

**STATISTICAL COMPENDIUM:  
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2002  
MAINE**

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TABLE D.2  
 CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY<sup>a,b</sup>  
 DUAL ELIGIBLE BENEFICIARIES, MAINE, 2002

Beneficiary Characteristics	No. of Benefes							No. of Bene Mos									
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children
<b>All</b>	<b>47,129</b>	<b>22,309</b>	<b>22,734</b>	<b>2,062</b>	<b>21</b>	<b>3</b>	<b>523,655</b>	<b>242,900</b>	<b>258,763</b>	<b>21,776</b>	<b>202</b>	<b>14</b>					
<b>Age</b>																	
5 and younger	3	0	3	0	0	0	28	0	28	0	0	0					
6-14	4	0	3	0	1	0	48	0	36	0	12	0					
15-20	90	0	75	0	15	0	1,007	0	846	0	161	0					
21-44	9,927	2	8,605	1,316	4	0	112,276	24	98,256	13,970	26	0					
45-64	11,823	4	11,173	644	1	1	134,605	48	127,826	6,722	3	6					
65-74	9,632	8,389	1,154	87	0	2	109,006	95,363	12,713	922	0	8					
75-84	8,988	8,158	816	14	0	0	98,403	89,303	8,950	150	0	0					
85 and older	6,661	5,756	904	1	0	0	68,270	58,162	10,096	12	0	0					
Unknown	1	0	1	0	0	0	12	0	12	0	0	0					
<b>Gender</b>																	
Female	28,269	16,010	11,356	892	8	3	314,886	175,673	129,558	9,554	87	14					
Male	18,858	6,299	11,377	1,169	13	0	208,764	67,227	129,203	12,219	115	0					
Unknown	2	0	1	1	0	5	0	0	2	3	0	0					
<b>Race</b>																	
White	46,395	22,008	22,353	2,011	20	3	515,816	239,733	254,542	21,337	190	14					
African American	241	79	140	22	0	0	2,469	790	1,507	172	0	0					
Other/unknown	493	222	241	29	1	0	5,370	2,377	2,714	267	12	0					
<b>Use of Nursing Facilities<sup>c</sup></b>																	
Entire year	4,342	4,077	265	0	0	0	43,229	40,337	2,892	0	0	0					
Part year	3,592	3,062	523	7	0	0	36,274	30,448	5,743	83	0	0					
None	39,195	15,170	21,946	2,055	21	3	444,152	172,115	250,128	21,693	202	14					
<b>Maintenance Assistance Status</b>																	
Cash	21,715	9,595	11,383	735	2	0	248,792	109,717	130,931	8,120	24	0					
Medically needy	2,912	704	2,202	6	0	0	31,372	6,625	24,681	66	0	0					
Poverty-related	13,997	7,507	6,471	11	5	3	158,180	85,092	72,919	126	29	14					
Other/unknown	8,505	4,503	2,678	1,310	14	0	85,311	41,466	30,232	13,464	149	0					
<b>Dual Medicare Status<sup>d</sup></b>																	
Full dual, all year	45,569	21,427	22,134	1,984	21	3	506,690	233,412	252,145	20,917	202	14					
Full dual, part year	1,560	882	600	78	0	0	16,965	9,488	6,618	859	0	0					
<b>Managed Care Status</b>																	
FFS all year	47,129	22,309	22,734	2,062	21	3	523,655	242,900	258,763	21,776	202	14					
FFS part year, with Rx claims	0	0	0	0	0	0	0	0	0	0	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 2002 file for Maine, released by CMS in 05/2006. This table was produced on 04/19/2007.

- 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 2002. 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, MAINE, 2002

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	92.5 %	49.7	\$2,587	\$52	\$14,067	18.4 %	47,129
<b>Age</b>							
5 and younger	100.0	27.0	718	27	14,943	4.8	3
6-14	100.0	45.8	4,604	101	19,341	23.8	4
15-20	90.0	23.9	2,220	93	17,600	12.6	90
21-44	89.5	37.5	2,809	75	15,800	17.8	9,927
45-64	93.0	53.8	3,177	59	14,587	21.8	11,823
65-74	90.6	50.7	2,362	47	9,337	25.3	9,632
75-84	94.1	54.9	2,284	42	12,856	17.8	8,988
85 and older	97.0	53.0	1,950	37	18,984	10.3	6,661
Unknown	0.0	0.0	0	0	0	0.0	1
<b>Basis of Eligibility<sup>c</sup></b>							
Aged	93.4	51.5	2,167	42	13,418	16.1	22,309
Disabled	92.2	49.4	3,030	61	15,451	19.6	22,734
Adults	87.3	35.1	2,285	65	5,849	39.1	2,062
Children	76.2	17.0	710	42	8,224	8.6	21
Unknown	100.0	15.3	655	43	37,081	1.8	3
<b>Gender</b>							
Female	95.2	54.8	2,654	48	14,159	18.7	28,269
Male	88.5	42.1	2,487	59	13,929	17.9	18,858
Unknown	50.0	1.5	64	42	114	55.7	2
<b>Race</b>							
White	92.6	49.9	2,595	52	14,144	18.3	46,395
African American	90.5	32.9	2,061	63	9,288	22.2	241
Other/unknown	87.4	42.4	2,125	50	9,176	23.2	493
<b>Use of Nursing Facilities<sup>d</sup></b>							
Entire year	98.6	65.9	2,657	40	37,161	7.1	4,342
Part year	97.9	66.1	2,734	41	22,183	12.3	3,592
None	91.4	46.5	2,566	55	10,764	23.8	39,195
<b>Maintenance Assistance Status</b>							
Cash	92.7	50.8	2,688	53	15,385	17.5	21,715
Medically needy	97.4	69.9	3,021	43	16,213	18.6	2,912
Poverty related	91.0	45.3	2,471	55	6,898	35.8	13,997
Other/unknown	93.0	47.6	2,373	50	21,762	10.9	8,505

Source: Data for this table are from the MAX 2002 file for Maine, released by CMS in 05/2006. This table was produced on 04/19/2007.

- 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, MAINE, 2002

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
<b>All</b>	<b>4.5</b>	<b>\$233</b>	<b>18.4 %</b>	<b>7.5 %</b>	<b>16.7 %</b>	<b>11.4 %</b>	<b>31.8 %</b>	<b>25.6 %</b>	<b>7.1 %</b>	<b>\$1,266</b>	<b>47,129</b>	<b>523,655</b>
<b>Age</b>												
5 and younger	2.9	77	4.8	0.0	33.3	0.0	66.7	0.0	0.0	1,601	3	28
6-14	3.8	384	23.8	0.0	0.0	25.0	50.0	25.0	0.0	1,612	4	48
15-20	2.1	198	12.6	10.0	42.2	17.8	23.3	4.4	2.2	1,573	90	1,007
21-44	3.3	248	17.8	10.5	26.4	14.4	28.8	16.3	3.6	1,397	9,927	112,276
45-64	4.7	279	21.8	7.0	16.3	11.2	31.1	26.3	8.1	1,281	11,823	134,605
65-74	4.5	209	25.3	9.4	15.1	10.8	31.4	26.5	7.0	825	9,632	109,006
75-84	5.0	209	17.8	5.9	12.2	10.2	33.1	29.8	8.9	1,174	8,988	98,403
85 and older	5.2	190	10.3	3.0	10.8	10.0	36.2	31.9	8.1	1,852	6,661	68,270
Unknown	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	0	1	12
<b>Basis of Eligibility<sup>c</sup></b>												
Aged	4.7	199	16.1	6.6	13.2	10.6	33.6	28.4	7.5	1,232	22,309	242,900
Disabled	4.3	266	19.6	7.8	19.3	11.9	30.2	23.9	7.0	1,358	22,734	258,763
Adults	3.3	216	39.1	12.7	24.2	15.2	29.2	15.4	3.3	554	2,062	21,776
Children	1.8	74	8.6	23.8	33.3	14.3	28.6	0.0	0.0	855	21	202
Unknown	3.3	140	1.8	0.0	0.0	33.3	66.7	0.0	0.0	7,946	3	14
<b>Gender</b>												
Female	4.9	238	18.7	4.8	13.5	11.2	33.4	29.0	8.1	1,271	28,269	314,886
Male	3.8	225	17.9	11.5	21.5	11.7	29.2	20.5	5.5	1,258	18,858	208,764
Unknown	0.6	25	55.7	50.0	0.0	50.0	0.0	0.0	0.0	46	2	5
<b>Race</b>												
White	4.5	233	18.3	7.4	16.5	11.4	31.8	25.7	7.1	1,272	46,395	515,816
African American	3.2	201	22.2	9.5	29.9	13.3	25.7	17.8	3.7	907	241	2,469
Other/unknown	3.9	195	23.2	12.6	21.5	11.0	28.4	21.3	5.3	842	493	5,370
<b>use or nursing Facilities<sup>d</sup></b>												
Entire year	6.6	267	7.1	1.4	6.4	7.2	29.8	38.5	16.7	3,733	4,342	43,229
Part year	6.5	271	12.3	2.1	6.3	7.7	32.3	36.3	15.3	2,197	3,592	36,274
None	4.1	227	23.8	8.6	18.7	12.2	31.9	23.2	5.2	950	39,195	444,152
<b>Maintenance Assistance Status</b>												
Cash	4.4	235	17.5	7.3	17.7	11.6	31.3	25.1	6.9	1,343	21,715	248,792
Medically needy	6.5	280	18.6	2.6	7.8	7.1	29.8	37.2	15.4	1,505	2,912	31,372
Poverty related	4.0	219	35.8	9.0	17.9	12.2	33.2	23.1	4.4	610	13,997	158,180
Other/unknown	4.7	237	10.9	7.0	14.8	11.2	31.1	27.0	9.0	2,170	8,505	85,311

Table D4

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2002 file for Maine, released by CMS in 05/2006. This table was produced on 04/19/2007.

