW HAMPSHIRE, 2001

Total Number of Dual Eligible Beneficiaries, Age 75-84 3,991
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 75-84 \$9,193,311
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 75-84 \$2,304

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 75-84	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	318	8.0 %	0	0.0 %
1-500	635	15.9	144,712	1.6
501-1,000	436	10.9	323,832	3.5
1,001-1,500	424	10.6	526,954	5.7
1,501-2,000	370	9.3	645,916	7.0
2,001-2,500	330	8.3	740,702	8.1
2,501-3,000	276	6.9	758,685	8.3
3,001-3,500	225	5.6	730,441	7.9
3,501-4,000	206	5.2	773,132	8.4
4,001-4,500	179	4.5	756,730	8.2
4,501-5,000	123	3.1	584,121	6.4
5,001-5,500	107	2.7	561,236	6.1
5,501-6,000	95	2.4	545,327	5.9
6,001-6,500	71	1.8	444,984	4.8
6,501-7,000	49	1.2	329,954	3.6
7,001-7,500	38	1.0	275,661	3.0
7,501-8,000	23	0.6	179,423	2.0
8,001-8,500	14	0.4	115,127	1.3
8,501-9,000	20	0.5	174,749	1.9
9,001-9,500	19	0.5	175,948	1.9
9,501-10,000	5	0.1	48,641	0.5
10,001+	28	0.7	357,036	3.9

Source: Data for this table are from the MAX 2001 file for New Hampshire, released by CMS in 03/2005. This table was produced on 09/19/2006.

a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2001.

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

SUPPLEMENTAL TABLE 1E
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 85 AND OLDER^{a, b}
 NEW HAMPSHIRE, 2001

Total Number of Dual Eligible Beneficiaries, Age 85+ 4,312
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 85+ \$8,267,142
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 85+ \$1,917

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 85+ 4.8 %	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	207	19.7	0	0.0 %
1-500	851	14.4	190,909	2.3
501-1,000	620	12.0	456,175	5.5
1,001-1,500	516	8.7	639,811	7.7
1,501-2,000	451	7.6	787,165	9.5
2,001-2,500	377	6.1	845,853	10.2
2,501-3,000	329	4.2	900,073	10.9
3,001-3,500	263	3.3	852,503	10.3
3,501-4,000	182	2.0	681,222	8.2
4,001-4,500	141	2.1	597,358	7.2
4,501-5,000	88	1.5	415,471	5.0
5,001-5,500	90	0.8	471,023	5.7
5,501-6,000	63	0.6	363,747	4.4
6,001-6,500	36	0.5	224,696	2.7
6,501-7,000	27	0.3	181,307	2.2
7,001-7,500	20	0.1	144,732	1.8
7,501-8,000	14	0.1	109,007	1.3
8,001-8,500	6	0.2	49,187	0.6
8,501-9,000	10	0.1	87,946	1.1
9,001-9,500	5	0.1	45,886	0.6
9,501-10,000	4	0.1	38,671	0.5
10,001+	12	0.3	184,400	2.2

Source: Data for this table are from the MAX 2001 file for New Hampshire, released by CMS in 03/2005. This table was produced on 09/19/2006.

a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2001.

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

APPENDIX TABLE A.3

CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY^{a, b}
 DUAL ELIGIBLE BENEFICIARIES, NEW HAMPSHIRE, 2001

