

# STATISTICAL COMPENDIUM: MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2001 NEW MEXICO

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TABLE D.2  
 CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY<sup>a,b</sup>  
 DUAL ELIGIBLE BENEFICIARIES, NEW MEXICO, 2001

Beneficiary Characteristics	No. of Benes							No. of Bene Mos						
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown		
<b>All</b>	<b>32,057</b>	<b>15,317</b>	<b>16,475</b>	<b>257</b>	<b>8</b>	<b>0</b>	<b>339,404</b>	<b>159,466</b>	<b>178,304</b>	<b>1,572</b>	<b>62</b>	<b>0</b>		
<b>Age</b>														
5 and younger	2	0	2	0	0	0	13	0	13	0	0	0		
6-14	12	0	8	0	4	0	106	0	72	0	34	0		
15-20	59	0	53	2	4	0	464	0	415	21	28	0		
21-44	4,867	1	4,674	192	0	0	50,678	12	49,385	1,281	0	0		
45-64	5,479	3	5,422	54	0	0	57,926	21	57,660	245	0	0		
65-74	8,813	4,527	4,277	9	0	0	95,790	48,083	47,682	25	0	0		
75-84	7,316	5,833	1,483	0	0	0	78,848	61,911	16,937	0	0	0		
85 and older	5,509	4,953	556	0	0	0	55,579	49,439	6,140	0	0	0		
Unknown	0	0	0	0	0	0	0	0	0	0	0	0		
<b>Gender</b>														
Female	20,397	10,809	9,405	178	5	0	217,862	113,759	102,818	1,249	36	0		
Male	11,659	4,508	7,069	79	3	0	121,530	45,707	75,474	323	26	0		
Unknown	1	0	1	0	0	0	12	0	12	0	0	0		
<b>Race</b>														
White	14,321	6,895	7,348	76	2	0	149,305	69,766	79,028	497	14	0		
African American	655	221	423	11	0	0	6,783	2,336	4,392	55	0	0		
Other/unknown	17,081	8,201	8,704	170	6	0	183,316	87,364	94,884	1,020	48	0		
<b>Use of Nursing Facilities<sup>c</sup></b>														
Entire year	4,212	3,719	493	0	0	0	42,069	36,742	5,327	0	0	0		
Part year	1,935	1,617	317	1	0	0	17,818	14,591	3,225	2	0	0		
None	25,910	9,981	15,665	256	8	0	279,517	108,133	169,752	1,570	62	0		
<b>Maintenance Assistance Status</b>														
Cash	23,859	9,025	14,739	95	0	0	260,489	99,815	160,346	328	0	0		
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0		
Poverty-related	496	155	317	17	7	0	4,419	1,508	2,733	126	52	0		
Other/unknown	7,702	6,137	1,419	145	1	0	74,496	58,143	15,225	1,118	10	0		
<b>Dual Medicare Status<sup>d</sup></b>														
Full dual, all year	31,352	14,875	16,225	244	8	0	332,106	154,777	175,822	1,445	62	0		
Full dual, part year	705	442	250	13	0	0	7,298	4,689	2,482	127	0	0		
<b>Managed Care Status</b>														
FFS all year	30,452	15,038	15,230	178	6	0	330,249	157,740	171,155	1,302	52	0		
FFS part year, with Rx claims	1,089	148	897	42	2	0	6,655	991	5,501	153	10	0		
FFS part year, no Rx claims	516	131	348	37	0	0	2,500	735	1,648	117	0	0		

Table D2

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2001 file for New Mexico, released by CMS in 06/2005. 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<sup>a,b</sup>  
 DUAL ELIGIBLE BENEFICIARIES, NEW MEXICO, 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	79.8 %	33.5	\$1,618	\$48	\$14,338	11.3 %	32,057
<b>Age</b>							
5 and younger	100.0	80.0	1,520	19	27,294	5.6	2
6-14	91.7	22.0	4,057	184	22,680	17.9	12
15-20	64.4	11.3	1,125	99	10,486	10.7	59
21-44	75.3	26.5	1,950	73	15,578	12.5	4,867
45-64	82.9	40.7	2,218	55	14,695	15.1	5,479
65-74	75.3	31.0	1,337	43	8,594	15.6	8,813
75-84	81.5	35.3	1,491	42	14,460	10.3	7,316
85 and older	85.6	34.2	1,344	39	21,930	6.1	5,509
Unknown	0.0	0.0	0	0	0	0.0	0
<b>Basis of Eligibility<sup>c</sup></b>							
Aged	78.6	31.2	1,297	42	15,278	8.5	15,317
Disabled	81.5	36.1	1,937	54	13,660	14.2	16,475
Adults	37.0	4.5	213	48	1,977	10.8	257
Children	75.0	14.5	2,369	163	5,039	47.0	8
Unknown	0.0	0.0	0	0	0	0.0	0
<b>Gender</b>							
Female	82.8	37.3	1,704	46	14,293	11.9	20,397
Male	74.5	26.7	1,467	55	14,416	10.2	11,659
Unknown	0.0	0.0	0	0	1,927	0.0	1
<b>Race</b>							
White	84.6	39.4	1,927	49	16,752	11.5	14,321
African American	81.2	36.4	1,705	47	12,575	13.6	655
Other/unknown	75.6	28.4	1,355	48	12,381	10.9	17,081
<b>Use of Nursing Facilities<sup>d</sup></b>							
Entire year	93.2	50.4	2,232	44	37,215	6.0	4,212
Part year	90.5	38.0	1,681	44	23,908	7.0	1,935
None	76.8	30.4	1,513	50	9,904	15.3	25,910
<b>Maintenance Assistance Status</b>							
Cash	78.2	30.9	1,510	49	8,724	17.3	23,859
Medically needy	0.0	0.0	0	0	0	0.0	0
Poverty related	67.5	16.2	895	55	6,260	14.3	496
Other/unknown	85.3	42.7	1,997	47	32,249	6.2	7,702

Source: Data for this table are from the MAX 2001 file for New Mexico, released by CMS in 06/2005. 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<sup>a,b</sup>  
 DUAL ELIGIBLE BENEFICIARIES, NEW MEXICO, 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	3.2	\$153	11.3 %	20.2 %	22.1 %	11.4 %	25.8 %	16.8 %	3.8 %	\$1,354	32,057	339,404
<b>Age</b>												
5 and younger	12.3	234	5.6	0.0	0.0	0.0	0.0	50.0	50.0	4,199	2	13
6-14	2.5	459	17.9	8.3	25.0	16.7	33.3	16.7	0.0	2,568	12	106
15-20	1.4	143	10.7	35.6	30.5	8.5	20.3	5.1	0.0	1,333	59	464
21-44	2.5	187	12.5	24.7	27.8	12.0	21.1	11.6	2.7	1,496	4,867	50,678
45-64	3.9	210	15.1	17.1	19.9	10.6	25.9	20.6	5.9	1,390	5,479	57,926
65-74	2.9	123	15.6	24.7	22.9	11.1	23.1	14.5	3.7	791	8,813	95,790
75-84	3.3	138	10.3	18.5	20.7	10.7	27.7	18.6	3.8	1,342	7,316	78,848
85 and older	3.4	133	6.1	14.4	19.4	13.0	31.6	18.8	2.8	2,174	5,509	55,579
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<b>Basis of Eligibility<sup>c</sup></b>												
Aged	3.0	125	8.5	21.4	21.0	11.6	26.7	16.2	3.1	1,468	15,317	159,466
Disabled	3.3	179	14.2	18.5	23.1	11.2	25.2	17.5	4.5	1,262	16,475	178,304
Adults	0.7	35	10.8	63.0	18.7	5.8	7.8	3.9	0.8	323	257	1,572
Children	1.9	306	47.0	25.0	37.5	12.5	25.0	0.0	0.0	650	8	62
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<b>Gender</b>												
Female	3.5	160	11.9	17.2	20.3	11.4	27.7	18.9	4.5	1,338	20,397	217,862
Male	2.6	141	10.2	25.5	25.1	11.4	22.5	13.1	2.4	1,383	11,659	121,530
Unknown	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	161	1	12
<b>Race</b>												
White	3.8	185	11.5	15.4	18.7	11.5	28.8	20.4	5.2	1,607	14,321	149,305
African American	3.5	165	13.6	18.8	19.5	12.8	26.4	17.4	5.0	1,214	655	6,783
Other/unknown	2.6	126	10.9	24.4	25.0	11.2	23.2	13.7	2.5	1,154	17,081	183,316
<b>use of nursing Facilities<sup>d</sup></b>												
Entire year	5.0	224	6.0	6.8	10.5	10.0	34.0	30.9	7.8	3,726	4,212	42,069
Part year	4.1	183	7.0	9.5	16.3	12.9	34.1	22.8	4.4	2,596	1,935	17,818
None	2.8	140	15.3	23.2	24.4	11.5	23.9	14.0	3.1	918	25,910	279,517
<b>Maintenance Assistance Status</b>												
Cash	2.8	138	17.3	21.8	24.9	11.7	24.3	14.1	3.1	799	23,859	260,489
Medically needy	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Poverty related	1.8	101	14.3	32.5	30.6	11.3	16.7	8.3	0.6	703	496	4,419
Other/unknown	4.4	207	6.2	14.7	12.6	10.2	30.9	25.4	6.1	3,334	7,702	74,496