- 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, MAINE, 2002**

Beneficiary Characteristics	All Rx		Patented Brand-Name Drugs		Off-Patent Brand-Name Drugs		Generic Drugs	
	No. of Rx	Rx \$	No. of Rx	\$ per Rx	No. of Rx	Rx \$	No. of Rx	Rx \$
<b>All</b>	<b>4.5</b>	<b>\$233</b>	<b>2.0</b>	<b>\$179</b>	<b>0.3</b>	<b>\$16</b>	<b>2.2</b>	<b>\$37</b>
<b>Age</b>								
5 and younger	2.9	77	1.5	56	0.0	1	1.4	20
6-14	3.8	384	1.0	215	0.9	98	1.9	71
15-20	2.1	198	1.0	163	0.2	19	0.9	16
21-44	3.3	248	1.5	196	0.2	17	1.6	35
45-64	4.7	279	2.2	217	0.3	19	2.2	43
65-74	4.5	209	2.0	160	0.3	15	2.1	34
75-84	5.0	209	2.1	158	0.4	15	2.5	36
85 and older	5.2	190	2.0	141	0.4	13	2.8	36
Unknown	0.0	0	0.0	0	0.0	0	0.0	0
<b>Basis of Eligibility<sup>d</sup></b>								
Aged	4.7	199	2.0	150	0.4	14	2.4	35
Disabled	4.3	266	2.0	208	0.3	18	2.1	40
Adults	3.3	216	1.5	169	0.2	15	1.6	32
Children	1.8	74	0.7	49	0.1	5	1.0	20
Unknown	3.3	140	1.3	107	0.2	15	1.8	19
<b>Gender</b>								
Female	4.9	238	2.2	183	0.4	17	2.4	38
Male	3.8	225	1.6	173	0.3	15	1.9	36
Unknown	0.6	25	0.2	23	0.0	0	0.4	2
<b>Race</b>								
White	4.5	233	2.0	180	0.3	16	2.2	37
African American	3.2	201	1.4	143	0.3	11	1.5	47
Other/unknown	3.9	195	1.7	146	0.4	19	1.8	30
<b>Use of Nursing Facilities<sup>e</sup></b>								
Entire year	6.6	267	2.6	198	0.5	17	3.5	52
Part year	6.5	271	2.6	205	0.5	17	3.4	47
None	4.1	227	1.8	175	0.3	16	1.9	35
<b>Maintenance Assistance Status</b>								
Cash	4.4	235	1.9	181	0.3	16	2.2	37
Medically needy	6.5	280	2.7	214	0.5	17	3.3	49
Poverty related	4.0	219	1.8	170	0.3	16	1.9	33
Other/unknown	4.7	237	2.0	180	0.3	16	2.4	40

Source: Data for this table are from the MAX 2002 file for Maine, released by CMS in 05/2006. This table was produced on 04/19/2007.

- 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 Maine, 0.4 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](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, MAINE, 2002

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 Rx	Total Rx \$	No. Dual Benes	As % of Bene Mos				
														Generic	Generic	Generic	Generic
Anti-infective Agents	0.3	0.2	0.0	0.2	\$20	\$17	\$1	\$2	\$61	\$107	\$74	\$14	92,066	\$5,633,952	24,780	52.6 %	281,724
Biologics	0.2	0.1	0.0	0.1	173	6	0	167	1113	63	2,667	0	320	356,025	178	0.4	2,059
Antineoplastic Agents	0.6	0.3	0.0	0.3	115	94	5	16	195	315	172	61	9,443	1,844,711	1,465	3.1	16,041
Endocrine/Metabolic Drugs	1.0	0.5	0.2	0.4	40	30	4	6	38	63	25	14	250,901	9,538,605	21,203	45.0	240,513
Cardiovascular Agents	1.8	0.6	0.2	1.0	55	37	6	12	31	61	35	12	575,318	18,106,970	29,112	61.8	327,908
Respiratory Agents	0.8	0.5	0.0	0.3	43	35	3	6	52	70	69	20	159,438	8,278,405	16,998	36.1	192,877
Gastrointestinal Agents	0.8	0.5	0.0	0.3	56	50	1	5	74	107	115	17	164,966	12,135,683	19,049	40.4	215,650
Genitourinary Agents	0.5	0.4	0.0	0.1	28	26	0	1	56	66	35	16	36,208	2,045,124	6,433	13.6	73,200
CNS Drugs	1.4	0.7	0.1	0.6	92	73	6	14	66	104	99	21	439,761	29,193,383	28,242	59.9	316,764
Stimulants/Anti-obesity/Anorexia	0.6	0.2	0.1	0.3	42	29	4	9	75	123	80	32	5,520	412,191	861	1.8	9,837
Miscellaneous Psychological/Neurological Agents	0.4	0.3	0.0	0.1	43	37	0	6	119	134	0	68	16,466	1,957,483	3,999	8.5	45,482
Analgesics and Anesthetics	0.8	0.3	0.0	0.5	47	35	3	9	56	129	66	18	237,789	13,354,394	25,244	53.6	283,260
Neuromuscular Agents	1.0	0.4	0.1	0.5	62	48	4	10	62	112	63	20	160,748	10,011,489	14,130	30.0	160,672
Nutritional Products	0.6	0.0	0.0	0.6	10	0	1	9	17	19	18	17	38,154	640,695	5,717	12.1	63,020
Hematological Agents	0.8	0.2	0.1	0.5	54	46	2	6	69	282	16	12	59,486	4,125,210	6,837	14.5	75,934
Topical Products	0.4	0.2	0.0	0.2	14	10	1	3	34	55	41	16	85,380	2,903,932	18,033	38.3	206,338
Miscellaneous Products	0.7	0.2	0.2	0.3	161	102	48	12	216	431	237	38	5,652	1,223,077	684	1.5	7,588
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	8	0	0	0	26	0	0	0	6,694	173,645	1,905	4.0	21,377
<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.	2,344,310	121,934,974	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2002 file for Maine, released by CMS in 05/2006. This table was produced on 04/19/2007.

- 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 2002. 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](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 Maine, 0.4 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](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<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, MAINE, 2002

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	\$14,806,317	13,916	29.5 %	156,436	0.8	\$121	\$95
ANTIDEPRESSANTS	12,185,250	27,900	59.2	315,989	0.7	57	39
ULCER DRUGS	10,669,981	19,887	42.2	226,304	0.6	77	47
ANTICONVULSANT	8,405,981	12,496	26.5	142,817	0.8	72	59
ANALGESICS - Narcotic	7,884,209	29,450	62.5	331,269	0.5	52	24
ANTHYPERLIPIDEMIC	7,673,987	12,358	26.2	143,666	0.7	75	53
ANTIASTHMATIC	6,165,849	20,884	44.3	236,749	0.5	53	26
ANTIDIABETIC	5,913,836	14,072	29.9	160,240	0.7	51	37
ANALGESICS - ANTI-INFLAMMATORY	4,566,389	14,262	30.3	165,431	0.4	67	28
ANTHYPERTENSIVE	3,889,325	16,167	34.3	184,338	0.7	30	21
Total	82,161,024	181,392		2,063,239	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2002 file for Maine, released by CMS in 05/2006. This table was produced on 04/19/2007.

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 2002. 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 2002. 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, MAINE, 2002

