

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

LIST OF TABLES

OVERVIEW OF STUDY POPULATION

TABLE 1. OVERVIEW OF BENEFICIARY SELECTION CRITERIA FOR STUDY POPULATION

FOR ALL MEDICAID BENEFICIARIES

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

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

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

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

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

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

FOR ALL NONDUAL BENEFICIARIES

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

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

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

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

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

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

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

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

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

TABLE ND.11. USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D AMONG NONDUALS, BY BENEFICIARY CHARACTERISTIC

TABLE ND.12. USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D AMONG NONDUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC

TABLE ND.13. USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D FOR SELECTED DRUG CATEGORIES AMONG NONDUALS

FOR DUAL ELIGIBLE BENEFICIARIES

- TABLE D.2. CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY
- TABLE D.3. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC
- TABLE D.4. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC
- TABLE D.5. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC
- TABLE D.6. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY
- TABLE D.7-7D. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP
- TABLE D.8. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS, BY BENEFICIARY CHARACTERISTIC
- TABLE D.9. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS, BY BRAND STATUS AND THERAPEUTIC CATEGORY
- TABLE D.10-10D. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY TOP 10 DRUG GROUP
- TABLE D.11. USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D AMONG DUALS, BY BENEFICIARY CHARACTERISTIC
- TABLE D.12. USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D AMONG DUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC
- TABLE D.13. USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D FOR SELECTED DRUG CATEGORIES AMONG DUALS

SUPPLEMENTAL TABLES

- SUPPLEMENTAL TABLE 1. MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES
- SUPPLEMENTAL TABLE 1A. MEDICAID PHARMACY REIMBURSEMENT FOR DISABLED DUAL ELIGIBLE BENEFICIARIES UNDER AGE 65
- SUPPLEMENTAL TABLE 1B. MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 AND OLDER
- SUPPLEMENTAL TABLE 1C. MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 TO 74
- SUPPLEMENTAL TABLE 1D. MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 75 TO 84
- SUPPLEMENTAL TABLE 1E. MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 85 AND OLDER

APPENDIX TABLE

- APPENDIX TABLE A.1. CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY, NONDUAL BENEFICIARIES
- APPENDIX TABLE A.2. MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS, NONDUAL BENEFICIARIES
- APPENDIX TABLE A.3. CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY, DUAL ELIGIBLE BENEFICIARIES
- APPENDIX TABLE A.4. MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS, DUAL ELIGIBLE BENEFICIARIES

TABLE D.2
 CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a,b}
 DUAL ELIGIBLE BENEFICIARIES, NEW HAMPSHIRE, 2002

Beneficiary Characteristics	No. of Benes						No. of Bene Mos					
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown
All	20,373	11,399	8,144	818	12	0	202,150	109,519	85,323	7,213	95	0
Age												
5 and younger	1	0	0	0	1	0	12	0	0	0	12	0
6-14	2	0	0	0	2	0	24	0	0	0	24	0
15-20	45	0	37	0	8	0	425	0	372	0	53	0
21-44	4,250	0	3,594	655	1	0	43,991	0	38,086	5,899	6	0
45-64	4,599	0	4,439	160	0	0	47,456	0	46,170	1,286	0	0
65-74	3,152	3,092	57	3	0	0	30,649	30,110	511	28	0	0
75-84	4,060	4,051	9	0	0	0	39,663	39,564	99	0	0	0
85 and older	4,264	4,256	8	0	0	0	39,930	39,845	85	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	13,800	8,902	4,313	578	7	0	138,169	87,175	45,512	5,425	57	0
Male	6,573	2,497	3,831	240	5	0	63,981	22,344	39,811	1,788	38	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	19,965	11,186	7,974	794	11	0	198,393	107,609	83,666	7,026	92	0
African American	119	34	75	9	1	0	1,164	337	735	89	3	0
Other/unknown	289	179	95	15	0	0	2,593	1,573	922	98	0	0
Use of Nursing Facilities^c												
Entire year	4,771	4,548	223	0	0	0	47,585	45,248	2,337	0	0	0
Part year	2,138	1,960	177	1	0	0	18,325	16,444	1,869	12	0	0
None	13,464	4,891	7,744	817	12	0	136,240	47,827	81,117	7,201	95	0
Maintenance Assistance Status												
Cash	3,496	1,169	2,268	59	0	0	39,084	13,290	25,399	395	0	0
Medically needy	7,509	4,810	2,223	475	1	0	68,180	42,623	21,254	4,302	1	0
Poverty-related	774	344	383	43	4	0	6,228	2,706	3,177	319	26	0
Other/unknown	8,594	5,076	3,270	241	7	0	88,658	50,900	35,493	2,197	68	0
Dual Medicare Status^d												
Full dual, all year	18,989	10,838	7,361	778	12	0	189,285	104,434	77,953	6,803	95	0
Full dual, part year	1,384	561	783	40	0	0	12,865	5,085	7,370	410	0	0
Managed Care Status												
FFS all year	20,345	11,399	8,141	793	12	0	202,002	109,519	85,310	7,078	95	0
FFS part year, with Rx claims	25	0	1	24	0	0	135	0	5	130	0	0
FFS part year, no Rx claims	3	0	2	1	0	0	13	0	8	5	0	0