Table D4

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2001 file for New Mexico, released by CMS in 06/2005. 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<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, NEW MEXICO, 2001

Beneficiary Characteristics	All Rx			Patented Brand-Name Drugs			Off-Patent Brand-Name Drugs			Generic Drugs		
	No. of Rx	Rx \$	\$ per Rx	No. of Rx	Rx \$	\$ per Rx	No. of Rx	Rx \$	\$ per Rx	No. of Rx	Rx \$	\$ per Rx
<b>All</b>	<b>3.2</b>	<b>\$153</b>	<b>\$48</b>	<b>1.3</b>	<b>\$111</b>	<b>\$83</b>	<b>0.3</b>	<b>\$13</b>	<b>\$43</b>	<b>1.5</b>	<b>\$28</b>	<b>\$19</b>
<b>Age</b>												
5 and younger	12.3	234	19	1.2	131	107	3.2	42	13	7.8	60	8
6-14	2.5	459	184	1.2	412	349	0.2	28	133	1.1	20	18
15-20	1.4	143	99	0.8	115	148	0.1	16	141	0.5	12	22
21-44	2.5	187	73	1.1	140	132	0.2	18	76	1.2	29	23
45-64	3.9	210	55	1.7	156	93	0.3	18	55	1.9	37	20
65-74	2.9	123	43	1.3	90	70	0.2	9	38	1.3	24	18
75-84	3.3	138	42	1.4	99	71	0.3	12	35	1.5	27	18
85 and older	3.4	133	39	1.3	93	71	0.4	13	30	1.6	27	17
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Basis of Eligibility<sup>d</sup></b>												
Aged	3.0	125	42	1.3	89	70	0.3	11	33	1.4	24	17
Disabled	3.3	179	54	1.4	132	92	0.3	16	53	1.6	32	20
Adults	0.7	35	48	0.2	23	96	0.1	6	62	0.4	6	15
Children	1.9	306	163	1.0	291	278	0.0	0	18	0.8	14	17
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Gender</b>												
Female	3.5	160	46	1.5	117	77	0.3	14	39	1.6	29	18
Male	2.6	141	55	1.1	102	96	0.3	13	52	1.2	26	21
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Race</b>												
White	3.8	185	49	1.6	133	84	0.4	17	43	1.8	34	19
African American	3.5	165	47	1.4	116	85	0.3	14	44	1.8	35	19
Other/unknown	2.6	126	48	1.2	93	81	0.2	10	43	1.3	23	18
<b>Use of Nursing Facilities<sup>e</sup></b>												
Entire year	5.0	224	44	2.0	159	78	0.7	23	33	2.3	42	18
Part year	4.1	183	44	1.7	131	77	0.5	17	33	1.9	35	18
None	2.8	140	50	1.2	103	84	0.2	12	49	1.3	26	19
<b>Maintenance Assistance Status</b>												
Cash	2.8	138	49	1.2	102	83	0.2	12	47	1.4	25	19
Medically needy	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Poverty related	1.8	101	55	0.8	74	94	0.2	8	50	0.9	18	21
Other/unknown	4.4	207	47	1.8	147	82	0.6	20	36	2.0	39	19

Source: Data for this table are from the MAX 2001 file for New Mexico, released by CMS in 06/2005. 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 Mexico, 4.5 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all combined. For information about this classification method, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).
- 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<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, NEW MEXICO, 2001

Therapeutic Category	No. of Rx per Bene Mo among Users			\$ per Bene Mo among Users			\$ per 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	No. of Dual Benes	As % of Benes	No. of Bene Mos		
														Generic	Generic
Anti-infective Agents	0.3	0.1	0.0	0.2	\$18	\$16	\$0	\$2	\$58	\$105	\$53	\$13	15,311	47.8 %	170,175
Biologics	0.1	0.0	0.0	0.1	4	0	2	2	48	16	2,471	31	428	1.3	4,803
Antineoplastic Agents	0.5	0.2	0.1	0.2	80	55	11	14	156	274	131	62	875	2.7	9,300
Endocrine/Metabolic Drugs	1.0	0.5	0.2	0.3	35	28	3	4	34	52	15	12	12,532	39.1	137,651
Cardiovascular Agents	1.4	0.6	0.1	0.7	46	30	4	13	32	50	31	17	15,479	48.3	168,803
Respiratory Agents	0.6	0.4	0.0	0.3	28	23	0	5	43	59	30	20	11,092	34.6	123,349
Gastrointestinal Agents	0.7	0.3	0.0	0.3	52	40	4	8	77	126	85	26	10,939	34.1	120,235
Genitourinary Agents	0.4	0.3	0.0	0.2	19	16	0	3	47	65	44	18	3,721	11.6	41,690
CNS Drugs	1.1	0.5	0.1	0.5	75	55	8	12	69	115	108	22	13,351	41.6	144,375
Stimulants/Anti-obesity/Anorexia	0.6	0.2	0.1	0.3	36	20	4	12	59	106	42	37	154	0.5	1,730
Miscellaneous Psychological/Neurological Agents	0.6	0.5	0.0	0.1	65	63	0	2	115	125	104	29	942	2.9	9,972
Analgesics and Anesthetics	0.7	0.2	0.0	0.4	34	24	3	7	49	111	73	16	15,089	47.1	166,124
Neuromuscular Agents	0.8	0.3	0.1	0.4	48	30	6	12	57	100	47	29	6,856	21.4	75,546
Nutritional Products	0.6	0.0	0.2	0.4	10	0	5	4	16	15	23	12	5,208	16.2	55,860
Hematological Agents	0.7	0.1	0.2	0.3	36	27	4	4	54	185	19	15	3,833	12.0	41,353
Topical Products	0.4	0.2	0.0	0.2	12	8	1	3	33	51	35	16	10,854	33.9	122,166
Miscellaneous Products	0.6	0.3	0.2	0.2	158	107	41	9	244	363	247	51	366	1.1	3,959
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	6	0	0	0	25	0	0	0	421	1.3	4,811
<b>TOTAL NO. OF RX AND RX \$</b>	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	1,073,241	n.a.	n.a.
													51,855,600		

Source: Data for this table are from the MAX 2001 file for New Mexico, released by CMS in 06/2005. 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\\_mdmb.asp](http://www.Medi-Span.com/products/product_mdmb.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 Mexico, 4.5 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\\_mdmb.asp](http://www.Medi-Span.com/products/product_mdmb.asp) (May 13 2003).
- Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); 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<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, NEW MEXICO, 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
ULCER DRUGS	\$5,562,176	11,016	34.4 %	121,797	0.5	\$91	\$46
ANTIPSYCHOTICS	5,406,897	5,196	16.2	56,198	0.7	143	96
ANTIDEPRESSANTS	4,181,704	11,029	34.4	119,988	0.6	59	35
ANTIDIABETIC	3,090,595	9,200	28.7	101,940	0.7	47	30
ANTICONVULSANT	2,758,535	4,955	15.5	54,203	0.8	68	51
ANALGESICS - ANTI-INFLAMMATORY	2,704,668	10,875	33.9	122,875	0.4	60	22
ANTIHYPERTENSIVE	2,670,810	10,523	32.8	115,922	0.6	36	23
ANALGESICS - Narcotic	2,607,932	15,513	48.4	171,873	0.4	42	15
ANTHYPERLIPIDEMIC	2,032,267	4,006	12.5	45,152	0.6	74	45
ANTIASTMATIC	1,781,770	8,268	25.8	90,779	0.4	45	20
Total	32,797,354	90,581		1,000,727	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2001 file for New Mexico, released by CMS in 06/2005. 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](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<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, NEW MEXICO, 2001