Beneficiary Characteristics	No. of Benes					No. of Bene Mos					
	All	Aged	Disabled	Adults	Children	All	Aged	Disabled	Adults	Children	Unknown
All	19,650	11,421	7,422	792	15	196,677	110,660	78,798	7,072	147	0
Age											
5 and younger	1	0	0	0	1	12	0	0	0	12	0
6-14	4	0	0	0	4	48	0	0	0	48	0
15-20	36	0	26	0	10	366	0	279	0	87	0
21-44	3,909	0	3,290	619	0	40,913	0	35,285	5,628	0	0
45-64	4,187	4	4,021	162	0	43,802	48	42,384	1,370	0	0
65-74	3,210	3,131	68	11	0	31,717	30,986	657	74	0	0
75-84	3,991	3,984	7	0	0	38,505	38,429	76	0	0	0
85 and older	4,312	4,302	10	0	0	41,314	41,197	117	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0
Gender											
Female	13,354	8,918	3,887	540	9	135,028	88,343	41,553	5,045	87	0
Male	6,296	2,503	3,535	252	6	61,649	22,317	37,245	2,027	60	0
Unknown	0	0	0	0	0	0	0	0	0	0	0
Race											
White	19,318	11,258	7,274	771	15	193,421	109,087	77,306	6,881	147	0
African American	114	30	74	10	0	1,151	292	772	87	0	0
Other/unknown	218	133	74	11	0	2,105	1,281	720	104	0	0
Use of Nursing Facilities^c											
Entire year	4,664	4,454	209	1	0	47,788	45,452	2,333	3	0	0
Part year	2,219	2,070	149	0	0	19,058	17,559	1,499	0	0	0
None	12,767	4,897	7,064	791	15	129,831	47,649	74,966	7,069	147	0
Maintenance Assistance Status											
Cash	3,473	1,222	2,194	57	0	38,843	13,810	24,627	406	0	0
Medically needy	7,729	4,715	2,516	495	3	71,391	42,077	24,781	4,500	33	0
Poverty related	678	348	293	35	2	5,700	2,877	2,554	245	24	0
Other/unknown	7,770	5,136	2,419	205	10	80,743	51,896	26,836	1,921	90	0
Dual Status^d											
Full dual, all year	18,456	10,888	6,803	750	15	185,439	105,790	72,869	6,633	147	0
Full dual, part year	1,194	533	619	42	0	11,238	4,870	5,929	439	0	0
Managed Care Status											
FFS all year	19,635	11,421	7,422	777	15	196,520	110,660	78,798	6,915	147	0
FFS part year, with Rx claims	13	0	0	13	0	133	0	0	133	0	0
FFS part year, no Rx claims	0	0	0	0	0	0	0	0	0	0	0
MC all year, with Rx claims	2	0	0	2	0	24	0	0	24	0	0
MC all year, no Rx claims	0	0	0	0	0	0	0	0	0	0	0

Source: Data for this table are from the MAX 2001 file for New Hampshire, released by CMS in 03/2005. This table was produced on 09/19/2006.

a. Table A.3 includes the beneficiaries represented by Cell F of Table 1. Benefit months are months during which beneficiaries had pharmacy benefit coverage.

b. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services. The total includes some beneficiaries with unknown basis of eligibility and some whose age categories are not consistent with basis of eligibility.

c. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.

d. The "Full dual, all year" group contains beneficiaries who had Medicare as well as Medicaid pharmacy benefits during all months of Medicaid enrollment in 2001. The "Full dual, part year" group contains beneficiaries who had such benefits for some, but not all, months of their enrollment. Refer to footnote g of Table 1 for more information about how we determined dual eligibility status.

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

APPENDIX TABLE A.4
 MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS^a
 DUAL ELIGIBLE BENEFICIARIES, NEW HAMPSHIRE, 2001

Beneficiary Characteristics	Bene(s) in Cell F of Table 1		Bene(s) in Cell G of Table 1		Excluded from Cell G of Table 1	
	No. of Bene(s)	No. of Bene Mos	No. of Bene(s)	No. of Bene Mos	No. of Bene(s)	No. of Bene Mos
All	19,650	196,677	19,648	196,599	0	78
FFS all year	19,635	196,520	19,635	196,520	0	0
FFS part year, with Rx claims	13	133	13	79	0	54
FFS part year, with no Rx claims	0	0	0	0	0	0
MC all year, with Rx claims	2	24	0	0	0	24
MC all year, with no Rx claims	0	0	0	0	0	0

Source: Data for this table are from the MAX 2001 file for New Hampshire, released by CMS in 03/2005. This table was produced on 09/19/2006.

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

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