Source: Data for this table are from the MAX 2002 file for New Hampshire, released by CMS in 07/2006. 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^{a,b}
 DUAL ELIGIBLE BENEFICIARIES, NEW HAMPSHIRE, 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	91.1 %	52.4	\$2,905	\$56	\$20,604	14.1 %	20,373
Age							
5 and younger	100.0	103.0	9,954	97	83,584	11.9	1
6-14	100.0	71.0	11,875	167	28,429	41.8	2
15-20	80.0	24.2	2,385	99	20,446	11.7	45
21-44	88.2	40.5	3,245	80	19,469	16.7	4,250
45-64	91.3	59.1	3,942	67	20,697	19.0	4,599
65-74	87.2	52.3	2,603	50	15,258	17.1	3,152
75-84	93.1	57.3	2,514	44	20,777	12.1	4,060
85 and older	95.1	52.5	2,042	39	25,403	8.0	4,264
Unknown	0.0	0.0	0	0	0	0.0	0
Basis of Eligibility^c							
Aged	92.3	54.2	2,363	44	20,988	11.3	11,399
Disabled	90.0	51.8	3,737	72	21,663	17.2	8,144
Adults	86.7	33.0	2,133	65	4,742	45.0	818
Children	66.7	39.8	5,282	133	17,852	29.6	12
Unknown	0.0	0.0	0	0	0	0.0	0
Gender							
Female	93.4	56.0	2,889	52	19,992	14.5	13,800
Male	86.4	44.7	2,938	66	21,889	13.4	6,573
Unknown	0.0	0.0	0	0	0	0.0	0
Race							
White	91.3	52.7	2,920	55	20,805	14.0	19,965
African American	87.4	44.4	3,189	72	16,396	19.4	119
Other/unknown	84.4	30.5	1,749	57	8,419	20.8	289
Use of Nursing Facilities^d							
Entire year	97.3	65.6	2,863	44	35,757	8.0	4,771
Part year	96.3	55.0	2,391	44	21,481	11.1	2,138
None	88.1	47.2	3,001	64	15,095	19.9	13,464
Maintenance Assistance Status							
Cash	91.2	48.5	3,048	63	21,670	14.1	3,496
Medically needy	91.2	51.7	2,772	54	18,246	15.2	7,509
Poverty related	80.2	23.0	1,207	52	5,639	21.4	774
Other/unknown	92.1	57.1	3,116	55	23,578	13.2	8,594