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 \$
<b>All</b>	<b>1,274,670</b>	<b>\$82,161,024</b>	<b>13,916</b>	<b>29.5 %</b>	<b>156,436</b>	<b>0.8</b>	<b>\$95</b>	<b>27,900</b>	<b>59.2 %</b>	<b>315,989</b>	<b>0.7</b>	<b>\$39</b>
<b>Female</b>	802,582	49,764,267	8,143	28.8	91,581	0.7	82	18,278	64.7	207,364	0.7	39
<b>Disabled</b>	370,529	25,581,538	4,305	37.9	50,208	0.8	96	9,592	84.5	111,282	0.7	41
5 and younger	23	987	0	0.0	0	0.0	0	1	33.3	4	0.8	56
6-14	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	431	32,413	6	17.1	63	0.5	31	16	45.7	177	0.6	56
21-44	102,138	7,798,132	1,703	46.9	19,906	0.7	97	3,286	90.4	38,230	0.6	41
45-64	204,514	14,176,722	2,005	35.2	23,469	0.8	100	5,074	89.2	59,088	0.7	41
65-74	23,159	1,474,592	192	27.6	2,229	0.9	95	401	57.7	4,565	0.7	42
75-84	20,487	1,081,101	213	37.2	2,402	0.8	79	400	69.8	4,451	0.9	44
85 and older	19,777	1,017,591	186	25.7	2,139	0.7	63	414	57.1	4,767	0.8	41
<b>Other Eligibles</b>	432,053	24,182,729	3,838	22.7	41,373	0.7	64	8,686	51.4	96,082	0.7	36
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	9	142	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	67	3,267	1	14.3	12	0.1	1	3	42.9	36	0.3	16
21-44	15,329	1,062,502	215	32.9	2,445	0.5	55	681	104.3	7,795	0.5	37
45-64	5,376	319,724	47	23.0	494	0.7	60	173	84.8	1,896	0.7	41
65-74	155,592	9,168,002	887	16.3	10,089	0.7	77	2,562	47.1	29,562	0.7	34
75-84	153,323	8,463,442	1,285	21.9	13,861	0.7	65	2,769	47.1	30,682	0.7	36
85 and older	102,357	5,165,650	1,403	29.7	14,472	0.6	56	2,498	52.8	26,111	0.8	39
<b>Male</b>	472,086	32,396,635	5,773	30.6	64,855	0.9	113	9,622	51.0	108,625	0.6	38
<b>Disabled</b>	299,200	22,644,405	4,238	37.3	49,046	0.9	127	6,468	56.9	74,824	0.6	39
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	9	129	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	658	54,401	28	70.0	325	0.5	62	26	65.0	307	0.4	28
21-44	108,806	9,301,982	2,218	44.6	25,704	0.9	131	2,858	57.5	33,167	0.6	39
45-64	163,845	11,788,431	1,753	32.0	20,349	1.0	130	3,184	58.1	36,882	0.6	38
65-74	12,962	836,416	102	22.2	1,149	0.8	121	161	35.1	1,811	0.8	47
75-84	7,863	400,529	76	31.3	854	0.7	60	132	54.3	1,465	0.9	45
85 and older	5,057	262,517	61	34.1	665	0.7	63	107	59.8	1,192	0.8	44
<b>Other Eligibles</b>	172,886	9,752,230	1,535	20.5	15,809	0.7	68	3,154	42.2	33,801	0.7	35
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	120	5,623	3	37.5	36	0.1	15	6	75.0	67	0.3	13
21-44	12,844	1,019,885	124	18.5	1,322	0.5	83	440	65.8	4,883	0.5	34
45-64	10,438	688,339	43	9.7	500	0.6	67	254	57.1	2,865	0.6	36
65-74	72,434	4,083,469	457	15.1	5,055	0.7	76	996	32.8	11,172	0.6	33
75-84	55,955	2,929,995	569	24.7	5,698	0.7	66	962	41.8	10,087	0.7	37
85 and older	21,095	1,024,919	339	33.0	3,198	0.6	56	496	48.3	4,727	0.8	37
<b>Unknown</b>	2	122	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2002 file for Maine, released by CMS in 05/2006. This table was produced on 04/19/2007.

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 2002. 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 2002. 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, MAINE, 2002

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 \$
<b>All</b>	19,887	42.2 %	226,304	0.6	\$47	12,496	26.5 %	142,817	0.8	\$59	29,450	62.5 %	331,269	0.5	\$24
<b>Female</b>	12,905	45.7	146,967	0.6	47	7,329	25.9	83,887	0.8	56	18,406	65.1	206,996	0.4	21
<b>Disabled</b>	5,368	47.3	62,301	0.6	50	4,654	41.0	54,045	0.8	65	8,702	76.6	101,042	0.5	24
5 and younger	2	66.7	16	0.5	23	0	0.0	0	0.0	0	2	66.7	16	0.7	25
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	9	25.7	108	0.5	45	11	31.4	123	1.1	111	27	77.1	279	0.3	4
21-44	1,370	37.7	16,074	0.5	43	2,038	56.1	23,712	0.8	71	3,065	84.3	35,795	0.4	21
45-64	3,020	53.1	35,099	0.6	52	2,284	40.1	26,501	0.8	62	4,529	79.6	52,726	0.5	26
65-74	337	48.5	3,832	0.7	55	145	20.9	1,665	0.9	57	378	54.4	4,267	0.4	20
75-84	291	50.8	3,287	0.7	48	103	18.0	1,207	0.8	33	307	53.6	3,448	0.6	18
85 and older	339	46.8	3,885	0.8	50	73	10.1	837	0.9	36	394	54.3	4,511	0.5	21
<b>Other Eligibles</b>	7,537	44.6	84,666	0.6	46	2,675	15.8	29,842	0.8	40	9,704	57.4	105,954	0.4	18
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	100.0	12	0.5	6	0	0.0	0	0.0	0	1	100.0	12	0.1	0
15-20	2	28.6	24	0.3	24	1	14.3	12	0.2	9	5	71.4	60	0.1	1
21-44	244	37.4	2,827	0.4	33	328	50.2	3,694	0.7	61	710	108.7	8,134	0.4	21
45-64	69	33.8	792	0.6	48	67	32.8	786	0.9	62	173	84.8	1,965	0.4	17
65-74	2,514	46.2	29,222	0.6	48	864	15.9	9,993	0.8	40	2,953	54.2	34,265	0.4	17
75-84	2,622	44.6	29,614	0.6	47	850	14.5	9,412	0.8	35	3,169	54.0	34,860	0.4	18
85 and older	2,085	44.1	22,175	0.7	43	565	11.9	5,945	0.8	30	2,693	56.9	26,658	0.5	18
<b>Male</b>	6,981	37.0	79,335	0.6	47	5,167	27.4	58,930	0.8	63	11,043	58.6	124,271	0.5	29
<b>Disabled</b>	4,022	35.4	46,766	0.6	48	3,865	34.0	44,781	0.8	69	6,955	61.1	80,485	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	2	100.0	24	0.3	5	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	15	37.5	170	0.4	27	14	35.0	156	0.7	102	24	60.0	279	0.2	1
21-44	1,400	28.2	16,400	0.5	42	1,978	39.8	22,997	0.8	72	3,100	62.4	36,011	0.4	31
45-64	2,221	40.5	25,894	0.6	51	1,719	31.4	19,959	0.8	67	3,469	63.3	40,207	0.5	35
65-74	183	39.9	2,032	0.7	51	93	20.3	1,002	0.9	43	208	45.3	2,298	0.4	29
75-84	120	49.4	1,321	0.8	55	42	17.3	462	0.8	34	89	36.6	1,022	0.5	18
85 and older	81	45.3	925	0.8	54	19	10.6	205	1.1	45	65	36.3	668	0.4	12
<b>Other Eligibles</b>	2,959	39.6	32,569	0.6	46	1,302	17.4	14,149	0.8	45	4,088	54.6	43,786	0.5	23
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	3	37.5	34	0.2	18	5	62.5	58	0.8	52	6	75.0	70	0.4	6
21-44	191	28.6	2,180	0.5	44	233	34.8	2,576	0.6	52	617	92.2	6,943	0.6	51
45-64	192	43.1	2,229	0.5	42	103	23.1	1,196	0.7	58	373	83.8	4,268	0.5	34
65-74	1,184	39.0	13,493	0.6	46	453	14.9	5,084	0.8	46	1,456	48.0	16,526	0.4	16
75-84	932	40.5	10,135	0.6	47	381	16.6	4,008	0.8	41	1,086	47.2	11,042	0.4	14
85 and older	457	44.5	4,498	0.7	45	127	12.4	1,227	0.8	31	550	53.6	4,937	0.5	13
<b>Unknown</b>	1	33.3	2	0.5	58	0	0.0	0	0.0	0	1	33.3	2	0.5	3

Table D7B

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2002 file for Maine, released by CMS in 05/2006. This table was produced on 04/19/2007.

- 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 2002. 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 2002. 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, MAINE, 2002