Beneficiary Characteristics	All Top 10 Drug Groups				ULCER DRUGS				ANTIPSYCHOTICS			
	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 \$
<b>All</b>	<b>525,915</b>	<b>\$32,797,354</b>	<b>11,016</b>	<b>34.4 %</b>	<b>121,797</b>	<b>0.5</b>	<b>\$46</b>	<b>5,196</b>	<b>16.2 %</b>	<b>56,198</b>	<b>0.7</b>	<b>\$96</b>
<b>Female</b>	357,801	21,605,747	7,703	37.8	85,755	0.5	46	3,038	14.9	32,910	0.6	81
<b>Disabled</b>	197,687	12,790,570	4,115	43.8	46,758	0.5	47	1,555	16.5	17,534	0.7	95
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	30	1,348	3	50.0	23	0.5	32	0	0.0	0	0.0	0
15-20	150	11,025	4	16.7	48	0.5	76	5	20.8	51	0.3	72
21-44	33,127	2,696,635	574	28.5	6,407	0.4	45	518	25.7	5,896	0.7	119
45-64	74,558	5,125,162	1,495	48.9	16,807	0.5	49	604	19.8	6,835	0.6	96
65-74	61,814	3,454,641	1,342	48.1	15,378	0.5	46	266	9.5	2,941	0.7	70
75-84	21,432	1,149,476	516	47.5	6,018	0.5	47	113	10.4	1,273	0.6	64
85 and older	6,576	352,283	181	42.2	2,077	0.5	47	49	11.4	538	0.5	47
<b>Other Eligibles</b>	160,114	8,815,177	3,588	32.6	38,997	0.5	45	1,483	13.5	15,376	0.6	65
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	5	212	1	33.3	5	0.4	18	0	0.0	0	0.0	0
15-20	17	1,319	1	25.0	12	0.3	37	0	0.0	0	0.0	0
21-44	128	5,697	3	2.1	26	0.2	32	1	0.7	2	0.5	56
45-64	91	7,176	4	14.3	17	0.5	65	0	0.0	0	0.0	0
65-74	36,485	1,983,913	793	28.3	8,921	0.4	40	184	6.6	1,957	0.6	73
75-84	69,777	3,840,879	1,488	36.1	16,366	0.5	45	579	14.0	6,116	0.6	69
85 and older	53,611	2,975,981	1,298	33.4	13,650	0.6	50	719	18.5	7,301	0.5	59
<b>Male</b>	168,114	11,191,607	3,313	28.4	36,042	0.5	44	2,158	18.5	23,288	0.7	118
<b>Disabled</b>	112,632	8,098,150	2,102	29.7	23,425	0.5	45	1,506	21.3	16,804	0.8	135
5 and younger	11	138	1	50.0	12	0.8	11	0	0.0	0	0.0	0
6-14	11	655	1	50.0	4	0.8	48	0	0.0	0	0.0	0
15-20	136	17,463	1	3.4	12	0.9	208	6	20.7	47	0.6	77
21-44	38,997	3,471,319	617	23.2	6,934	0.5	45	855	32.2	9,522	0.8	150
45-64	42,729	2,950,946	790	33.4	8,756	0.5	46	449	19.0	5,093	0.8	126
65-74	24,207	1,311,583	520	34.9	5,721	0.5	45	142	9.5	1,565	0.8	105
75-84	5,057	268,539	132	33.3	1,522	0.5	45	35	8.8	363	0.8	70
85 and older	1,484	77,507	40	31.5	464	0.6	62	19	15.0	214	0.4	29
<b>Other Eligibles</b>	55,482	3,093,457	1,211	26.4	12,617	0.5	43	662	14.2	6,484	0.6	73
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	1	5	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	230	14,178	4	8.2	39	0.5	40	3	6.1	27	0.4	49
45-64	172	9,280	3	10.3	15	0.7	69	0	0.0	0	0.0	0
65-74	17,328	944,208	362	20.9	3,898	0.4	36	143	8.3	1,469	0.6	77
75-84	24,813	1,417,154	502	29.4	5,308	0.5	47	289	16.9	2,828	0.6	81
85 and older	12,938	708,632	340	31.7	3,357	0.6	46	217	20.2	2,160	0.5	59
<b>Unknown</b>	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2001 file for New Mexico, released by CMS in 06/2005. 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](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<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, NEW MEXICO, 2001

Beneficiary Characteristics	ANTIDEPRESSANTS					ANTI-DIABETIC					ANTICONVULSANT				
	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean Rx	Mean No. of Rx	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean Rx	Mean No. of Rx	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean Rx	Mean No. of Rx
<b>All</b>	<b>11,029</b>	<b>34.4 %</b>	<b>119,988</b>	<b>\$35</b>	<b>0.6</b>	<b>9,200</b>	<b>28.7 %</b>	<b>101,940</b>	<b>\$30</b>	<b>0.7</b>	<b>4,955</b>	<b>15.5 %</b>	<b>54,203</b>	<b>\$51</b>	<b>0.8</b>
<b>Female</b>	7,826	38.4	85,540	34	0.6	6,535	32.0	72,898	31	0.7	2,961	14.5	32,684	46	0.7
<b>Disabled</b>	4,498	47.8	50,156	35	0.6	3,465	36.8	39,208	34	0.7	1,995	21.2	22,395	53	0.7
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	2	33.3	24	6	0.1	2	33.3	24	8	0.2
15-20	11	45.8	85	25	0.5	0	0.0	0	0	0.0	1	4.2	6	20	0.8
21-44	1,050	52.1	11,708	42	0.6	219	10.9	2,421	42	0.7	685	34.0	7,656	66	0.8
45-64	1,923	62.9	21,248	38	0.6	1,237	40.5	13,810	35	0.6	829	27.1	9,277	54	0.7
65-74	1,078	38.7	12,142	29	0.5	1,451	52.0	16,506	34	0.7	343	12.3	3,901	35	0.6
75-84	330	30.4	3,799	26	0.5	453	41.7	5,275	27	0.6	103	9.5	1,181	33	0.7
85 and older	106	24.7	1,174	23	0.5	103	24.0	1,172	27	0.6	32	7.5	350	23	0.7
<b>Other Eligibles</b>	3,328	30.3	35,384	33	0.6	3,070	27.9	33,690	27	0.7	966	8.8	10,289	31	0.7
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	50.0	24	17	0.4	2	50.0	24	20	0.2	0	0.0	0	0	0.0
21-44	14	9.7	94	34	0.4	0	0.0	0	0	0.0	1	0.7	8	5	0.1
45-64	5	17.9	22	46	0.6	4	14.3	28	4	0.1	1	3.6	4	9	0.3
65-74	670	23.9	7,444	27	0.5	1,009	36.0	11,249	27	0.6	215	7.7	2,354	35	0.7
75-84	1,342	32.5	14,370	32	0.6	1,421	34.4	15,815	28	0.7	433	10.5	4,646	31	0.7
85 and older	1,295	33.4	13,430	36	0.7	634	16.3	6,574	23	0.7	316	8.1	3,277	29	0.7
<b>Male</b>	3,203	27.5	34,448	36	0.6	2,665	22.9	29,042	30	0.6	1,994	17.1	21,519	58	0.8
<b>Disabled</b>	2,200	31.1	24,309	37	0.6	1,580	22.4	17,488	32	0.6	1,551	21.9	17,119	64	0.8
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	1	50.0	10	18	0.2
15-20	7	24.1	56	45	0.5	0	0.0	0	0	0.0	6	20.7	49	176	1.1
21-44	986	37.1	10,858	43	0.6	255	9.6	2,775	35	0.7	795	29.9	8,698	72	0.8
45-64	837	35.4	9,239	35	0.6	653	27.6	7,167	32	0.6	567	24.0	6,338	61	0.9
65-74	296	19.9	3,323	25	0.6	571	38.3	6,389	31	0.6	140	9.4	1,562	36	0.8
75-84	56	14.1	627	35	0.6	89	22.5	1,025	27	0.6	33	8.3	357	27	0.6
85 and older	18	14.2	206	28	0.6	12	9.4	132	29	0.8	9	7.1	105	20	0.5
<b>Other Eligibles</b>	1,003	21.9	10,139	35	0.6	1,085	23.6	11,554	27	0.6	443	9.7	4,400	36	0.7
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	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0
21-44	11	22.4	89	61	0.5	2	4.1	22	10	0.3	6	12.2	30	42	0.6
45-64	4	13.8	38	40	0.5	7	24.1	32	12	0.6	4	13.8	33	63	0.5
65-74	268	15.5	2,813	34	0.6	412	23.8	4,443	26	0.6	139	8.0	1,455	38	0.8
75-84	441	25.8	4,448	35	0.7	497	29.1	5,362	29	0.6	202	11.8	1,983	36	0.7
85 and older	279	26.0	2,751	36	0.7	167	15.6	1,695	23	0.7	92	8.6	899	33	0.7
<b>Unknown</b>	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 Mexico, released by CMS in 06/2005. 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](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<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, NEW MEXICO, 2001