Source: Data for this table are from the MAX 2002 file for New Hampshire, released by CMS in 07/2006. 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^{a,b}
 DUAL ELIGIBLE BENEFICIARIES, NEW HAMPSHIRE, 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			
All	5.3	\$293	14.1 %	8.9 %	12.9 %	10.0 %	29.7 %	28.6 %	10.0 %	\$2,077	20,373	202,150
Age												
5 and younger	8.6	830	11.9	0.0	0.0	0.0	0.0	100.0	0.0	6,965	1	12
6-14	5.9	990	41.8	0.0	0.0	0.0	0.0	100.0	0.0	2,369	2	24
15-20	2.6	253	11.7	20.0	37.8	17.8	6.7	17.8	0.0	2,165	45	425
21-44	3.9	314	16.7	11.8	23.5	13.2	28.8	17.3	5.5	1,881	4,250	43,991
45-64	5.7	382	19.0	8.7	12.2	10.1	28.3	28.4	12.3	2,006	4,599	47,456
65-74	5.4	268	17.1	12.8	11.7	9.1	27.3	28.1	11.1	1,569	3,152	30,649
75-84	5.9	257	12.1	6.9	8.1	8.2	30.6	34.4	11.8	2,127	4,060	39,663
85 and older	5.6	218	8.0	4.9	8.3	9.0	33.3	34.9	9.6	2,713	4,264	39,930
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Basis of Eligibility^c												
Aged	5.6	246	11.3	7.7	9.1	8.7	30.7	32.9	10.8	2,185	11,399	109,519
Disabled	4.9	357	17.2	10.0	17.0	11.4	28.4	23.8	9.5	2,068	8,144	85,323
Adults	3.7	242	45.0	13.3	24.1	13.3	29.1	15.8	4.4	538	818	7,213
Children	5.0	667	29.6	33.3	8.3	16.7	0.0	41.7	0.0	2,255	12	95
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Gender												
Female	5.6	289	14.5	6.6	11.2	9.7	30.4	31.2	10.9	1,997	13,800	138,169
Male	4.6	302	13.4	13.6	16.3	10.7	28.3	23.0	8.0	2,249	6,573	63,981
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	5.3	294	14.0	8.7	12.7	10.0	29.8	28.7	10.1	2,094	19,965	198,393
African American	4.5	326	19.4	12.6	16.8	6.7	31.1	27.7	5.0	1,676	119	1,164
Other/unknown	3.4	195	20.8	15.6	26.3	12.1	25.3	18.0	2.8	938	289	2,593
use of nursing Facilities^d												
Entire year	6.6	287	8.0	2.7	6.0	7.1	29.1	39.3	16.0	3,585	4,771	47,585
Part year	6.4	279	11.1	3.7	6.3	7.8	32.5	36.1	13.7	2,506	2,138	18,325
None	4.7	297	19.9	11.9	16.4	11.4	29.5	23.6	7.3	1,492	13,464	136,240
Maintenance Assistance Status												
Cash	4.3	273	14.1	8.8	18.8	11.8	30.7	23.4	6.4	1,938	3,496	39,084
Medically needy	5.7	305	15.2	8.8	9.9	9.3	30.6	30.6	10.9	2,010	7,509	68,180
Poverty related	2.9	150	21.4	19.8	27.3	12.4	20.8	17.1	2.7	701	774	6,228
Other/unknown	5.5	302	13.2	7.9	11.8	9.7	29.3	29.9	11.3	2,286	8,594	88,658

Table D4

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2002 file for New Hampshire, released by CMS in 07/2006. 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^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, NEW HAMPSHIRE, 2002

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
All	5.3	\$293	\$56	2.2	\$216	\$97	0.4	\$23	\$53	2.6	\$54	\$21
Age												
5 and younger	8.6	830	97	5.5	809	147	0.1	0	3	3.0	20	7
6-14	5.9	990	167	3.2	962	300	0.8	9	11	1.9	19	10
15-20	2.6	253	99	1.2	217	184	0.2	8	43	1.2	27	23
21-44	3.9	314	80	1.8	238	135	0.3	30	90	1.8	46	25
45-64	5.7	382	67	2.5	289	114	0.4	32	71	2.7	61	22
65-74	5.4	268	50	2.3	198	86	0.4	16	40	2.7	54	20
75-84	5.9	257	44	2.4	184	76	0.5	17	35	3.0	56	19
85 and older	5.6	218	39	2.1	150	71	0.5	15	30	3.0	53	18
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility^d												
Aged	5.6	246	44	2.3	176	77	0.5	16	34	2.9	54	19
Disabled	4.9	357	72	2.2	270	122	0.4	32	79	2.3	55	24
Adults	3.7	242	65	1.6	188	121	0.2	18	74	1.9	36	18
Children	5.0	667	133	2.5	618	248	0.3	8	22	2.2	42	19
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Gender												
Female	5.6	289	52	2.3	213	91	0.5	21	46	2.8	55	20
Male	4.6	302	66	2.0	224	113	0.4	27	70	2.2	51	23
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Race												
White	5.3	294	55	2.2	217	97	0.4	23	53	2.6	54	21
African American	4.5	326	72	2.1	265	125	0.3	23	71	2.1	39	18
Other/unknown	3.4	195	57	1.5	141	97	0.3	20	65	1.6	34	21
Use of Nursing Facilities^e												
Entire year	6.6	287	44	2.6	198	77	0.6	18	31	3.4	71	21
Part year	6.4	279	44	2.5	196	78	0.5	18	34	3.4	64	19
None	4.7	297	64	2.1	225	109	0.4	25	68	2.2	47	21
Maintenance Assistance Status												
Cash	4.3	273	63	1.9	206	109	0.3	23	66	2.1	44	21
Medically needy	5.7	305	54	2.4	226	93	0.5	23	49	2.8	56	20
Poverty related	2.9	150	52	1.1	111	97	0.2	10	46	1.5	29	19
Other/unknown	5.5	302	55	2.3	220	96	0.5	23	51	2.8	58	21

Source: Data for this table are from the MAX 2002 file for New Hampshire, released by CMS in 07/2006. 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 New Hampshire, 0.2 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all combined. For information about this classification method, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).
- d. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.
- e. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.