Beneficiary Characteristics	ANTHYPERLIPIDEMIC					ANTIASTHMATIC					ANTIDIABETIC				
	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>12,358</b>	<b>26.2 %</b>	<b>143,666</b>	<b>0.7</b>	<b>\$53</b>	<b>20,984</b>	<b>44.3 %</b>	<b>236,749</b>	<b>0.5</b>	<b>\$26</b>	<b>14,072</b>	<b>29.9 %</b>	<b>160,240</b>	<b>0.7</b>	<b>\$37</b>
<b>Female</b>	7,655	27.1	89,182	0.7	54	13,147	46.5	149,400	0.5	25	8,856	31.3	100,992	0.7	36
<b>Disabled</b>	2,937	25.9	34,322	0.7	53	5,760	50.7	66,845	0.5	25	3,173	27.9	36,674	0.7	42
5 and younger	0	0.0	0	0.0	0	1	33.3	12	0.1	1	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	2.9	12	0.3	12	7	20.0	84	0.1	4	0	0.0	0	0.0	0
21-44	418	11.5	4,888	0.6	43	1,540	42.4	18,015	0.4	18	500	13.8	5,821	0.7	42
45-64	1,967	34.6	23,157	0.7	54	3,216	56.5	37,459	0.5	26	1,986	34.9	23,104	0.7	43
65-74	307	44.2	3,504	0.8	60	350	50.4	3,989	0.6	31	352	50.6	4,005	0.8	45
75-84	157	27.4	1,792	0.8	57	324	56.5	3,612	0.7	34	202	35.3	2,228	0.9	33
85 and older	87	12.0	969	0.8	50	322	44.4	3,674	0.6	30	133	18.3	1,516	0.9	31
<b>Other Eligibles</b>	4,718	27.9	54,860	0.7	55	7,387	43.7	82,555	0.5	26	5,683	33.6	64,318	0.7	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	0	0.0	0	0.0	0	5	71.4	60	0.6	32	0	0.0	0	0.0	0
21-44	50	7.7	561	0.5	34	277	42.4	3,193	0.3	17	58	8.9	573	0.6	39
45-64	37	18.1	415	0.7	49	82	40.2	871	0.5	25	46	22.5	490	0.6	36
65-74	2,321	42.6	27,335	0.7	56	2,892	53.1	33,445	0.5	29	2,485	45.6	28,889	0.7	36
75-84	1,841	31.3	21,299	0.8	56	2,589	44.1	28,860	0.5	27	2,131	36.3	23,934	0.7	32
85 and older	469	9.9	5,250	0.7	49	1,542	32.6	16,126	0.5	20	963	20.4	10,432	0.7	26
<b>Male</b>	4,703	24.9	54,484	0.7	52	7,737	41.0	87,349	0.5	27	5,216	27.7	59,248	0.7	38
<b>Disabled</b>	2,775	24.4	32,376	0.7	51	3,944	34.7	45,695	0.5	28	2,754	24.2	31,819	0.7	42
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	2.5	11	0.7	47	8	20.0	96	0.2	7	4	10.0	48	0.9	53
21-44	638	12.8	7,419	0.6	43	1,096	22.1	12,840	0.4	21	596	12.0	6,854	0.7	41
45-64	1,872	34.1	21,983	0.7	53	2,315	42.2	26,893	0.5	29	1,807	33.0	21,040	0.7	43
65-74	166	36.2	1,886	0.7	60	277	60.3	3,108	0.7	38	197	42.9	2,237	0.8	43
75-84	69	28.4	775	0.8	48	157	64.6	1,748	0.7	37	108	44.4	1,186	0.7	27
85 and older	29	16.2	302	0.8	45	91	50.8	1,010	0.7	37	42	23.5	454	0.9	34
<b>Other Eligibles</b>	1,928	25.8	22,108	0.7	53	3,793	50.7	41,654	0.5	27	2,462	32.9	27,429	0.7	34
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	98	14.6	1,124	0.5	39	164	24.5	1,866	0.4	16	88	13.2	980	0.5	30
45-64	157	35.3	1,811	0.6	47	156	35.1	1,812	0.4	26	132	29.7	1,444	0.6	38
65-74	1,014	33.4	11,747	0.7	56	1,611	53.1	18,399	0.6	30	1,193	39.3	13,684	0.7	35
75-84	558	24.3	6,373	0.7	53	1,339	58.2	14,457	0.5	26	782	34.0	8,608	0.7	33
85 and older	101	9.8	1,053	0.7	44	523	51.0	5,120	0.5	22	267	26.0	2,713	0.7	26
<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 2002 file for Maine, released by CMS in 05/2006. This table was produced on 04/19/2007.

- 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 2002. 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 2002. 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, MAINE, 2002

Beneficiary Characteristics	ANALGESICS - ANTI-INFLAMMATORY					ANTIHYPERTENSIVE						
	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>14,282</b>	<b>30.3 %</b>	<b>165,431</b>	<b>0.4</b>	<b>\$28</b>	<b>16,167</b>	<b>34.3 %</b>	<b>184,338</b>	<b>0.7</b>	<b>\$21</b>	<b>47,129</b>	<b>523,655</b>
<b>Female</b>	9,366	33.1	108,534	0.4	31	10,317	36.5	117,680	0.7	22	28,269	314,886
<b>Disabled</b>	4,616	40.6	53,997	0.4	27	2,983	26.3	34,490	0.7	21	11,356	129,558
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	28
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12
15-20	10	28.6	111	0.2	3	2	5.7	24	0.5	5	35	384
21-44	1,528	42.0	17,877	0.3	16	373	10.3	4,316	0.6	16	3,634	41,637
45-64	2,492	43.8	29,220	0.4	31	1,762	31.0	20,562	0.7	22	5,690	65,339
65-74	210	30.2	2,453	0.5	35	320	46.0	3,609	0.7	21	695	7,757
75-84	186	32.5	2,145	0.5	34	251	43.8	2,829	0.8	24	573	6,276
85 and older	190	26.2	2,191	0.6	40	275	37.9	3,150	0.8	23	725	8,125
<b>Other Eligibles</b>	4,750	28.1	54,537	0.5	35	7,334	43.4	83,190	0.7	23	16,913	185,328
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	100.0	12	0.2	5	1	12
15-20	2	28.6	24	0.1	2	0	0.0	0	0.0	0	7	75
21-44	286	43.8	3,291	0.3	13	54	8.3	607	0.5	13	653	7,082
45-64	83	40.7	931	0.4	23	48	23.5	551	0.7	19	204	2,106
65-74	1,756	32.3	20,581	0.5	37	2,648	48.6	30,814	0.7	23	5,444	62,338
75-84	1,613	27.5	18,588	0.5	36	2,759	47.0	31,506	0.7	23	5,873	65,241
85 and older	1,010	21.3	11,122	0.5	39	1,824	38.6	19,700	0.8	22	4,731	48,474
<b>Male</b>	4,896	26.0	56,897	0.4	21	5,850	31.0	66,658	0.7	19	18,857	208,752
<b>Disabled</b>	3,172	27.9	37,172	0.3	18	2,833	24.9	32,816	0.7	20	11,376	129,191
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	50.0	12	0.1	1	2	24
15-20	7	17.5	84	0.2	2	7	17.5	80	0.5	12	40	462
21-44	1,264	25.4	14,765	0.3	12	644	13.0	7,458	0.6	18	4,970	56,617
45-64	1,705	31.1	20,109	0.4	22	1,795	32.7	20,937	0.7	20	5,483	62,487
65-74	112	24.4	1,250	0.4	23	180	39.2	2,057	0.8	22	459	4,956
75-84	50	20.6	587	0.5	32	118	48.6	1,312	0.8	19	243	2,674
85 and older	34	19.0	377	0.6	41	88	49.2	960	0.8	21	179	1,971
<b>Other Eligibles</b>	1,724	23.0	19,725	0.4	27	3,017	40.3	33,842	0.7	19	7,481	79,561
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	3	37.5	36	0.4	3	0	0.0	0	0.0	0	8	86
21-44	226	33.8	2,579	0.3	15	89	13.3	1,019	0.6	18	669	6,938
45-64	133	29.9	1,555	0.4	20	137	30.8	1,518	0.6	17	445	4,670
65-74	727	24.0	8,494	0.4	27	1,345	44.3	15,534	0.7	20	3,034	33,955
75-84	453	19.7	5,155	0.5	33	1,061	46.2	11,908	0.7	18	2,299	24,212
85 and older	182	17.7	1,906	0.5	37	385	37.5	3,863	0.7	16	1,026	9,700
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	17

Table D7D

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2002 file for Maine, released by CMS in 05/2006. This table was produced on 04/19/2007.

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 2002. 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 2002. 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, MAINE, 2002

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>\$267</b>	<b>6.6</b>	<b>4,342</b>	<b>43,229</b>
<b>Age</b>				
0-64	381	7.9	252	2,807
65-74	337	7.7	496	5,071
75-84	295	7.1	1,426	14,121
85 and older	216	5.8	2,168	21,230
Unknown	0	0.0	0	0
<b>Gender</b>				
Female	254	6.4	3,241	32,878
Male	308	7.2	1,101	10,351
Unknown	0	0.0	0	0
<b>Race</b>				
White	267	6.6	4,315	43,006
African American	245	5.9	14	110
Other/unknown	264	8	13	113
<b>Basis of Eligibility<sup>c</sup></b>				
Aged	259	6.5	4,077	40,337
Disabled	383	7.9	265	2,892
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 2002 file for Maine, released by CMS in 05/2006. This table was produced on 04/19/2007.

a. Table D.8 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their 2002 Medicaid enrollment. A total of 3,592 beneficiaries who were in nursing facilities for part of their enrollment and their 36,274 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, MAINE, 2002