Beneficiary Characteristics	ANALGESICS - ANTI-INFLAMMATORY				ANTIHYPERTENSIVE				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 \$
<b>All</b>	<b>10,875</b>	<b>33.9 %</b>	<b>122,875</b>	<b>0.4</b>	<b>\$22</b>	<b>10,523</b>	<b>32.8 %</b>	<b>115,922</b>	<b>0.6</b>	<b>\$23</b>	<b>15,513</b>	<b>48.4 %</b>	<b>171,873</b>	<b>0.4</b>	<b>\$15</b>
<b>Female</b>	7,638	37.4	86,864	0.4	24	7,235	35.5	80,037	0.6	24	10,684	52.4	118,946	0.4	15
<b>Disabled</b>	4,248	45.2	48,638	0.4	23	3,213	34.2	36,191	0.6	23	6,090	64.8	69,337	0.4	17
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	1	16.7	12	0.2	2	1	16.7	12	0.3	11	2	33.3	24	0.1	1
15-20	4	16.7	46	0.2	2	5	20.8	51	0.5	10	9	37.5	103	0.1	1
21-44	691	34.3	7,824	0.3	18	246	12.2	2,669	0.6	19	1,184	58.8	13,293	0.4	22
45-64	1,482	48.5	16,674	0.4	26	991	32.4	10,946	0.6	22	2,234	73.1	25,078	0.4	24
65-74	1,423	51.0	16,482	0.4	23	1,257	45.1	14,312	0.6	24	1,764	63.3	20,376	0.4	9
75-84	498	45.8	5,865	0.4	23	521	47.9	6,037	0.7	25	662	60.9	7,732	0.3	7
85 and older	149	34.7	1,735	0.4	26	192	44.8	2,164	0.7	26	235	54.8	2,731	0.3	8
<b>Other Eligibles</b>	3,390	30.8	38,226	0.4	25	4,022	36.6	43,846	0.7	24	4,594	41.8	49,609	0.3	12
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	2	66.7	10	0.3	12	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	12	8.3	85	0.2	5	3	2.1	16	0.2	6	20	13.9	160	0.3	5
45-64	4	14.3	16	0.3	15	3	10.7	7	0.4	20	8	28.6	49	1.1	91
65-74	909	32.4	10,445	0.3	21	983	35.0	10,984	0.6	22	994	35.4	11,273	0.3	8
75-84	1,459	35.4	16,675	0.4	23	1,729	41.9	19,004	0.7	25	1,924	46.6	21,134	0.3	12
85 and older	1,006	25.9	11,005	0.5	32	1,302	33.5	13,825	0.7	24	1,648	42.5	16,993	0.4	14
<b>Male</b>	3,237	27.8	36,011	0.3	17	3,288	28.2	35,885	0.6	22	4,829	41.4	52,927	0.4	16
<b>Disabled</b>	2,121	30.0	24,003	0.3	16	1,755	24.8	19,568	0.6	22	3,315	46.9	37,107	0.4	19
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	6.9	9	0.8	6	2	6.9	17	0.3	8	4	13.8	32	0.1	1
21-44	639	24.0	7,258	0.3	11	329	12.4	3,667	0.6	20	1,166	43.9	12,903	0.4	20
45-64	790	33.4	8,820	0.4	18	669	28.3	7,378	0.6	22	1,298	54.9	14,628	0.5	24
65-74	533	35.8	6,111	0.3	18	570	38.3	6,381	0.6	23	649	43.6	7,264	0.3	9
75-84	119	30.1	1,366	0.3	17	142	35.9	1,626	0.6	23	145	36.6	1,682	0.3	7
85 and older	38	29.9	439	0.3	19	43	33.9	499	0.6	21	53	41.7	598	0.4	7
<b>Other Eligibles</b>	1,116	24.3	12,008	0.4	21	1,533	33.4	16,317	0.6	22	1,514	33.0	15,820	0.3	11
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	50.0	4	0.3	1	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	14	28.6	61	0.5	15	5	10.2	49	0.3	15	25	51.0	164	0.4	13
45-64	8	27.6	41	0.5	25	4	13.8	21	0.8	32	12	41.4	88	0.5	14
65-74	404	23.3	4,436	0.3	15	527	30.4	5,721	0.6	21	486	28.1	5,286	0.3	10
75-84	436	25.6	4,751	0.4	21	660	38.7	7,154	0.6	23	626	36.7	6,661	0.3	12
85 and older	253	23.6	2,715	0.5	30	337	31.4	3,372	0.7	22	365	34.0	3,621	0.3	8
<b>Unknown</b>	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 Mexico, released by CMS in 06/2005. 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](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<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, NEW MEXICO, 2001

Beneficiary Characteristics	ANTIHYPERLIPIDEMIC				ANTIASTHMATIC							
	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 Benes	No. of Bene Mos
<b>All</b>	<b>4,006</b>	<b>12.5 %</b>	<b>45,152</b>	<b>0.6</b>	<b>\$45</b>	<b>8,268</b>	<b>25.8 %</b>	<b>90,779</b>	<b>0.4</b>	<b>\$20</b>	<b>32,057</b>	<b>339,404</b>
<b>Female</b>	2,736	13.4	30,932	0.6	45	5,686	27.9	62,752	0.4	19	20,397	217,862
<b>Disabled</b>	1,539	16.4	17,434	0.6	46	3,110	33.1	34,880	0.4	20	9,405	102,818
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
6-14	1	16.7	12	0.1	3	1	16.7	12	0.2	4	6	58
15-20	1	4.2	12	0.4	21	2	8.3	12	0.6	46	24	202
21-44	89	4.4	987	0.5	39	511	25.4	5,674	0.3	17	2,015	21,413
45-64	583	19.1	6,471	0.6	45	1,171	38.3	13,050	0.5	22	3,056	32,753
65-74	651	23.4	7,452	0.6	49	988	35.4	11,098	0.4	20	2,788	31,215
75-84	183	16.8	2,136	0.6	43	345	31.7	4,007	0.4	19	1,087	12,443
85 and older	31	7.2	364	0.7	55	92	21.4	1,027	0.5	20	429	4,734
<b>Other Eligibles</b>	1,197	10.9	13,498	0.6	44	2,576	23.4	27,872	0.4	19	10,992	115,044
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	3	22
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	4	35
21-44	0	0.0	0	0.0	0	5	3.5	43	0.2	5	144	1,065
45-64	0	0.0	0	0.0	0	2	7.1	9	0.2	10	28	157
65-74	471	16.8	5,289	0.6	42	581	20.7	6,438	0.4	19	2,805	30,175
75-84	562	13.6	6,360	0.6	45	1,136	27.5	12,433	0.4	21	4,127	44,411
85 and older	164	4.2	1,849	0.7	44	852	22.0	8,949	0.4	15	3,881	39,179
<b>Male</b>	1,270	10.9	14,220	0.6	45	2,582	22.1	28,027	0.5	20	11,659	121,530
<b>Disabled</b>	831	11.8	9,306	0.6	45	1,481	21.0	16,508	0.4	19	7,069	75,474
5 and younger	0	0.0	0	0.0	0	1	50.0	12	0.1	1	2	13
6-14	0	0.0	0	0.0	0	2	100.0	8	0.8	35	2	14
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	29	213
21-44	149	5.6	1,622	0.6	43	376	14.1	4,121	0.3	13	2,658	27,960
45-64	363	15.3	4,059	0.6	46	518	21.9	5,828	0.4	20	2,366	24,907
65-74	270	18.1	3,041	0.6	45	447	30.0	4,974	0.5	25	1,489	16,467
75-84	45	11.4	536	0.6	44	96	24.2	1,078	0.4	19	396	4,494
85 and older	4	3.1	48	0.4	34	41	32.3	487	0.3	13	127	1,406
<b>Other Eligibles</b>	439	9.6	4,914	0.6	45	1,101	24.0	11,519	0.5	22	4,590	46,056
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	1	12
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	14
21-44	0	0.0	0	0.0	0	4	8.2	28	0.7	23	49	228
45-64	4	13.8	25	1.0	53	2	6.9	2	1.0	18	29	109
65-74	191	11.0	2,165	0.6	48	290	16.8	3,151	0.5	25	1,731	17,933
75-84	208	12.2	2,340	0.6	42	500	29.3	5,254	0.5	22	1,706	17,500
85 and older	36	3.4	384	0.7	45	305	28.5	3,084	0.4	18	1,072	10,260
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12

Table D7D

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2001 file for New Mexico, released by CMS in 06/2005. 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](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<sup>a, b</sup>  
 DUAL ELIGIBLE BENEFICIARIES, NEW MEXICO, 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
<b>All</b>	<b>\$224</b>	<b>5.0</b>	<b>4,212</b>	<b>42,069</b>
<b>Age</b>				
0-64	304	5.5	229	2,440
65-74	284	6.1	535	5,643
75-84	246	5.4	1,343	13,445
85 and older	183	4.5	2,105	20,541
Unknown	0	0.0	0	0
<b>Gender</b>				
Female	220	5.1	2,915	29,460
Male	233	4.9	1,297	12,609
Unknown	0	0.0	0	0
<b>Race</b>				
White	229	5.3	2,670	26,417
African American	205	4.3	60	618
Other/unknown	215	4.7	1,482	15,034
<b>Basis of Eligibility<sup>c</sup></b>				
Aged	216	5.0	3,719	36,742
Disabled	279	5.5	493	5,327
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 2001 file for New Mexico, released by CMS in 06/2005. 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 1,935 beneficiaries who were in nursing facilities for part of their enrollment and their 17,818 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<sup>a, b, c, d, e</sup>  
 DUAL ELIGIBLE BENEFICIARIES, NEW MEXICO, 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	Total	Patented	Off-Patent											
	Brand-Name	Brand-Name	Generic	Brand-Name	Brand-Name	Generic											
Anti-infective Agents	0.3	0.2	0.0	0.1	\$15	\$13	\$0	\$2	\$49	\$82	\$57	\$13	8,820	\$429,700	2,695	64.0 %	28,245
Biologics	0.1	0.0	0.0	0.1	3	0	0	3	30	18	0	31	250	7,376	234	5.6	2,623
Antineoplastic Agents	0.6	0.2	0.1	0.3	85	49	15	21	147	272	178	67	1,198	176,653	206	4.9	2,082
Endocrine/Metabolic Drugs	1.1	0.5	0.2	0.4	33	25	3	4	28	52	12	11	23,634	671,525	1,977	46.9	20,622
Cardiovascular Agents	1.7	0.5	0.2	1.0	42	22	5	15	24	41	24	15	45,203	1,105,111	2,589	61.5	26,601
Respiratory Agents	0.7	0.4	0.0	0.3	29	20	1	9	41	55	25	27	11,487	472,463	1,533	36.4	16,118
Gastrointestinal Agents	0.9	0.3	0.1	0.5	57	39	6	12	64	112	76	26	16,865	1,086,074	1,839	43.7	18,976
Genitourinary Agents	0.6	0.4	0.0	0.2	27	23	0	4	47	66	56	17	4,628	218,709	757	18.0	8,097
CNS Drugs	1.4	0.8	0.1	0.5	95	77	8	10	70	101	83	20	37,932	2,637,088	2,707	64.3	27,855
Stimulants/Anti-obesity/Anorexia	0.6	0.0	0.0	0.6	13	2	0	12	21	65	13	20	160	3,439	23	0.5	256
Miscellaneous Psychological/Neurological Agents	0.8	0.7	0.0	0.0	87	86	0	1	114	117	0	19	2,721	309,737	355	8.4	3,576
Analgesics and Anesthetics	0.8	0.3	0.1	0.4	38	30	3	5	49	87	56	13	16,295	802,385	2,053	48.7	20,918
Neuromuscular Agents	1.2	0.4	0.2	0.5	62	33	11	17	52	80	45	33	13,696	712,678	1,091	25.9	11,547
Nutritional Products	0.8	0.0	0.3	0.4	12	0	6	5	16	20	21	12	9,908	158,046	1,283	30.5	13,023
Hematological Agents	0.9	0.1	0.4	0.4	29	20	6	4	33	133	15	11	9,190	298,914	997	23.7	10,193
Topical Products	0.4	0.2	0.1	0.2	13	8	2	3	30	49	28	15	9,998	295,539	2,147	51.0	23,252
Miscellaneous Products	0.2	0.0	0.0	0.2	10	5	0	5	47	111	0	28	200	9,313	88	2.1	926
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	9	0	0	0	37	0	0	0	172	6,415	66	1.6	729
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.	212,357	9,401,165	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2001 file for New Mexico, released by CMS in 06/2005. 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 1,935 beneficiaries who were in nursing facilities for part of their enrollment and their 17,818 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](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).
- e. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. For information about this classification method, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003). In New Mexico, 4.5 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 D9