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

TABLE D.6

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, NEW HAMPSHIRE, 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	Generic	Total No. of Rx	Total Rx \$	No. Dual Benes	As % of Benes	No. of Bene Mos			
																Generic	Patented Brand-Name	Off-Patent Brand-Name
Anti-infective Agents	0.3	0.2	0.0	0.2	\$23	\$19	\$2	\$3	\$67	\$119	\$90	\$17	38,831	\$2,595,435	10,360	50.9 %	111,009	
Biologics	0.1	0.1	0.0	0.0	2	1	0	1	17	18	0	16	1,036	18,015	945	4.6	10,280	
Antineoplastic Agents	0.6	0.3	0.0	0.3	118	95	2	21	186	285	69	77	4,271	793,884	670	3.3	6,755	
Endocrine/Metabolic Drugs	1.1	0.5	0.2	0.4	36	26	4	6	34	58	19	15	97,554	3,333,465	8,715	42.8	91,933	
Cardiovascular Agents	1.9	0.6	0.1	1.1	56	35	5	17	30	58	35	15	226,410	6,778,388	11,698	57.4	120,827	
Respiratory Agents	0.9	0.5	0.1	0.3	45	32	5	8	51	66	71	25	70,842	3,622,687	7,618	37.4	81,353	
Gastrointestinal Agents	0.8	0.3	0.0	0.5	53	40	2	11	67	128	104	24	72,550	4,840,995	8,668	42.5	91,168	
Genitourinary Agents	0.5	0.4	0.0	0.1	29	26	0	2	53	65	32	17	16,350	867,531	2,824	13.9	30,239	
CNS Drugs	1.7	0.9	0.1	0.7	144	111	13	19	83	119	106	28	237,274	19,622,654	13,103	64.3	136,642	
Stimulants/Anti-obesity/Anorexia	0.6	0.2	0.0	0.4	43	29	2	11	73	145	78	32	2,601	189,671	410	2.0	4,419	
Miscellaneous Psychological/Neurological Agents	0.6	0.6	0.0	0.0	78	74	0	4	126	129	0	82	9,881	1,240,994	1,562	7.7	15,965	
Analgesics and Anesthetics	0.9	0.3	0.1	0.5	54	39	3	11	57	118	57	20	100,933	5,783,232	10,337	50.7	107,344	
Neuromuscular Agents	1.2	0.5	0.1	0.6	74	53	6	15	63	108	71	25	83,183	5,273,702	6,642	32.6	71,262	
Nutritional Products	0.7	0.0	0.0	0.6	15	2	1	12	22	196	14	19	22,402	499,314	3,186	15.6	32,452	
Hematological Agents	0.9	0.2	0.2	0.5	45	35	3	7	50	187	16	13	32,982	1,647,710	3,585	17.6	36,542	
Topical Products	0.5	0.2	0.0	0.3	17	12	1	4	34	57	35	16	46,441	1,586,631	8,653	42.5	93,608	
Miscellaneous Products	0.3	0.2	0.0	0.1	54	40	7	7	164	200	252	71	2,905	475,946	822	4.0	8,842	
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	9	0	0	0	32	0	0	0	198	6,350	67	0.3	738	
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.	1,066,644	59,176,604	n.a.	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2002 file for New Hampshire, released by CMS in 07/2006. 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 (May 13 2003).
- d. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In New Hampshire, 0.2 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).

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

TABLE D.7
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, NEW HAMPSHIRE, 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	\$11,877,571	8,238	40.4 %	88,741	0.9	\$146	\$134
ANTIDEPRESSANTS	6,284,529	12,892	63.3	135,823	0.8	59	46
ANTICONVULSANT	4,334,406	6,299	30.9	68,452	0.9	70	63
ULCER DRUGS	3,884,112	8,579	42.1	91,905	0.5	77	42
ANALGESICS - Narcotic	3,308,468	11,387	55.9	119,566	0.5	54	28
ANTHYPERLIPIDEMIC	2,387,132	3,930	19.3	42,427	0.7	78	56
ANTIASTHMATIC	2,384,260	8,455	41.5	90,042	0.5	53	26
ANTIDIABETIC	2,083,446	5,530	27.1	58,575	0.8	45	36
ANALGESICS - ANTI-INFLAMMATORY	1,906,111	6,137	30.1	67,010	0.5	62	28
ANTHYPERTENSIVE	1,517,811	6,157	30.2	64,374	0.8	31	24
Total	39,967,846	77,604		826,915	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2002 file for New Hampshire, released by CMS in 07/2006. 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 (May 13 2003).