Therapeutic Category	No. of Rx per Bene Mo among Users										\$ per Bene Mo among Users										Total Rx \$		Users											
	Patented					Off-Patent					Generic					Patented					Off-Patent					Generic					Total # of Rx	No.	As % of Dual All-Year NF Residents	No. of Bene Mos
	Total	Brand-Name	Off-Patent	Brand-Name	Generic	Total	Brand-Name	Off-Patent	Brand-Name	Generic	Total	Brand-Name	Off-Patent	Brand-Name	Generic	Total	Brand-Name	Off-Patent	Brand-Name	Generic	Total Rx \$	No.	As % of Dual All-Year NF Residents	No. of Bene Mos										
Anti-infective Agents	0.5	0.2	0.0	0.2	\$17	\$14	\$2	\$2	\$2	\$10	\$36	\$56	\$48	\$10	14,463	2,905	\$520,147	66.9 %	30,324															
Biologics	0.1	0.0	0.0	0.1	3	2	0	1	17	0	32	103	0	17	23	22	735	0.5	257															
Antineoplastic Agents	0.7	0.2	0.0	0.4	104	60	4	39	266	167	149	266	167	88	1,263	185	187,941	4.3	1,808															
Endocrine/Metabolic Drugs	1.3	0.5	0.1	0.7	39	29	3	7	56	22	30	56	22	11	27,603	2,035	824,450	46.9	21,012															
Cardiovascular Agents	2.0	0.4	0.2	1.5	40	18	6	16	50	29	20	50	29	11	61,325	2,996	1,196,966	69.0	30,275															
Respiratory Agents	0.8	0.4	0.0	0.4	34	24	3	8	64	58	43	64	58	20	12,678	1,557	539,099	35.9	15,931															
Gastrointestinal Agents	1.0	0.5	0.0	0.5	56	48	0	8	92	64	57	92	64	17	19,942	1,977	1,133,655	45.5	20,228															
Genitourinary Agents	0.6	0.5	0.0	0.2	31	27	1	3	61	34	48	61	34	18	6,213	891	299,193	20.5	9,562															
CNS Drugs	1.7	1.0	0.1	0.6	101	85	4	11	87	65	60	87	65	18	58,625	3,391	3,489,867	78.1	34,580															
Stimulants/Anti-obesity/Anorexia	0.7	0.2	0.0	0.5	23	16	1	7	102	25	33	102	25	13	254	38	8,508	0.9	375															
Miscellaneous Psychological/Neurological Agents	0.8	0.8	0.0	0.0	88	87	0	1	114	0	112	114	0	43	2,842	364	319,292	8.4	3,635															
Analgesics and Anesthetics	1.0	0.4	0.1	0.5	46	38	2	6	92	30	46	92	30	11	22,603	2,349	1,039,014	54.1	22,693															
Neuromuscular Agents	1.4	0.5	0.1	0.8	68	37	9	23	77	75	49	77	75	29	20,529	1,424	1,005,367	32.8	14,839															
Nutritional Products	0.8	0.0	0.0	0.8	11	0	0	11	7	18	14	7	18	14	7,664	960	109,321	22.1	9,694															
Hematological Agents	1.3	0.2	0.3	0.8	40	31	3	6	156	11	31	156	11	8	13,441	1,013	416,473	23.3	10,303															
Topical Products	0.5	0.2	0.0	0.3	15	10	1	5	50	36	27	50	36	14	14,796	2,490	405,175	57.3	26,906															
Miscellaneous Products	0.3	0.0	0.0	0.3	8	3	0	5	75	0	26	75	0	18	383	121	9,854	2.8	1,251															
Unknown Therapeutic Category	0.4	0.0	0.0	0.0	8	0	0	0	0	0	22	0	0	0	1,352	354	29,514	8.2	3,637															
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.	n.a.	n.a.	285,999	n.a.	11,534,571	n.a.	n.a.															

Source: Data for this table are from the MAX 2002 file for Maine, released by CMS in 05/2006. This table was produced on 04/19/2007.

- 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 2002. A total of 3,592 beneficiaries who were in nursing facilities for part of their enrollment and their 36,274 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 2002. 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 Maine, 0.4 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, MAINE, 2002

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	\$1,722,740	2,101	48.4 %	21,800	0.8	\$98	\$79	
ANTIDEPRESSANTS	1,576,811	3,093	71.2	32,328	0.9	53	49	
ULCER DRUGS	1,056,233	2,003	46.1	20,666	0.8	63	51	
ANTICONVULSANT	634,832	1,208	27.8	12,772	1.1	47	50	
ANALGESICS - Narcotic	594,011	2,350	54.1	22,090	0.7	39	27	
ANTIDIABETIC	490,942	1,366	31.5	14,427	0.9	39	34	
ANALGESICS - ANTI-INFLAMMATORY	419,060	791	18.2	8,442	0.7	73	50	
ANTIASTHMATIC	397,147	1,788	41.2	18,273	0.5	42	22	
ANTIPARKINSONIAN	327,367	554	12.8	5,731	0.9	60	57	
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	319,777	364	8.4	3,666	0.8	112	87	
<b>Total</b>	<b>7,538,920</b>	<b>15,618</b>		<b>160,195</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	

Source: Data for this table are from the MAX 2002 file for Maine, released by CMS in 05/2006. This table was produced on 04/19/2007.

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 2002. A total of 3,592 beneficiaries who were in nursing facilities for part of their enrollment and their 36,274 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 2002. 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 2002 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, MAINE, 2002

Beneficiary Characteristics	All Top 10 Drug Groups					ANTIPSYCHOTICS					ANTIDEPRESSANTS				
	No. of Rx	Rx \$	No. of Users	Mean No. of Rx	Mean Rx \$	Users as % of All-Year Residents	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	Users as % of All-Year Residents	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$		
<b>All</b>	<b>128,814</b>	<b>\$7,538,920</b>	<b>2,101</b>	<b>48.4 %</b>	<b>21,800</b>	<b>0.8</b>	<b>3,093</b>	<b>71.2 %</b>	<b>32,328</b>	<b>0.9</b>	<b>\$49</b>				
<b>Female</b>	92,590	5,409,955	1,510	46.6	15,962	0.8	2,308	71.2	24,347	0.9	48				
<b>Disabled</b>	6,593	444,624	90	59.6	1,009	0.9	132	87.4	1,516	1.0	58				
64 or younger	6,229	418,801	86	61.0	964	0.9	124	87.9	1,431	1.0	58				
65-74	126	14,153	1	20.0	9	1.3	3	60.0	33	1.2	70				
75-84	192	9,058	3	100.0	36	0.4	4	133.3	48	1.0	43				
85 and older	46	2,612	0	0.0	0	0.0	1	50.0	4	1.8	137				
<b>Other Eligibles</b>	85,997	4,965,331	1,420	46.0	14,953	0.8	2,176	70.4	22,831	0.9	47				
64 or younger	0	0	0	0.0	0	0.0	0	0.0	0	0.0	0				
65-74	12,103	729,995	174	57.6	1,878	0.9	255	84.4	2,731	1.0	51				
75-84	31,104	1,804,260	511	53.2	5,420	0.8	706	73.5	7,393	0.9	47				
85 and older	42,790	2,431,076	735	40.2	7,655	0.7	1,215	66.5	12,707	0.9	46				
<b>Male</b>	36,224	2,128,965	591	53.7	5,838	0.9	785	71.3	7,981	1.0	53				
<b>Disabled</b>	5,012	322,400	64	56.1	740	1.0	111	97.4	1,272	0.9	53				
64 or younger	4,963	317,163	63	56.8	728	1.0	110	99.1	1,260	0.9	54				
65-74	44	5,021	1	50.0	12	0.8	1	50.0	12	1.0	6				
75-84	5	216	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				
<b>Other Eligibles</b>	31,212	1,806,565	527	53.4	5,098	0.8	674	68.3	6,709	1.0	52				
64 or younger	0	0	0	0.0	0	0.0	0	0.0	0	0.0	0				
65-74	7,351	436,839	118	63.1	1,238	0.8	128	68.4	1,294	1.0	57				
75-84	15,679	915,989	242	52.4	2,296	0.9	328	71.0	3,357	1.0	50				
85 and older	8,182	453,737	167	49.4	1,564	0.8	218	64.5	2,058	1.0	53				
<b>Unknown</b>	0	0	0	0.0	0	0.0	0	0.0	0	0.0	0				

Source: Data for this table are from the MAX 2002 file for Maine, released by CMS in 05/2006. This table was produced on 04/19/2007.

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 2002. A total of 3,592 beneficiaries who were in nursing facilities for part of their enrollment and their 36,274 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 2002. 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 2002 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, MAINE, 2002

Beneficiary Characteristics	ULCER DRUGS						ANTICONVULSANT						ANALGESICS - Narcotic						
	Users as %			Users as %			Users as %			Users as %			Users as %			Users as %			
	No. of Users	No. of Bene Users	Mean No. of Rx	No. of Users	No. of Bene Users	Mean No. of Rx	No. of Users	No. of Bene Users	Mean No. of Rx	No. of Users	No. of Bene Users	Mean No. of Rx	No. of Users	No. of Bene Users	Mean No. of Rx	No. of Users	No. of Bene Users	Mean No. of Rx	
<b>All</b>	<b>2,003</b>	<b>20,666</b>	<b>0.8</b>	<b>1,208</b>	<b>12,772</b>	<b>1.1</b>	<b>2,350</b>	<b>22,090</b>	<b>54.1</b>	<b>2,350</b>	<b>22,090</b>	<b>0.7</b>	<b>2,350</b>	<b>22,090</b>	<b>0.7</b>	<b>2,350</b>	<b>22,090</b>	<b>0.7</b>	<b>\$27</b>
<b>Female</b>	1,504	15,699	0.8	840	8,936	1.0	1,785	17,212	55.1	1,785	17,212	0.7	1,785	17,212	0.7	1,785	17,212	0.7	28
<b>Disabled</b>	70	787	0.8	104	1,143	1.3	80	843	53.0	80	843	0.8	80	843	0.8	80	843	0.8	49
64 or younger	66	750	0.8	101	1,118	1.3	74	787	52.5	74	787	0.8	74	787	0.8	74	787	0.8	52
65-74	1	9	0.2	1	9	1.1	1	12	20.0	1	12	0.2	1	12	0.2	1	12	0.2	2
75-84	2	24	1.0	1	33.3	0.4	6	36	100.0	2	36	0.7	6	36	0.7	6	36	0.7	14
85 and older	1	4	1.5	1	50.0	1.5	159	8	100.0	4	8	0.8	159	8	0.8	159	8	0.8	6
<b>Other Eligibles</b>	1,434	14,912	0.8	736	7,793	1.0	41	16,369	55.2	41	16,369	0.7	41	16,369	0.7	41	16,369	0.7	27
64 or younger	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0
65-74	141	1,507	0.8	160	1,740	1.1	49	1,669	53.0	160	1,669	0.8	49	1,669	0.8	160	1,669	0.8	34
75-84	463	4,790	0.8	303	3,194	1.0	41	5,443	58.2	303	5,443	0.7	41	5,443	0.7	303	5,443	0.7	30
85 and older	830	8,615	0.8	273	2,859	0.9	34	9,257	53.9	273	9,257	0.6	34	9,257	0.6	273	9,257	0.6	24
<b>Male</b>	499	4,967	0.9	368	3,836	1.1	59	4,878	51.3	368	4,878	0.7	59	4,878	0.7	368	4,878	0.7	22
<b>Disabled</b>	57	632	0.8	80	914	1.4	80	650	52.6	80	650	1.0	80	650	1.0	80	650	1.0	36
64 or younger	55	617	0.7	79	913	1.4	80	636	51.4	79	913	1.0	80	636	1.0	79	913	1.0	36
65-74	1	12	1.0	1	50.0	1.0	32	14	150.0	1	14	0.6	32	14	0.6	1	14	0.6	9
75-84	1	3	1.3	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	0.0	0
<b>Other Eligibles</b>	442	4,335	0.9	288	2,922	1.1	52	4,228	51.2	288	4,228	0.7	52	4,228	0.7	288	4,228	0.7	20
64 or younger	0	0	0.0	0	0.0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0
65-74	99	1,029	0.9	90	962	1.1	54	867	48.7	90	962	0.8	54	867	0.8	90	962	0.8	27
75-84	205	2,031	0.9	145	1,459	1.0	54	2,047	52.8	145	2,047	0.7	54	2,047	0.7	145	2,047	0.7	24
85 and older	138	1,275	0.8	53	501	1.1	41	1,314	50.3	53	1,314	0.6	41	1,314	0.6	138	1,314	0.6	11
<b>Unknown</b>	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0