Dual Eligible 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 D.10  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS,  
 BY TOP-10 DRUG GROUP<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, NEW MEXICO, 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	\$1,417,297	1,526	36.2 %	16,041	0.7	\$123	\$88
ANTIDEPRESSANTS	1,008,184	2,215	52.6	23,122	0.8	54	44
ULCER DRUGS	968,301	1,582	37.6	16,305	0.7	82	59
ANTHYPERTENSIVE	436,830	1,488	35.3	15,355	0.8	34	28
ANTICONVULSANT	432,635	880	20.9	9,326	0.9	50	46
ANALGESICS - ANTI-INFLAMMATORY	411,419	1,024	24.3	10,844	0.6	65	38
ANALGESICS - Narcotic	370,783	1,852	44.0	18,791	0.5	43	20
ANTIIDIABETIC	356,296	1,143	27.1	11,849	0.8	36	30
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	311,702	366	8.7	3,683	0.7	113	85
ASTHMATIC	292,980	1,289	30.6	13,461	0.5	43	22
<b>Total</b>	<b>6,006,427</b>	<b>13,365</b>		<b>138,777</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>

Source: Data for this table are from the MAX 2001 file for New Mexico, released by CMS in 06/2005. 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 1,935 beneficiaries who were in nursing facilities for part of their enrollment and their 17,818 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](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<sup>a, b, c, d</sup>  
DUAL ELIGIBLE BENEFICIARIES, NEW MEXICO, 2001

Beneficiary Characteristics	All Top 10 Drug Groups					ANTIPSYCHOTICS					ANTIDEPRESSANTS						
	No. of Rx	Rx \$	No. of Users	Users as % of All-Year Residents	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All-Year Residents	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All-Year Residents	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
<b>All</b>	<b>97,536</b>	<b>\$6,006,427</b>	<b>1,526</b>	<b>36.2 %</b>	<b>16,041</b>	<b>0.7</b>	<b>\$88</b>	<b>2,215</b>	<b>52.6 %</b>	<b>23,122</b>	<b>0.8</b>	<b>\$44</b>					
<b>Female</b>	66,975	4,074,739	1,010	34.6	10,678	0.7	82	1,550	53.2	16,362	0.8	44					
<b>Disabled</b>	7,210	459,899	116	49.2	1,290	1.0	115	136	57.6	1,511	0.9	44					
64 or younger	2,410	170,323	34	40.5	380	0.9	126	56	66.7	640	0.8	40					
65-74	3,009	178,935	43	58.9	498	1.1	118	54	74.0	598	1.1	50					
75-84	1,138	69,537	23	47.9	252	1.0	109	18	37.5	196	0.8	41					
85 and older	653	41,104	16	51.6	160	0.8	89	8	25.8	77	0.9	43					
<b>Other Eligibles</b>	59,765	3,614,840	894	33.4	9,388	0.7	78	1,414	52.8	14,851	0.8	44					
64 or younger	5	265	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
65-74	7,267	441,372	93	42.5	1,010	0.8	105	149	68.0	1,616	0.8	48					
75-84	23,194	1,405,014	338	40.2	3,610	0.7	84	513	61.0	5,388	0.8	44					
85 and older	29,299	1,768,189	463	28.6	4,768	0.6	68	752	46.5	7,847	0.8	42					
<b>Male</b>	30,561	1,931,688	516	39.8	5,363	0.8	101	665	51.3	6,760	0.8	44					
<b>Disabled</b>	7,771	526,666	134	52.1	1,489	1.0	131	151	58.8	1,611	0.9	45					
64 or younger	4,292	297,295	62	43.1	686	1.0	136	93	64.6	964	0.9	47					
65-74	2,616	170,508	48	67.6	552	1.0	146	42	59.2	489	0.9	40					
75-84	600	44,785	16	64.0	162	0.9	110	11	44.0	100	0.9	46					
85 and older	263	14,078	8	47.1	89	0.4	40	5	29.4	58	0.8	45					
<b>Other Eligibles</b>	22,790	1,405,022	382	36.7	3,874	0.7	89	514	49.4	5,149	0.8	43					
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
65-74	4,864	294,689	75	43.6	795	0.7	87	108	62.8	1,143	0.8	45					
75-84	10,379	661,703	170	39.6	1,722	0.7	102	241	56.2	2,388	0.8	43					
85 and older	7,547	448,630	137	31.2	1,357	0.6	73	165	37.6	1,618	0.8	43					
<b>Unknown</b>	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					

Source: Data for this table are from the MAX 2001 file for New Mexico, released by CMS in 06/2005. 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 1,935 beneficiaries who were in nursing facilities for part of their enrollment and their 17,818 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](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<sup>a,b,c,d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, NEW MEXICO, 2001

Beneficiary Characteristics	ULCER DRUGS						ANTIHYPERTENSIVE						ANTICONVULSANT					
	Users as %			Users as %			Users as %			Users as %			Users as %			Users as %		
	No. of Users	No. of Bene among Users	Mean No. of Rx	No. of Users	No. of Bene among Users	Mean No. of Rx	No. of Users	No. of Bene among Users	Mean No. of Rx	No. of Users	No. of Bene among Users	Mean No. of Rx	No. of Users	No. of Bene among Users	Mean No. of Rx	No. of Users	No. of Bene among Users	Mean No. of Rx
<b>All</b>	<b>1,582</b>	<b>37.6 %</b>	<b>\$59</b>	<b>1,488</b>	<b>35.3 %</b>	<b>0.8</b>	<b>15,355</b>	<b>0.8</b>	<b>\$28</b>	<b>880</b>	<b>20.9 %</b>	<b>9,326</b>	<b>0.9</b>	<b>\$46</b>				
<b>Female</b>	1,112	38.1	59	1,020	35.0	0.8	10,586	0.8	28	544	18.7	5,855	0.9	44				
<b>Disabled</b>	88	37.3	58	67	28.4	0.9	761	0.9	27	106	44.9	1,157	1.1	63				
64 or younger	30	35.7	61	18	21.4	0.7	209	0.7	24	52	61.9	563	1.1	71				
65-74	30	41.1	57	26	35.6	1.0	290	1.0	31	35	47.9	401	1.1	58				
75-84	17	35.4	40	14	29.2	0.6	158	0.9	25	13	27.1	132	1.1	59				
85 and older	11	35.5	78	9	29.0	1.0	104	0.8	29	6	19.4	61	1.6	33				
<b>Other Eligibles</b>	1,024	38.2	59	953	35.6	0.8	9,825	0.8	28	438	16.3	4,698	0.8	39				
64 or younger	1	100.0	102	1	100.0	1.0	1	1.0	46	0	0.0	0	0.0	0				
65-74	99	45.2	60	99	45.2	0.9	981	0.9	30	76	34.7	847	0.9	47				
75-84	348	41.4	59	368	43.8	0.8	3,793	0.8	29	185	22.0	1,987	0.9	41				
85 and older	576	35.6	59	485	30.0	0.8	5,050	0.8	27	177	10.9	1,864	0.8	33				
<b>Male</b>	470	36.2	60	468	36.1	0.8	4,769	0.8	30	336	25.9	3,471	1.0	51				
<b>Disabled</b>	104	40.5	65	85	33.1	0.9	900	0.9	33	112	43.6	1,247	1.2	65				
64 or younger	58	40.3	63	47	32.6	0.9	470	0.9	35	73	50.7	796	1.2	78				
65-74	33	46.5	58	23	32.4	1.0	264	1.0	31	30	42.3	354	1.2	45				
75-84	9	36.0	105	9	36.0	0.9	100	0.9	37	6	24.0	64	1.0	48				
85 and older	4	23.5	65	6	35.3	0.8	66	0.8	25	3	17.6	33	0.6	13				
<b>Other Eligibles</b>	366	35.2	59	383	36.8	0.8	3,869	0.8	29	224	21.5	2,224	0.9	43				
64 or younger	0	0.0	0	0	0.0	0.0	0	0.0	0	0	0.0	0	0.0	0				
65-74	57	33.1	61	71	41.3	0.8	776	0.8	27	58	33.7	611	1.1	52				
75-84	153	35.7	61	177	41.3	0.8	1,805	0.8	31	112	26.1	1,083	0.8	42				
85 and older	156	35.5	55	135	30.8	0.8	1,288	0.8	27	54	12.3	530	0.8	35				
<b>Unknown</b>	0	0.0	0	0	0.0	0.0	0	0.0	0	0	0.0	0	0.0	0				