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

TABLE D.7A
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR TOP 10 DRUG GROUPS COMBINED
 AND FIRST AND SECOND GROUPS SEPARATELY, BY SEX, BOE, AND AGE^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, NEW HAMPSHIRE, 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 \$
All	561,793	\$39,967,846	8,238	40.4 %	88,741	0.9	\$134	12,892	63.3 %	135,823	0.8	\$46
Female	389,474	26,197,049	5,161	37.4	55,586	0.8	110	9,478	68.7	100,670	0.8	46
Disabled	147,658	11,958,559	2,235	51.8	25,264	0.9	145	3,775	87.5	41,757	0.7	49
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	176	15,931	3	17.6	28	0.5	73	11	64.7	114	0.5	30
21-44	47,575	4,220,167	1,013	61.7	11,484	0.9	140	1,396	85.1	15,472	0.7	50
45-64	98,795	7,654,542	1,208	46.2	13,636	1.0	150	2,351	89.9	26,000	0.7	48
65-74	852	51,820	9	31.0	92	0.3	19	15	51.7	147	0.7	34
75-84	89	6,524	1	16.7	12	0.6	129	1	16.7	12	0.9	36
85 and older	171	9,575	1	16.7	12	1.5	236	1	16.7	12	0.9	31
Other Eligibles	241,816	14,238,490	2,926	30.8	30,322	0.7	80	5,703	60.1	58,913	0.8	44
5 and younger	23	439	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	52	2,449	1	20.0	12	0.1	2	4	80.0	48	0.4	26
21-44	10,425	751,302	149	30.4	1,601	0.5	63	477	97.3	5,008	0.6	42
45-64	2,267	148,983	20	23.0	239	0.6	74	85	97.7	918	0.7	50
65-74	62,124	3,970,473	541	25.6	5,960	0.9	113	1,105	52.2	11,870	0.8	43
75-84	87,570	5,074,860	989	31.2	10,157	0.7	84	1,917	60.5	19,808	0.8	44
85 and older	79,355	4,289,984	1,226	33.8	12,353	0.7	64	2,115	58.4	21,261	0.8	44
Male	172,319	13,770,797	3,077	46.8	33,155	1.1	174	3,414	51.9	35,153	0.8	48
Disabled	111,128	10,220,472	2,300	60.0	25,725	1.2	197	2,067	54.0	22,479	0.8	52
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	245	20,915	6	30.0	63	0.4	149	7	35.0	77	0.4	23
21-44	49,638	4,954,234	1,267	64.9	14,261	1.2	195	1,059	54.2	11,654	0.8	51
45-64	60,547	5,192,415	1,016	55.7	11,284	1.2	199	989	54.2	10,639	0.9	52
65-74	594	48,425	11	39.3	117	0.8	150	9	32.1	82	1.2	70
75-84	103	4,445	0	0.0	0	0.0	0	3	100.0	27	1.0	34
85 and older	1	38	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	61,191	3,550,325	777	28.3	7,430	0.8	97	1,347	49.1	12,674	0.8	41
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	34	911	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	38	1,206	0	0.0	0	0.0	0	1	33.3	12	0.3	11
21-44	2,117	162,805	18	10.8	149	0.6	154	78	47.0	719	0.4	30
45-64	983	70,008	5	6.8	47	0.7	176	31	42.5	255	0.6	43
65-74	22,812	1,411,895	223	22.8	2,267	0.9	120	386	39.4	3,835	0.8	45
75-84	22,193	1,235,120	311	35.1	3,019	0.8	94	472	53.3	4,546	0.8	40
85 and older	13,014	668,380	220	34.7	1,948	0.7	68	379	59.8	3,307	0.8	39
Unknown	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2002 file for New Hampshire, released by CMS in 07/2006. 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 (May 13 2003).

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

TABLE D.7B
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR THIRD TO FIFTH TOP DRUG GROUPS
 SEPARATELY, BY SEX, BOE, AND AGE^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, NEW HAMPSHIRE, 2002