Source: Data for this table are from the MAX 2002 file for Maine, released by CMS in 05/2006. This table was produced on 04/19/2007.

- 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 2002. A total of 3,592 beneficiaries who were in nursing facilities for part of their enrollment and their 36,274 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 2002. 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 2002 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, MAINE, 2002

Beneficiary Characteristics	ANTIDIABETIC					ANALGESICS - ANTI-INFLAMMATORY					ANTI-ASTHMATIC							
	Users as %					Users as %					Users as %							
	No. of Users	No. of Bene among Users	Mean No. of Rx	Mean Rx \$	Mean No. of Rx	No. of Users	No. of Bene among Users	Mean No. of Rx	Mean Rx \$	Mean No. of Rx	No. of Users	No. of Bene among Users	Mean No. of Rx	Mean Rx \$	No. of Users	No. of Bene among Users	Mean No. of Rx	Mean Rx \$
<b>All</b>	<b>1,366</b>	<b>14,427</b>	<b>0.9</b>	<b>\$34</b>	<b>0.9</b>	<b>791</b>	<b>8,442</b>	<b>0.7</b>	<b>\$50</b>	<b>0.7</b>	<b>1,788</b>	<b>18,273</b>	<b>0.5</b>	<b>\$22</b>				
<b>Female</b>	967	10,239	0.9	33	0.9	607	6,470	0.7	51	0.7	1,192	12,455	0.5	20				
<b>Disabled</b>	58	618	1.0	47	1.0	34	394	0.6	31	0.6	70	830	0.3	11				
64 or younger	49	542	1.0	46	1.0	32	370	0.6	27	0.6	64	758	0.3	11				
65-74	3	36	0.9	80	0.9	0	0	0.0	0	0.0	4	48	0.3	12				
75-84	2	24	1.3	24	1.3	2	24	0.9	93	0.9	2	24	0.3	9				
85 and older	4	16	1.3	52	1.3	0	0	0.0	0	0.0	0	0	0.0	0				
<b>Other Eligibles</b>	909	9,621	0.9	32	0.9	573	6,076	0.7	52	0.7	1,122	11,625	0.5	21				
64 or younger	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0				
65-74	143	1,508	0.9	43	0.9	56	629	0.7	60	0.7	148	1,540	0.6	22				
75-84	384	3,988	0.9	30	0.9	184	1,951	0.7	48	0.7	375	3,870	0.6	26				
85 and older	382	4,125	0.8	31	0.8	333	3,496	0.7	53	0.7	599	6,215	0.4	18				
<b>Male</b>	399	4,188	0.9	36	0.9	184	1,972	0.7	45	0.7	596	5,818	0.6	25				
<b>Disabled</b>	31	343	0.9	43	0.9	23	276	0.5	17	0.5	44	481	0.6	23				
64 or younger	30	342	0.9	44	0.9	23	276	0.5	17	0.5	43	478	0.6	23				
65-74	1	1	1.0	16	1.0	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	1	3	0.3	7				
85 and older	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0				
<b>Other Eligibles</b>	368	3,845	0.9	35	0.9	161	1,696	0.7	50	0.7	552	5,337	0.6	25				
64 or younger	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0				
65-74	78	862	0.9	32	0.9	33	382	0.8	52	0.8	115	1,202	0.6	28				
75-84	203	2,089	1.0	38	1.0	69	723	0.8	51	0.8	276	2,676	0.6	23				
85 and older	87	894	0.8	31	0.8	59	591	0.7	46	0.7	161	1,459	0.6	26				
<b>Unknown</b>	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 2002 file for Maine, released by CMS in 05/2006. This table was produced on 04/19/2007.

- 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 2002. A total of 3,592 beneficiaries who were in nursing facilities for part of their enrollment and their 36,274 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 2002. 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 2002 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, MAINE, 2002

Beneficiary Characteristics	ANTIPARKINSONIAN					MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL						
	Users as %		No. of Bene		Mean	Users as %		No. of Bene		Mean		
	No. of Users	Residents	NF	Mos among Users	Rx	No. of Users	Residents	NF	Mos among Users	Rx		
<b>All</b>	<b>554</b>	<b>12.8 %</b>	<b>5,731</b>	<b>0.9</b>	<b>\$57</b>	<b>364</b>	<b>8.4 %</b>	<b>3,666</b>	<b>0.8</b>	<b>\$87</b>	<b>4,342</b>	<b>43,229</b>
<b>Female</b>	341	10.5	3,573	0.9	50	258	8.0	2,628	0.8	89	3,241	32,878
<b>Disabled</b>	12	7.9	131	1.0	56	8	5.3	94	0.8	65	151	1,646
64 or younger	10	7.1	118	1.0	59	7	5.0	82	0.8	56	141	1,577
65-74	0	0.0	0	0.0	0	1	20.0	12	1.0	128	5	37
75-84	2	66.7	13	1.3	22	0	0.0	0	0.0	0	3	25
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	7
<b>Other Eligibles</b>	329	10.6	3,442	0.9	50	250	8.1	2,534	0.8	90	3,090	31,232
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	47	15.6	528	1.0	52	30	9.9	287	0.7	77	302	3,163
75-84	146	15.2	1,477	1.0	50	94	9.8	974	0.8	95	960	9,780
85 and older	136	7.4	1,437	0.9	49	126	6.9	1,273	0.8	88	1,828	18,289
<b>Male</b>	213	19.3	2,158	1.0	68	106	9.6	1,038	0.7	83	1,101	10,351
<b>Disabled</b>	7	6.1	84	0.8	17	8	7.0	90	0.2	18	114	1,246
64 or younger	7	6.3	84	0.8	17	8	7.2	90	0.2	18	111	1,230
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	13
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	3
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
<b>Other Eligibles</b>	206	20.9	2,074	1.0	71	98	9.9	948	0.8	90	987	9,105
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	40	21.4	427	1.1	76	18	9.6	183	0.9	102	187	1,858
75-84	129	27.9	1,301	1.0	74	50	10.8	479	0.7	83	462	4,313
85 and older	37	10.9	346	0.9	52	30	8.9	286	0.8	94	338	2,934
<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 2002 file for Maine, released by CMS in 05/2006. This table was produced on 04/19/2007.