Source: Data for this table are from the MAX 2001 file for New Mexico, released by CMS in 06/2005. 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 1,935 beneficiaries who were in nursing facilities for part of their enrollment and their 17,818 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](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<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, NEW MEXICO, 2001

Beneficiary Characteristics	ANALGESICS - ANTI-INFLAMMATORY					ANALGESICS - Narcotic					ANTIDIABETIC				
	Users as %					Users as %					Users as %				
	No. of Users	No. of Bene NF Residents	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	No. of Bene NF Residents	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	No. of Bene NF Residents	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
<b>All</b>	<b>1,024</b>	<b>24.3 %</b>	<b>10,844</b>	<b>0.6</b>	<b>\$38</b>	<b>1,852</b>	<b>44.0 %</b>	<b>18,791</b>	<b>0.5</b>	<b>\$20</b>	<b>1,143</b>	<b>27.1 %</b>	<b>11,849</b>	<b>0.8</b>	<b>\$30</b>
<b>Female</b>	719	24.7	7,787	0.6	39	1,311	45.0	13,423	0.5	20	799	27.4	8,436	0.8	30
<b>Disabled</b>	42	17.8	483	0.5	33	83	35.2	893	0.4	15	85	36.0	957	0.8	34
64 or younger	12	14.3	130	0.4	20	30	35.7	316	0.4	21	25	29.8	290	0.7	41
65-74	17	23.3	201	0.7	40	26	35.6	272	0.6	23	29	39.7	316	0.9	37
75-84	7	14.6	80	0.5	29	16	33.3	177	0.3	3	23	47.9	276	0.7	28
85 and older	6	19.4	72	0.4	39	11	35.5	128	0.2	4	8	25.8	75	0.6	20
<b>Other Eligibles</b>	677	25.3	7,304	0.6	39	1,228	45.8	12,530	0.5	21	714	26.7	7,479	0.8	30
64 or younger	0	0.0	0	0.0	0	2	200.0	2	1.0	55	1	100.0	1	1.0	7
65-74	58	26.5	641	0.6	36	110	50.2	1,202	0.5	20	127	58.0	1,315	0.9	31
75-84	226	26.9	2,407	0.6	38	405	48.2	4,257	0.5	26	325	38.6	3,487	0.8	31
85 and older	393	24.3	4,256	0.6	40	711	43.9	7,069	0.4	17	261	16.1	2,676	0.8	27
<b>Male</b>	305	23.5	3,057	0.6	36	541	41.7	5,368	0.4	19	344	26.5	3,413	0.8	30
<b>Disabled</b>	45	17.5	485	0.4	21	97	37.7	1,037	0.6	21	87	33.9	904	0.8	30
64 or younger	27	18.8	295	0.4	23	55	38.2	569	0.6	26	49	34.0	498	0.9	30
65-74	11	15.5	132	0.3	11	29	40.8	342	0.5	17	28	39.4	324	0.7	31
75-84	4	16.0	25	0.7	42	4	16.0	26	0.6	27	7	28.0	58	1.0	33
85 and older	3	17.6	33	0.5	24	9	52.9	100	0.2	4	3	17.6	24	0.8	22
<b>Other Eligibles</b>	260	25.0	2,572	0.6	38	444	42.7	4,331	0.4	18	257	24.7	2,509	0.8	30
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	45	26.2	453	0.6	37	80	46.5	837	0.5	36	48	27.9	472	0.9	32
75-84	101	23.5	967	0.6	35	197	45.9	1,939	0.4	15	141	32.9	1,387	0.8	30
85 and older	114	26.0	1,152	0.7	42	167	38.0	1,555	0.4	13	68	15.5	650	0.8	28
<b>Unknown</b>	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 Mexico, released by CMS in 06/2005. 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 1,935 beneficiaries who were in nursing facilities for part of their enrollment and their 17,818 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](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<sup>a, b, c, d</sup>  
DUAL ELIGIBLE BENEFICIARIES, NEW MEXICO, 2001

Beneficiary Characteristics	MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL						ANTI-ASTHMATIC					
	Users as %			Users as %			Users as %			Users as %		
	No. of Users	No. of Bene Mos among Users	Mean Rx \$	No. of Users	No. of Bene Mos among Users	Mean Rx \$	No. of Users	No. of Bene Mos among Users	Mean Rx \$	No. of Users	No. of Bene Mos among Users	Mean Rx \$
<b>All</b>	<b>366</b>	<b>8.7 %</b>	<b>\$85</b>	<b>1,289</b>	<b>30.6 %</b>	<b>\$22</b>	<b>13,461</b>	<b>0.5</b>	<b>4,212</b>	<b>42,069</b>	<b>0.5</b>	<b>\$22</b>
<b>Female</b>	259	8.9	85	848	29.1	21	9,027	0.5	2,915	29,460	0.5	21
<b>Disabled</b>	15	6.4	56	73	30.9	24	821	0.5	236	2,542	0.5	24
64 or younger	3	3.6	26	24	28.6	31	265	0.5	84	913	0.5	31
65-74	3	4.1	52	34	46.6	26	408	0.6	73	819	0.6	26
75-84	4	8.3	83	8	16.7	4	76	0.2	48	495	0.2	4
85 and older	5	16.1	53	7	22.6	7	72	0.2	31	315	0.2	7
<b>Other Eligibles</b>	244	9.1	87	775	28.9	21	8,206	0.5	2,679	26,918	0.5	21
64 or younger	0	0.0	0	0	0.0	0	0	0.0	1	1	0.0	0
65-74	16	7.3	76	82	37.4	31	894	0.7	219	2,246	0.7	31
75-84	94	11.2	86	276	32.8	24	2,885	0.5	841	8,585	0.5	24
85 and older	134	8.3	89	417	25.8	17	4,427	0.4	1,618	16,086	0.4	17
<b>Male</b>	107	8.2	84	441	34.0	23	4,434	0.6	1,297	12,609	0.6	23
<b>Disabled</b>	6	2.3	76	58	22.6	19	628	0.4	257	2,785	0.4	19
64 or younger	2	1.4	111	24	16.7	14	264	0.3	144	1,526	0.3	14
65-74	4	5.6	66	22	31.0	19	240	0.5	71	819	0.5	19
75-84	0	0.0	0	7	28.0	43	64	0.8	25	254	0.8	43
85 and older	0	0.0	0	5	29.4	17	60	0.4	17	186	0.4	17
<b>Other Eligibles</b>	101	9.7	84	383	36.8	24	3,806	0.6	1,040	9,824	0.6	24
64 or younger	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0
65-74	8	4.7	72	63	36.6	27	670	0.7	172	1,759	0.7	27
75-84	58	13.5	80	159	37.1	26	1,565	0.6	429	4,111	0.6	26
85 and older	35	8.0	93	161	36.7	19	1,571	0.5	439	3,954	0.5	19
<b>Unknown</b>	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0