Beneficiary Characteristics	ANTICONVULSANT					ULCER DRUGS					ANALGESICS - Narcotic				
	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
All	6,299	30.9 %	68,452	0.9	\$63	8,579	42.1 %	91,905	0.5	\$42	11,387	55.9 %	119,566	0.5	\$28
Female	4,071	29.5	44,412	0.9	59	6,296	45.6	67,789	0.5	43	8,409	60.9	89,002	0.5	27
Disabled	2,286	53.0	25,635	0.9	69	2,069	48.0	23,271	0.5	41	3,269	75.8	36,431	0.5	31
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	9	52.9	96	0.7	103	1	5.9	12	0.2	12	6	35.3	68	0.3	3
21-44	943	57.5	10,622	0.8	72	655	39.9	7,396	0.4	36	1,225	74.6	13,604	0.5	26
45-64	1,325	50.7	14,833	0.9	68	1,393	53.3	15,648	0.5	43	2,016	77.1	22,523	0.5	33
65-74	7	24.1	60	0.6	14	11	37.9	107	0.6	59	16	55.2	164	1.4	84
75-84	1	16.7	12	0.5	8	6	100.0	72	0.1	6	5	83.3	60	0.3	2
85 and older	1	16.7	12	1.0	47	3	50.0	36	0.6	54	1	16.7	12	1.1	45
Other Eligibles	1,785	18.8	18,777	0.9	46	4,227	44.6	44,518	0.6	43	5,140	54.2	52,571	0.5	24
5 and younger	0	0.0	0	0.0	0	3	300.0	36	0.3	7	1	100.0	12	0.1	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	20.0	12	0.8	32	2	40.0	24	0.1	2	3	60.0	36	0.2	5
21-44	210	42.9	2,193	0.7	55	174	35.5	1,822	0.3	27	532	108.6	5,724	0.5	28
45-64	33	37.9	355	0.8	61	40	46.0	424	0.4	26	79	90.8	848	0.4	22
65-74	513	24.2	5,652	0.9	56	1,022	48.3	11,210	0.5	41	1,132	53.5	12,306	0.5	23
75-84	600	19.0	6,314	0.9	41	1,490	47.1	15,939	0.6	44	1,585	50.1	16,369	0.5	23
85 and older	428	11.8	4,251	0.8	34	1,496	41.3	15,063	0.7	48	1,808	49.9	17,276	0.6	25
Male	2,228	33.9	24,040	1.0	71	2,283	34.7	24,116	0.6	42	2,978	45.3	30,564	0.5	30
Disabled	1,639	42.8	18,278	1.0	77	1,242	32.4	13,848	0.5	39	1,723	45.0	18,851	0.5	35
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	12	60.0	139	0.8	53	3	15.0	36	0.6	36	7	35.0	84	0.3	2
21-44	848	43.4	9,540	0.9	74	524	26.8	5,837	0.5	37	850	43.5	9,440	0.5	29
45-64	771	42.2	8,520	1.1	81	696	38.1	7,758	0.6	40	859	47.1	9,270	0.6	41
65-74	8	28.6	79	1.2	106	17	60.7	193	0.5	34	6	21.4	54	0.9	55
75-84	0	0.0	0	0.0	0	2	66.7	24	1.0	14	1	33.3	3	0.7	7
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	589	21.5	5,762	0.9	51	1,041	38.0	10,268	0.6	46	1,255	45.8	11,713	0.5	22
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	50.0	12	1.1	25	2	100.0	24	0.3	3	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	39	23.5	329	0.8	86	40	24.1	374	0.4	37	125	75.3	1,122	0.8	47
45-64	15	20.5	132	0.6	72	24	32.9	181	0.5	40	48	65.8	420	0.6	43
65-74	229	23.4	2,301	0.9	57	377	38.5	3,876	0.6	44	411	42.0	4,071	0.5	20
75-84	197	22.3	2,006	1.0	45	354	40.0	3,576	0.6	46	369	41.7	3,546	0.5	18
85 and older	108	17.0	982	0.8	33	244	38.5	2,237	0.7	51	302	47.6	2,554	0.6	19
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Table D7B

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2002 file for New Hampshire, released by CMS in 07/2006. 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 (May 13 2003).