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 2002. A total of 3,592 beneficiaries who were in nursing facilities for part of their enrollment and their 36,274 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 2002. 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 2002 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 AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D  
 AMONG DUALS, BY BENEFICIARY CHARACTERISTIC<sup>a,b</sup>  
 MAINE, 2002

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	Part D Excl Rx \$	Total Part D Excl Rx \$	\$ per Part D Excl Rx	Part D Excl Rx as % of All Dual Rx \$	Total No. of Benes
	17,212	36.5 %	2.5	118,060	\$86	\$4,042,488	\$34	3.3 %	47,129
<b>Age</b>									
5 and younger	2	66.7	0.7	2	4	13	7	0.6	3
6-14	0	0.0	0.0	0	0	0	0	0.0	4
15-20	26	28.9	0.6	56	18	1,575	28	0.8	90
21-44	3,259	32.8	2.0	20,067	82	815,195	41	2.9	9,927
45-64	4,584	38.8	2.8	32,930	113	1,333,895	41	3.6	11,823
65-74	3,247	33.7	2.4	23,231	87	841,696	36	3.7	9,632
75-84	3,339	37.1	2.7	24,549	72	644,327	26	3.1	8,988
85 and older	2,755	41.4	2.6	17,225	61	405,787	24	3.1	6,661
Unknown	0	0.0	0.0	0	0	0	0	0.0	1
<b>Basis of Eligibility<sup>c</sup></b>									
Aged	8,204	36.8	2.5	55,376	75	1,671,103	30	3.5	22,309
Disabled	8,340	36.7	2.6	58,892	96	2,178,353	37	3.2	22,734
Adults	663	32.2	1.8	3,769	93	192,609	51	4.1	2,062
Children	5	23.8	1.1	23	20	423	18	2.8	21
Unknown	0	0.0	0.0	0	0	0	0	0.0	3
<b>Gender</b>									
Female	11,364	40.2	2.7	76,514	85	2,402,023	31	3.2	28,269
Male	5,848	31.0	2.2	41,546	87	1,640,465	39	3.5	18,858
Unknown	0	0.0	0.0	0	0	0	0	0.0	2
<b>Race</b>									
White	16,997	36.6	2.5	116,683	85	3,947,407	34	3.3	46,395
African American	64	26.6	1.4	329	289	69,532	211	14.0	241
Other/unknown	151	30.6	2.1	1,048	52	25,549	24	2.4	493
<b>Use of Nursing Facilities<sup>d</sup></b>									
Entire year	2,214	51.0	3.7	16,215	94	409,136	25	3.5	4,342
Part year	2,002	55.7	4.0	14,422	110	396,538	27	4.0	3,592
None	12,996	33.2	2.2	87,423	83	3,236,814	37	3.2	39,195
<b>Maintenance Assistance Status</b>									
Cash	8,047	37.1	2.6	56,483	83	1,798,777	32	3.1	21,715
Medically needy	1,218	41.8	3.5	10,247	79	229,463	22	2.6	2,912
Poverty related	4,457	31.8	2.1	28,919	91	1,279,184	44	3.7	13,997
Other/unknown	3,490	41.0	2.6	22,411	86	735,064	33	3.6	8,505

Source: Data for this table are from the MAX 2002 file for Maine, released by CMS in 05/2006. This table was produced on 04/19/2007.

- 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 2002.
- b. The statute establishing the Medicare Part D prescription program that started in 2006 excludes several types of drugs from coverage. State Medicaid programs have been allowed to exclude these drugs since 1990, but many states have chosen to cover them, and if states cover them for any Medicaid beneficiaries they must also cover them for dual eligibles, who as of 2006 receive the remainder of their prescription drug coverage through Part D. 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 AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D  
 AMONG DUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC<sup>a,b</sup>  
 MAINE, 2002

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
	0.2	\$8	\$34	\$0	\$2	523,655
<b>Age</b>						
5 and younger	0.1	0	7	0	0	28
6-14	0.0	0	0	0	0	48
15-20	0.1	2	28	0	0	1,007
21-44	0.2	7	41	0	2	112,276
45-64	0.2	10	41	0	2	134,605
65-74	0.2	8	36	0	1	109,006
75-84	0.2	7	26	0	2	98,403
85 and older	0.3	6	24	0	2	68,270
Unknown	0.0	0	0	0	0	12
<b>Basis of Eligibility<sup>c</sup></b>						
Aged	0.2	7	30	0	2	242,900
Disabled	0.2	8	37	0	2	258,763
Adults	0.2	9	51	0	1	21,776
Children	0.1	2	18	0	1	202
Unknown	0.0	0	0	0	0	14
<b>Gender</b>						
Female	0.2	8	31	0	2	314,886
Male	0.2	8	39	0	1	208,764
Unknown	0.0	0	0	0	0	5
<b>Race</b>						
White	0.2	8	34	0	2	515,816
African American	0.1	28	211	0	1	2,469
Other/unknown	0.2	5	24	0	1	5,370
<b>Use of Nursing Facilities<sup>d</sup></b>						
Entire year	0.4	9	25	0	2	43,229
Part year	0.4	11	27	0	2	36,274
None	0.2	7	37	0	2	444,152
<b>Maintenance Assistance Status</b>						
Cash	0.2	7	32	0	2	248,792
Medically needy	0.3	7	22	0	2	31,372
Poverty related	0.2	8	44	0	1	158,180
Other/unknown	0.3	9	33	0	2	85,311

Source: Data for this table are from the MAX 2002 file for Maine, released by CMS in 05/2006. This table was produced on 04/19/2007.

- 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 2002.
- b. The statute establishing the Medicare Part D prescription program that started in 2006 excludes several types of drugs from coverage. State Medicaid programs have been allowed to exclude these drugs since 1990, but many states have chosen to cover them, and if states cover them for any Medicaid beneficiaries they must also cover them for dual eligibles, who as of 2006 receive the remainder of their prescription drug coverage through Part D. 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 AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D  
 FOR SELECTED DRUG CATEGORIES AMONG DUALS<sup>a,b,c</sup>  
 MAINE, 2002

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>21,439</b>	<b>\$189</b>	<b>\$4,042,488</b>	<b>100.0 %</b>	<b>118,060</b>	<b>\$34</b>	<b>100.0 %</b>
Anorexia or weight loss/gain	1,062	306	325,430	8.1	2,589	126	2.2
Fertility drugs	157	2,249	353,039	8.7	271	1,303	0.2
Drugs for cosmetic purposes	572	989	565,785	14.0	3,403	166	2.9
Cough and cold medications	254	1,706	433,402	10.7	927	468	0.8
Vitamins and minerals	190	8	1,479	0.0	312	5	0.3
Non-prescription drugs	6,935	164	1,140,659	28.2	33,370	34	28.3
Barbiturates	78	12	935	0.0	91	10	0.1
Benzodiazepines	11,271	77	863,267	21.4	74,849	12	63.4
Other Part D Excl Rx Drugs	920	390	358,492	8.9	2,248	159	1.9

Source: Data for this table are from the MAX 2002 file for Maine, released by CMS in 05/2006. This table was produced on 04/19/2007.

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 2002. A user is a beneficiary who had at least one prescription filled for a Part D excluded drug in 2002. 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. The statute establishing the Medicare Part D prescription program that started in 2006 excludes several types of drugs from coverage. State Medicaid programs have been allowed to exclude these drugs since 1990, but many states have chosen to cover them, and if states cover them for any Medicaid beneficiaries they must also cover them for dual eligibles, who as of 2006 receive the remainder of their prescription drug coverage through Part D. 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>  
 MAINE, 2002

Total Number of Dual Eligible Beneficiaries 47,129  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries \$121,934,974  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary \$2,587

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries 7.5 %	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	3,517	7.5 %	\$0	0.0 %
1-500	8,619	18.3	1,813,253	1.5
501-1,000	5,461	11.6	4,049,972	3.3
1,001-1,500	4,829	10.2	6,016,095	4.9
1,501-2,000	4,052	8.6	7,069,941	5.8
2,001-2,500	3,473	7.4	7,794,626	6.4
2,501-3,000	2,910	6.2	7,991,449	6.6
3,001-3,500	2,409	5.1	7,811,899	6.4
3,501-4,000	2,036	4.3	7,613,603	6.2
4,001-4,500	1,677	3.6	7,111,667	5.8
4,501-5,000	1,334	2.8	6,324,412	5.2
5,001-5,500	1,144	2.4	5,998,781	4.9
5,501-6,000	887	1.9	5,090,469	4.2
6,001-6,500	758	1.6	4,727,339	3.9
6,501-7,000	623	1.3	4,200,603	3.4
7,001-7,500	527	1.1	3,818,142	3.1
7,501-8,000	406	0.9	3,145,490	2.6
8,001-8,500	341	0.7	2,812,613	2.3
8,501-9,000	270	0.6	2,363,493	1.9
9,001-9,500	257	0.5	2,375,632	1.9
9,501-10,000	192	0.4	1,869,266	1.5
10,001+	1,407	3.0	21,936,229	18.0

Source: Data for this table are from the MAX 2002 file for Maine, released by CMS in 05/2006. This table was produced on 04/19/2007.

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 2002.

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>  
 MAINE, 2002

Total Number of Disabled Dual Eligible Beneficiaries, Age < 65 19,860  
 Total Pharmacy Reimbursement for Disabled Dual Eligible Beneficiaries, Age < 65 \$61,058,098  
 Mean Pharmacy Reimbursement per Disabled Dual Eligible Beneficiary, Age < 65 \$3,074

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Disabled Dual Beneficiaries, Age < 65	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	1,640	8.3%	0	0.0%
1-500	3,745	18.9	735,073	1.2
501-1,000	2,030	10.2	1,500,008	2.5
1,001-1,500	1,738	8.8	2,175,560	3.6
1,501-2,000	1,437	7.2	2,494,592	4.1
2,001-2,500	1,241	6.2	2,784,667	4.6
2,501-3,000	1,070	5.4	2,945,950	4.8
3,001-3,500	926	4.7	3,001,121	4.9
3,501-4,000	781	3.9	2,921,965	4.8
4,001-4,500	697	3.5	2,959,271	4.8
4,501-5,000	574	2.9	2,725,109	4.5
5,001-5,500	525	2.6	2,756,041	4.5
5,501-6,000	452	2.3	2,592,116	4.2
6,001-6,500	394	2.0	2,457,824	4.0
6,501-7,000	341	1.7	2,300,171	3.8
7,001-7,500	308	1.6	2,232,221	3.7
7,501-8,000	239	1.2	1,853,800	3.0
8,001-8,500	215	1.1	1,771,290	2.9
8,501-9,000	150	0.8	1,314,003	2.2
9,001-9,500	181	0.9	1,674,984	2.7
9,501-10,000	129	0.6	1,256,679	2.1
10,001+	1,047	5.3	16,605,653	27.2

Source: Data for this table are from the MAX 2002 file for Maine, released by CMS in 05/2006. This table was produced on 04/19/2007.