Source: Data for this table are from the MAX 2001 file for New Mexico, released by CMS in 06/2005. 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 1,935 beneficiaries who were in nursing facilities for part of their enrollment and their 17,818 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](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<sup>a,b</sup>  
 NEW MEXICO, 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 Excl Rx per Bene		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
			5.3	171,463					
<b>All</b>	<b>16,986</b>	<b>53.0 %</b>	<b>5.3</b>	<b>171,463</b>	<b>\$70</b>	<b>\$2,241,631</b>	<b>\$13</b>	<b>4.3 %</b>	<b>32,057</b>
<b>Age</b>									
5 and younger	2	100.0	54.0	108	620	1,239	11	40.8	2
6-14	10	83.3	6.7	80	71	849	11	1.7	12
15-20	22	37.3	1.3	74	26	1,507	20	2.3	59
21-44	2,142	44.0	3.8	18,658	70	342,389	18	3.6	4,867
45-64	3,055	55.8	5.8	31,863	94	513,572	16	4.2	5,479
65-74	4,164	47.2	4.3	37,713	54	471,644	13	4.0	8,813
75-84	4,103	56.1	5.7	41,982	68	497,512	12	4.6	7,316
85 and older	3,488	63.3	7.4	40,985	75	412,919	10	5.6	5,509
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
<b>Basis of Eligibility<sup>c</sup></b>									
Aged	8,196	53.5	5.6	86,201	61	928,567	11	4.7	15,317
Disabled	8,754	53.1	5.2	85,153	80	1,311,215	15	4.1	16,475
Adults	32	12.5	0.4	91	7	1,720	19	3.1	257
Children	4	50.0	2.3	18	16	129	7	0.7	8
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
<b>Gender</b>									
Female	11,684	57.3	6.0	121,758	78	1,581,576	13	4.6	20,397
Male	5,301	45.5	4.3	49,703	57	660,038	13	3.9	11,659
Unknown	1	100.0	2.0	2	17	17	9	0.0	1
<b>Race</b>									
White	8,301	58.0	6.4	92,100	87	1,243,813	14	4.5	14,321
African American	328	50.1	5.2	3,405	79	51,476	15	4.6	655
Other/unknown	8,357	48.9	4.4	75,958	55	946,342	12	4.1	17,081
<b>Use of Nursing Facilities<sup>d</sup></b>									
Entire year	3,310	78.6	12.2	51,526	123	516,244	10	5.5	4,212
Part year	1,490	77.0	8.3	16,099	86	167,075	10	5.1	1,935
None	12,186	47.0	4.0	103,838	60	1,558,312	15	4.0	25,910
<b>Maintenance Assistance Status</b>									
Cash	11,425	47.9	4.0	95,043	60	1,426,460	15	4.0	23,859
Medically needy	0	0.0	0.0	0	0	0	0	0.0	0
Poverty related	182	36.7	2.2	1,105	39	19,500	18	4.4	496
Other/unknown	5,379	69.8	9.8	75,315	103	795,671	11	5.2	7,702

Table D11

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2001 file for New Mexico, released by CMS in 06/2005. 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<sup>a,b</sup>  
 NEW MEXICO, 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
	0.5	\$7	\$13	\$0	\$2	339,404
<b>Age</b>						
5 and younger	8.3	95	11	0	0	13
6-14	0.8	8	11	0	0	106
15-20	0.2	3	20	0	0	464
21-44	0.4	7	18	0	4	50,678
45-64	0.6	9	16	0	4	57,926
65-74	0.4	5	13	0	1	95,790
75-84	0.5	6	12	0	2	78,848
85 and older	0.7	7	10	0	1	55,579
Unknown	0.0	0	0	0	0	0
<b>Basis of Eligibility<sup>c</sup></b>						
Aged	0.5	6	11	0	1	159,466
Disabled	0.5	7	15	0	3	178,304
Adults	0.1	1	19	0	1	1,572
Children	0.3	2	7	0	0	62
Unknown	0.0	0	0	0	0	0
<b>Gender</b>						
Female	0.6	7	13	0	2	217,862
Male	0.4	5	13	0	2	121,530
Unknown	0.2	1	9	0	0	12
<b>Race</b>						
White	0.6	8	14	0	3	149,305
African American	0.5	8	15	0	3	6,783
Other/unknown	0.4	5	12	0	2	183,316
<b>Use of Nursing Facilities<sup>d</sup></b>						
Entire year	1.2	12	10	0	2	42,069
Part year	0.9	9	10	0	2	17,818
None	0.4	6	15	0	2	279,517
<b>Maintenance Assistance Status</b>						
Cash	0.4	5	15	0	2	260,489
Medically needy	0.0	0	0	0	0	0
Poverty related	0.3	4	18	0	2	4,419
Other/unknown	1.0	11	11	0	2	74,496

Source: Data for this table are from the MAX 2001 file for New Mexico, released by CMS in 06/2005. 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<sup>a,b,c</sup>  
 NEW MEXICO, 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
<b>All</b>	<b>26,882</b>	<b>\$83</b>	<b>\$2,241,631</b>	<b>100.0 %</b>	<b>171,463</b>	<b>\$13</b>	<b>100.0 %</b>
Anorexia or weight loss/gain	1	68	68	0.0	2	34	0.0
Fertility drugs	0	0	0	0.0	0	0	0.0
Drugs for cosmetic purposes	1	10	10	0.0	1	10	0.0
Cough and cold medications	4,503	68	306,586	13.7	11,963	26	7.0
Vitamins and minerals	4,667	107	501,435	22.4	29,646	17	17.3
Non-prescription drugs	11,312	56	630,783	28.1	90,040	7	52.5
Barbiturates	298	65	19,326	0.9	2,858	7	1.7
Benzodiazepines	5,647	132	745,530	33.3	35,514	21	20.7
Other Part D Excl Rx Drugs	453	84	37,893	1.7	1,439	26	0.8

Source: Data for this table are from the MAX 2001 file for New Mexico, released by CMS in 06/2005. 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<sup>a, b</sup>  
 NEW MEXICO, 2001

Total Number of Dual Eligible Beneficiaries                32,057  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries     \$51,855,600  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary     \$1,618

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	6,488	20.2 %	\$0	0.0 %
1-500	7,707	24.0	1,510,211	2.9
501-1,000	3,866	12.1	2,843,861	5.5
1,001-1,500	2,929	9.1	3,632,428	7.0
1,501-2,000	2,300	7.2	4,012,219	7.7
2,001-2,500	1,711	5.3	3,836,779	7.4
2,501-3,000	1,361	4.2	3,731,222	7.2
3,001-3,500	1,122	3.5	3,632,191	7.0
3,501-4,000	905	2.8	3,386,986	6.5
4,001-4,500	711	2.2	3,017,489	5.8
4,501-5,000	541	1.7	2,568,108	5.0
5,001-5,500	430	1.3	2,250,315	4.3
5,501-6,000	363	1.1	2,083,695	4.0
6,001-6,500	320	1.0	1,992,066	3.8
6,501-7,000	224	0.7	1,508,257	2.9
7,001-7,500	199	0.6	1,437,830	2.8
7,501-8,000	119	0.4	921,231	1.8
8,001-8,500	125	0.4	1,028,426	2.0
8,501-9,000	86	0.3	751,074	1.4
9,001-9,500	88	0.3	813,339	1.6
9,501-10,000	55	0.2	534,495	1.0
10,001+	407	1.3	6,363,378	12.3

Source: Data for this table are from the MAX 2001 file for New Mexico, released by CMS in 06/2005. 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<sup>a, b, c</sup>  
 NEW MEXICO, 2001

Total Number of Disabled Dual Eligible Beneficiaries, Age < 65 10,159  
 Total Pharmacy Reimbursement for Disabled Dual Eligible Beneficiaries, Age < 65 \$21,682,565  
 Mean Pharmacy Reimbursement per Disabled Dual Eligible Beneficiary, Age < 65 \$2,134

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Disabled Dual Beneficiaries, Age < 65		Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
			19.7 %		
\$0	2,000			0	0.0
1-500	2,474	24.4		453,576	2.1
501-1,000	1,049	10.3		775,664	3.6
1,001-1,500	746	7.3		923,197	4.3
1,501-2,000	607	6.0		1,059,339	4.9
2,001-2,500	456	4.5		1,023,707	4.7
2,501-3,000	381	3.8		1,046,324	4.8
3,001-3,500	377	3.7		1,219,393	5.6
3,501-4,000	318	3.1		1,194,664	5.5
4,001-4,500	243	2.4		1,033,765	4.8
4,501-5,000	194	1.9		923,371	4.3
5,001-5,500	169	1.7		884,869	4.1
5,501-6,000	159	1.6		913,784	4.2
6,001-6,500	162	1.6		1,010,033	4.7
6,501-7,000	117	1.2		788,227	3.6
7,001-7,500	105	1.0		758,247	3.5
7,501-8,000	64	0.6		496,049	2.3
8,001-8,500	76	0.7		625,344	2.9
8,501-9,000	49	0.5		428,300	2.0
9,001-9,500	53	0.5		490,849	2.3
9,501-10,000	40	0.4		389,076	1.8
10,001+	320	3.1		5,244,787	24.2

Source: Data for this table are from the MAX 2001 file for New Mexico, released by CMS in 06/2005. 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<sup>a, b</sup>  
 NEW MEXICO, 2001

Total Number of Dual Eligible Beneficiaries, Age 65+                21,638  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65+    \$30,096,096  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65+    \$1,391

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 65+ 20.0 %	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	4,331	20.0 %	0	0.0 %
1-500	5,154	23.8	1,043,955	3.5
501-1,000	2,811	13.0	2,063,931	6.9
1,001-1,500	2,176	10.1	2,700,653	9.0
1,501-2,000	1,692	7.8	2,951,081	9.8
2,001-2,500	1,254	5.8	2,810,784	9.3
2,501-3,000	978	4.5	2,679,230	8.9
3,001-3,500	744	3.4	2,409,641	8.0
3,501-4,000	587	2.7	2,192,322	7.3
4,001-4,500	467	2.2	1,979,606	6.6
4,501-5,000	347	1.6	1,644,737	5.5
5,001-5,500	259	1.2	1,355,178	4.5
5,501-6,000	203	0.9	1,164,135	3.9
6,001-6,500	158	0.7	982,033	3.3
6,501-7,000	106	0.5	713,232	2.4
7,001-7,500	94	0.4	679,583	2.3
7,501-8,000	55	0.3	425,182	1.4
8,001-8,500	49	0.2	403,082	1.3
8,501-9,000	37	0.2	322,774	1.1
9,001-9,500	35	0.2	322,490	1.1
9,501-10,000	15	0.1	145,419	0.5
10,001+	86	0.4	1,107,048	3.7