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

TABLE D.7C
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR SIXTH TO EIGHTH TOP DRUG GROUPS
 SEPARATELY, BY SEX, BOE, AND AGE^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, NEW HAMPSHIRE, 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 \$
All	3,930	19.3 %	42,427	0.7	\$56	8,455	41.5 %	90,042	0.5	\$27	5,530	27.1 %	58,575	0.8	\$36
Female	2,705	19.6	29,246	0.7	57	6,278	45.5	67,397	0.5	26	3,913	28.4	41,720	0.8	35
Disabled	930	21.6	10,339	0.7	56	2,185	50.7	24,470	0.4	25	1,133	26.3	12,530	0.8	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	0	0.0	0	0.0	0	4	23.5	44	0.2	4	0	0.0	0	0.0	0
21-44	153	9.3	1,725	0.6	44	693	42.2	7,896	0.4	21	199	12.1	2,239	0.6	35
45-64	771	29.5	8,553	0.7	59	1,474	56.4	16,374	0.5	27	914	35.0	10,059	0.8	43
65-74	5	17.2	49	0.9	73	10	34.5	108	0.8	63	14	48.3	160	0.9	42
75-84	0	0.0	0	0.0	0	4	66.7	48	0.5	37	0	0.0	0	0.0	0
85 and older	1	16.7	12	0.4	23	0	0.0	0	0.0	0	6	100.0	72	0.8	36
Other Eligibles	1,775	18.7	18,907	0.7	57	4,093	43.1	42,927	0.5	27	2,780	29.3	29,190	0.8	32
5 and younger	1	100.0	12	0.6	12	1	100.0	12	0.1	2	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	20.0	12	0.3	16	2	40.0	19	0.2	6	0	0.0	0	0.0	0
21-44	33	6.7	361	0.6	49	195	39.8	2,002	0.3	12	54	11.0	582	0.8	45
45-64	17	19.5	171	0.7	67	31	35.6	348	0.4	20	21	24.1	238	0.7	34
65-74	735	34.7	8,050	0.7	59	1,153	54.5	12,405	0.5	31	888	42.0	9,604	0.8	36
75-84	748	23.6	7,944	0.8	58	1,419	44.8	14,826	0.6	29	1,128	35.6	11,847	0.8	32
85 and older	240	6.6	2,357	0.7	50	1,292	35.7	13,315	0.5	22	689	19.0	6,919	0.8	26
Male	1,225	18.6	13,181	0.7	55	2,177	33.1	22,645	0.5	27	1,617	24.6	16,855	0.8	37
Disabled	772	20.2	8,598	0.7	54	937	24.5	10,352	0.5	26	763	19.9	8,417	0.8	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	0	0.0	0	0.0	0	5	25.0	59	0.1	5	2	10.0	24	0.5	19
21-44	243	12.4	2,728	0.7	48	346	17.7	3,807	0.4	20	209	10.7	2,298	0.7	38
45-64	523	28.7	5,805	0.8	57	579	31.7	6,418	0.6	30	547	30.0	6,044	0.8	43
65-74	4	14.3	41	0.5	41	6	21.4	56	0.8	32	2	7.1	24	0.3	36
75-84	2	66.7	24	1.0	37	0	0.0	0	0.0	0	3	100.0	27	0.4	53
85 and older	0	0.0	0	0.0	0	1	50.0	12	0.1	3	0	0.0	0	0.0	0
Other Eligibles	453	16.5	4,583	0.8	57	1,240	45.2	12,293	0.6	29	854	31.1	8,438	0.8	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	1	50.0	12	0.7	39	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	3	100.0	36	0.6	25	0	0.0	0	0.0	0
21-44	12	7.2	98	0.5	44	27	16.3	273	0.4	18	14	8.4	136	1.1	59
45-64	12	16.4	73	0.7	66	17	23.3	166	0.3	11	16	21.9	91	0.7	24
65-74	259	26.5	2,744	0.7	58	467	47.7	4,766	0.6	34	358	36.6	3,672	0.8	36
75-84	134	15.1	1,346	0.8	58	435	49.2	4,390	0.6	27	325	36.7	3,274	0.8	31
85 and older	35	5.5	310	0.7	46	291	45.9	2,662	0.5	24	141	22.2	1,265	0.8	25
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Table D7C