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 2002.

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 1C  
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 TO 74<sup>a, b</sup>  
 MAINE, 2002

Total Number of Dual Eligible Beneficiaries, Age 65-74                                   9,632  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65-74           \$22,752,379  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65-74           \$2,362

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 65-74	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	904	9.4 %	0	0.0 %
1-500	1,589	16.5	337,261	1.5
501-1,000	1,047	10.9	778,536	3.4
1,001-1,500	1,001	10.4	1,246,443	5.5
1,501-2,000	900	9.3	1,574,069	6.9
2,001-2,500	743	7.7	1,671,046	7.3
2,501-3,000	628	6.5	1,723,493	7.6
3,001-3,500	539	5.6	1,745,071	7.7
3,501-4,000	449	4.7	1,678,538	7.4
4,001-4,500	374	3.9	1,585,741	7.0
4,501-5,000	305	3.2	1,446,825	6.4
5,001-5,500	245	2.5	1,284,199	5.6
5,501-6,000	163	1.7	934,437	4.1
6,001-6,500	147	1.5	918,442	4.0
6,501-7,000	123	1.3	828,700	3.6
7,001-7,500	93	1.0	673,863	3.0
7,501-8,000	70	0.7	541,690	2.4
8,001-8,500	56	0.6	463,150	2.0
8,501-9,000	50	0.5	438,751	1.9
9,001-9,500	25	0.3	229,923	1.0
9,501-10,000	24	0.2	233,524	1.0
10,001+	157	1.6	2,418,677	10.6

Source: Data for this table are from the MAX 2002 file for Maine, released by CMS in 05/2006. This table was produced on 04/19/2007.

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 2002.  
 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>  
 MAINE, 2002

Total Number of Dual Eligible Beneficiaries, Age 75-84 8,988  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 75-84 \$20,529,822  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 75-84 \$2,284

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 75-84	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	531	5.9 %	0	0.0 %
1-500	1,469	16.3	338,451	1.6
501-1,000	1,088	12.1	808,410	3.9
1,001-1,500	1,044	11.6	1,300,815	6.3
1,501-2,000	889	9.9	1,559,327	7.6
2,001-2,500	801	8.9	1,795,295	8.7
2,501-3,000	662	7.4	1,815,372	8.8
3,001-3,500	505	5.6	1,641,657	8.0
3,501-4,000	441	4.9	1,650,706	8.0
4,001-4,500	332	3.7	1,405,833	6.8
4,501-5,000	268	3.0	1,267,669	6.2
5,001-5,500	208	2.3	1,089,371	5.3
5,501-6,000	157	1.7	902,494	4.4
6,001-6,500	134	1.5	834,012	4.1
6,501-7,000	95	1.1	640,885	3.1
7,001-7,500	76	0.8	550,498	2.7
7,501-8,000	59	0.7	456,928	2.2
8,001-8,500	37	0.4	304,632	1.5
8,501-9,000	47	0.5	410,192	2.0
9,001-9,500	27	0.3	249,664	1.2
9,501-10,000	17	0.2	165,619	0.8
10,001+	101	1.1	1,341,992	6.5

Source: Data for this table are from the MAX 2002 file for Maine, released by CMS in 05/2006. This table was produced on 04/19/2007.

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 2002.

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>  
 MAINE, 2002

Total Number of Dual Eligible Beneficiaries, Age 85+ 6,661  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 85+ \$12,985,722  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 85+ \$1,950

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 85+ 3.0 %	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	200		0	0.0 %
1-500	1,334	20.0	309,232	2.4
501-1,000	1,061	15.9	791,261	6.1
1,001-1,500	866	13.0	1,073,049	8.3
1,501-2,000	690	10.4	1,204,552	9.3
2,001-2,500	580	8.7	1,303,254	10.0
2,501-3,000	453	6.8	1,239,801	9.5
3,001-3,500	363	5.4	1,176,373	9.1
3,501-4,000	294	4.4	1,097,769	8.5
4,001-4,500	215	3.2	909,603	7.0
4,501-5,000	150	2.3	711,437	5.5
5,001-5,500	121	1.8	632,816	4.9
5,501-6,000	87	1.3	499,592	3.8
6,001-6,500	59	0.9	367,066	2.8
6,501-7,000	49	0.7	330,136	2.5
7,001-7,500	24	0.4	173,743	1.3
7,501-8,000	24	0.4	185,604	1.4
8,001-8,500	23	0.3	190,912	1.5
8,501-9,000	13	0.2	113,202	0.9
9,001-9,500	15	0.2	138,633	1.1
9,501-10,000	8	0.1	77,414	0.6
10,001+	32	0.5	460,273	3.5

Source: Data for this table are from the MAX 2002 file for Maine, released by CMS in 05/2006. This table was produced on 04/19/2007.

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 2002.

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, MAINE, 2002

Beneficiary Characteristics	No. of Beneficiaries					No. of Beneficiaries					
	All	Aged	Disabled	Adults	Children	All	Aged	Disabled	Adults	Children	Unknown
<b>All</b>	<b>47,129</b>	<b>22,309</b>	<b>22,734</b>	<b>2,062</b>	<b>21</b>	<b>523,655</b>	<b>242,900</b>	<b>258,763</b>	<b>21,776</b>	<b>202</b>	<b>14</b>
<b>Age</b>											
5 and younger	3	0	3	0	0	28	0	28	0	0	0
6-14	4	0	3	0	1	48	0	36	0	12	0
15-20	90	0	75	0	15	1,007	0	846	0	161	0
21-44	9,927	2	8,605	1,316	4	112,276	24	98,256	13,970	26	0
45-64	11,823	4	11,173	644	1	134,605	48	127,826	6,722	3	6
65-74	9,632	8,389	1,154	87	0	109,006	95,363	12,713	922	0	8
75-84	8,988	8,158	816	14	0	98,403	89,303	8,950	150	0	0
85 and older	6,661	5,756	904	1	0	68,270	58,162	10,096	12	0	0
Unknown	1	0	1	0	0	12	0	12	0	0	0
<b>Gender</b>											
Female	28,269	16,010	11,356	892	8	314,886	175,673	129,558	9,554	87	14
Male	18,858	6,299	11,377	1,169	13	208,764	67,227	129,203	12,219	115	0
Unknown	2	0	1	1	0	5	0	2	3	0	0
<b>Race</b>											
White	46,395	22,008	22,353	2,011	20	515,816	239,733	254,542	21,337	190	14
African American	241	79	140	22	0	2,469	790	1,507	172	0	0
Other/unknown	493	222	241	29	1	5,370	2,377	2,714	267	12	0
<b>Use of Nursing Facilities<sup>c</sup></b>											
Entire year	4,342	4,077	265	0	0	43,229	40,337	2,892	0	0	0
Part year	3,592	3,062	523	7	0	36,274	30,448	5,743	83	0	0
None	39,195	15,170	21,946	2,055	21	444,152	172,115	250,128	21,693	202	14
<b>Maintenance Assistance Status</b>											
Cash	21,715	9,595	11,383	735	2	248,792	109,717	130,931	8,120	24	0
Medically needy	2,912	704	2,202	6	0	31,372	6,625	24,681	66	0	0
Poverty related	13,997	7,507	6,471	11	5	158,180	85,092	72,919	126	29	14
Other/unknown	8,505	4,503	2,678	1,310	14	85,311	41,466	30,232	13,464	149	0
<b>Dual Status<sup>d</sup></b>											
Full dual, all year	45,569	21,427	22,134	1,984	21	506,690	233,412	252,145	20,917	202	14
Full dual, part year	1,560	882	600	78	0	16,965	9,488	6,618	859	0	0
<b>Managed Care Status</b>											
FFS all year	47,129	22,309	22,734	2,062	21	523,655	242,900	258,763	21,776	202	14
FFS part year, with Rx claims	0	0	0	0	0	0	0	0	0	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	0	0	0	0	0	0	0	0	0	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 2002 file for Maine, released by CMS in 05/2006. This table was produced on 04/19/2007.

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 2002. 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, MAINE, 2002

Beneficiary Characteristics	Bene Mos in Cell F of Table 1		Bene Mos and		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	No. of Benes	No. of Bene Mos
<b>All</b>	<b>47,129</b>	<b>523,655</b>	<b>47,129</b>	<b>523,655</b>	<b>47,129</b>	<b>523,655</b>	<b>0</b>	<b>0</b>
FFS all year	47,129	523,655	47,129	523,655	47,129	523,655	0	0
FFS part year, with Rx claims	0	0	0	0	0	0	0	0
FFS part year, with no Rx claims	0	0	0	0	0	0	0	0
MC all year, with Rx claims	0	0	0	0	0	0	0	0
MC all year, with no Rx claims	0	0	0	0	0	0	0	0

Source: Data for this table are from the MAX 2002 file for Maine, released by CMS in 05/2006. This table was produced on 04/19/2007.

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.