Source: Data for this table are from the MAX 2001 file for New Mexico, released by CMS in 06/2005. 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<sup>a, b</sup>  
 NEW MEXICO, 2001

Total Number of Dual Eligible Beneficiaries, Age 65-74 8,813  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65-74 \$11,780,193  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65-74 \$1,337

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 65-74	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	2,181	24.7 %	0	0.0 %
1-500	2,090	23.7	395,628	3.4
501-1,000	1,049	11.9	766,204	6.5
1,001-1,500	820	9.3	1,015,850	8.6
1,501-2,000	602	6.8	1,054,179	8.9
2,001-2,500	429	4.9	961,234	8.2
2,501-3,000	336	3.8	921,680	7.8
3,001-3,500	285	3.2	924,774	7.9
3,501-4,000	208	2.4	778,493	6.6
4,001-4,500	172	2.0	730,290	6.2
4,501-5,000	146	1.7	691,165	5.9
5,001-5,500	116	1.3	604,262	5.1
5,501-6,000	81	0.9	463,161	3.9
6,001-6,500	68	0.8	420,397	3.6
6,501-7,000	39	0.4	262,309	2.2
7,001-7,500	43	0.5	311,138	2.6
7,501-8,000	21	0.2	161,780	1.4
8,001-8,500	24	0.3	197,713	1.7
8,501-9,000	22	0.2	191,733	1.6
9,001-9,500	20	0.2	184,447	1.6
9,501-10,000	9	0.1	87,271	0.7
10,001+	52	0.6	656,485	5.6

Source: Data for this table are from the MAX 2001 file for New Mexico, released by CMS in 06/2005. 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<sup>a, b</sup>  
 NEW MEXICO, 2001

Total Number of Dual Eligible Beneficiaries, Age 75-84 7,316  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 75-84 \$10,909,837  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 75-84 \$1,491

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 75-84	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	1,356	18.5 %	0	0.0 %
1-500	1,647	22.5	339,194	3.1
501-1,000	923	12.6	683,419	6.3
1,001-1,500	737	10.1	913,300	8.4
1,501-2,000	610	8.3	1,060,571	9.7
2,001-2,500	460	6.3	1,030,274	9.4
2,501-3,000	348	4.8	953,589	8.7
3,001-3,500	271	3.7	877,084	8.0
3,501-4,000	245	3.3	914,692	8.4
4,001-4,500	197	2.7	833,102	7.6
4,501-5,000	130	1.8	618,267	5.7
5,001-5,500	91	1.2	476,135	4.4
5,501-6,000	76	1.0	436,891	4.0
6,001-6,500	59	0.8	368,503	3.4
6,501-7,000	45	0.6	302,375	2.8
7,001-7,500	35	0.5	252,174	2.3
7,501-8,000	26	0.4	201,349	1.8
8,001-8,500	15	0.2	123,042	1.1
8,501-9,000	9	0.1	78,316	0.7
9,001-9,500	7	0.1	64,373	0.6
9,501-10,000	5	0.1	48,350	0.4
10,001+	24	0.3	334,837	3.1

Source: Data for this table are from the MAX 2001 file for New Mexico, released by CMS in 06/2005. 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<sup>a, b</sup>  
 NEW MEXICO, 2001

Total Number of Dual Eligible Beneficiaries, Age 85+ 5,509  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 85+ \$7,406,066  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 85+ \$1,344

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 85+ 14.4 %	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	794		0	0.0 %
1-500	1,417	25.7	309,133	4.2
501-1,000	839	15.2	614,308	8.3
1,001-1,500	619	11.2	771,503	10.4
1,501-2,000	480	8.7	836,331	11.3
2,001-2,500	365	6.6	819,276	11.1
2,501-3,000	294	5.3	803,961	10.9
3,001-3,500	188	3.4	607,783	8.2
3,501-4,000	134	2.4	499,137	6.7
4,001-4,500	98	1.8	416,214	5.6
4,501-5,000	71	1.3	335,305	4.5
5,001-5,500	52	0.9	274,781	3.7
5,501-6,000	46	0.8	264,083	3.6
6,001-6,500	31	0.6	193,133	2.6
6,501-7,000	22	0.4	148,548	2.0
7,001-7,500	16	0.3	116,271	1.6
7,501-8,000	8	0.1	62,053	0.8
8,001-8,500	10	0.2	82,327	1.1
8,501-9,000	6	0.1	52,725	0.7
9,001-9,500	8	0.1	73,670	1.0
9,501-10,000	1	0.0	9,798	0.1
10,001+	10	0.2	115,726	1.6

Source: Data for this table are from the MAX 2001 file for New Mexico, released by CMS in 06/2005. 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<sup>a, b</sup>  
DUAL ELIGIBLE BENEFICIARIES, NEW MEXICO, 2001

Beneficiary Characteristics	No. of Benes					No. of Bene Mos					
	All	Aged	Disabled	Adults	Children	All	Aged	Disabled	Adults	Children	Unknown
<b>All</b>	<b>33,012</b>	<b>15,373</b>	<b>17,312</b>	<b>317</b>	<b>10</b>	<b>357,302</b>	<b>160,827</b>	<b>193,821</b>	<b>2,556</b>	<b>98</b>	<b>0</b>
<b>Age</b>											
5 and younger	2	0	2	0	0	18	0	18	0	0	0
6-14	13	0	8	0	5	142	0	83	0	59	0
15-20	65	0	58	2	5	718	0	658	21	39	0
21-44	5,373	1	5,140	232	0	59,207	12	57,251	1,944	0	0
45-64	5,756	3	5,679	74	0	62,971	21	62,390	560	0	0
65-74	8,954	4,562	4,383	9	0	99,287	48,961	50,295	31	0	0
75-84	7,335	5,850	1,485	0	0	79,255	62,283	16,972	0	0	0
85 and older	5,514	4,957	557	0	0	55,704	49,550	6,154	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0
<b>Gender</b>											
Female	20,871	10,852	9,811	203	5	227,099	114,658	110,643	1,749	49	0
Male	12,140	4,521	7,500	114	5	130,191	46,169	83,166	807	49	0
Unknown	1	0	1	0	0	12	0	12	0	0	0
<b>Race</b>											
White	14,732	6,900	7,741	88	3	156,666	69,943	85,969	729	25	0
African American	679	221	445	13	0	7,257	2,343	4,812	102	0	0
Other/unknown	17,601	8,252	9,126	216	7	193,379	88,541	103,040	1,725	73	0
<b>Use of Nursing Facilities<sup>c</sup></b>											
Entire year	4,212	3,719	493	0	0	42,069	36,742	5,327	0	0	0
Part year	1,935	1,617	317	1	0	17,877	14,606	3,269	2	0	0
None	26,865	10,037	16,502	316	10	297,356	109,479	185,225	2,554	98	0
<b>Maintenance Assistance Status</b>											
Cash	24,777	9,076	15,558	143	0	277,150	100,984	175,075	1,091	0	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0
Poverty related	498	155	317	17	9	4,943	1,561	3,157	137	88	0
Other/unknown	7,737	6,142	1,437	157	1	75,209	58,282	15,589	1,328	10	0
<b>Dual Status<sup>d</sup></b>											
Full dual, all year	32,307	14,931	17,062	304	10	349,775	156,085	191,173	2,419	98	0
Full dual, part year	705	442	250	13	0	7,527	4,742	2,648	137	0	0
<b>Managed Care Status</b>											
FFS all year	30,452	15,038	15,230	178	6	330,249	157,740	171,155	1,302	52	0
FFS part year, with Rx claims	1,089	148	897	42	2	11,745	1,433	9,873	416	23	0
FFS part year, no Rx claims	516	131	348	37	0	4,884	1,105	3,471	308	0	0
MC all year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0
MC all year, no Rx claims	955	56	837	60	2	10,424	549	9,322	530	23	0



Source: Data for this table are from the MAX 2001 file for New Mexico, released by CMS in 06/2005. 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<sup>a</sup>  
 DUAL ELIGIBLE BENEFICIARIES, NEW MEXICO, 2001

Beneficiary Characteristics	Bene Mos in Cell F of Table 1		Included in Cell G of Table 1		Excluded from Cell G of Table 1	
	No. of Benes	No. of Bene Mos	No. of Benes	No. of Bene Mos	No. of Benes	No. of Bene Mos
<b>All</b>	<b>33,012</b>	<b>357,302</b>	<b>32,057</b>	<b>339,404</b>	<b>0</b>	<b>17,898</b>
FFS all year	30,452	330,249	30,452	330,249	0	0
FFS part year, with Rx claims	1,089	11,745	1,089	6,655	0	5,090
FFS part year, with no Rx claims	516	4,884	516	2,500	0	2,384
MC all year, with Rx claims	0	0	0	0	0	0
MC all year, with no Rx claims	955	10,424	0	0	0	10,424

Source: Data for this table are from the MAX 2001 file for New Mexico, released by CMS in 06/2005. 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.