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2002 file for New Hampshire, released by CMS in 07/2006. 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 (May 13 2003).
- Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.7D
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR NINTH AND TENTH TOP DRUG GROUPS
 SEPARATELY, BY SEX, BOE, AND AGE^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, NEW HAMPSHIRE, 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
All	6,137	30.1 %	67,010	0.5	\$28	6,157	30.2 %	64,374	0.8	\$24	20,373	202,150
Female	4,682	33.9	51,345	0.5	31	4,400	31.9	46,348	0.8	24	13,800	138,169
Disabled	1,686	39.1	19,042	0.4	25	912	21.1	10,105	0.7	22	4,313	45,512
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	2	11.8	20	0.3	1	0	0.0	0	0.0	0	17	161
21-44	608	37.1	6,862	0.3	15	136	8.3	1,539	0.6	17	1,641	17,366
45-64	1,068	40.9	12,069	0.4	31	764	29.2	8,433	0.7	22	2,614	27,590
65-74	5	17.2	55	0.9	80	7	24.1	84	0.7	32	29	262
75-84	1	16.7	12	0.1	0	2	33.3	24	0.7	88	6	72
85 and older	2	33.3	24	0.1	5	3	50.0	25	1.0	14	6	61
Other Eligibles	2,996	31.6	32,303	0.5	34	3,488	36.8	36,243	0.8	25	9,487	92,657
5 and younger	0	0.0	0	0.0	0	1	100.0	12	0.2	1	1	12
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
15-20	2	40.0	19	0.2	8	1	20.0	12	0.4	9	5	39
21-44	219	44.7	2,369	0.3	15	40	8.2	439	0.6	18	490	4,589
45-64	34	39.1	392	0.4	12	17	19.5	180	0.7	16	87	826
65-74	697	32.9	7,757	0.5	38	883	41.7	9,576	0.7	24	2,116	21,151
75-84	1,002	31.6	10,970	0.6	38	1,306	41.3	13,725	0.8	25	3,166	31,477
85 and older	1,042	28.8	10,796	0.6	33	1,240	34.2	12,299	0.8	26	3,622	34,563
Male	1,455	22.1	15,665	0.4	20	1,757	26.7	18,026	0.7	22	6,573	63,981
Disabled	858	22.4	9,601	0.4	15	729	19.0	7,859	0.7	22	3,831	39,811
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	15.0	33	0.2	3	2	10.0	18	0.8	7	20	211
21-44	396	20.3	4,418	0.3	9	195	10.0	2,126	0.7	20	1,953	20,720
45-64	454	24.9	5,095	0.4	20	522	28.6	5,614	0.7	22	1,825	18,580
65-74	4	14.3	43	0.7	35	9	32.1	89	0.7	17	28	249
75-84	1	33.3	12	0.4	32	1	33.3	12	1.0	42	3	27
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	24
Other Eligibles	597	21.8	6,064	0.5	29	1,028	37.5	10,167	0.8	22	2,742	24,170
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	0.6	5	2	24
15-20	0	0.0	0	0.0	0	2	66.7	24	0.5	8	3	14
21-44	35	21.1	319	0.2	5	21	12.7	196	0.6	26	166	1,316
45-64	17	23.3	158	0.4	16	17	23.3	147	0.9	32	73	460
65-74	202	20.6	2,122	0.4	25	375	38.3	3,861	0.7	21	979	8,987
75-84	207	23.4	2,158	0.5	30	366	41.4	3,668	0.8	23	885	8,087
85 and older	136	21.5	1,307	0.7	40	246	38.8	2,259	0.8	23	634	5,282
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0

Table D7D

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2002 file for New Hampshire, released by CMS in 07/2006. 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 (May 13 2003).

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

TABLE D.8
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BENEFICIARY CHARACTERISTIC^{a, b}
 DUAL ELIGIBLE BENEFICIARIES, NEW HAMPSHIRE, 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
All	\$287	6.6	4,771	47,585
Age				
0-64	516	8.1	213	2,234
65-74	389	7.9	479	4,823
75-84	309	7.0	1,587	15,696
85 and older	233	5.9	2,492	24,832
Unknown	0	0.0	0	0
Gender				
Female	277	6.5	3,798	38,510
Male	331	7.0	973	9,075
Unknown	0	0.0	0	0
Race				
White	287	6.6	4,735	47,239
African American	412	8.1	12	108
Other/unknown	285	6.4	24	238
Basis of Eligibility^c				
Aged	276	6.5	4,548	45,248
Disabled	509	8.1	223	2,337
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 New Hampshire, released by CMS in 07/2006. 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 2,138 beneficiaries who were in nursing facilities for part of their enrollment and their 18,325 benefit months were excluded from the analysis. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

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

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

TABLE D.9
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d, e}
 DUAL ELIGIBLE BENEFICIARIES, NEW HAMPSHIRE, 2002

Therapeutic Category	No. of Rx per Bene Mo among Users				\$ per Bene Mo among Users				Total # of Rx			Total Rx \$			Users		
	Total	Patented	Off-Patent	Generic	Total	Patented	Off-Patent	Generic	Total	Patented	Off-Patent	Generic	No.	As % of Dual All-Year NF Residents	No. of Bene Mos		
Anti-infective Agents	0.4	0.2	0.0	0.2	\$18	\$13	\$2	\$3	\$47	\$73	\$78	\$17	11,565	\$543,337	2,847	59.7 %	30,375
Biologicals	0.1	0.1	0.0	0.0	1	1	0	1	12	9	0	16	850	9,874	797	16.7	8,681
Antineoplastic Agents	0.7	0.3	0.0	0.4	95	59	0	36	139	193	11	99	1,526	211,756	223	4.7	2,218
Endocrine/Metabolic Drugs	1.2	0.5	0.3	0.5	36	25	5	7	30	53	15	15	26,020	768,591	2,060	43.2	21,155
Cardiovascular Agents	2.1	0.4	0.2	1.5	49	19	6	24	23	45	33	16	70,939	1,659,269	3,327	69.7	33,711
Respiratory Agents	0.9	0.5	0.1	0.3	40	27	4	9	46	58	62	27	16,177	744,850	1,783	37.4	18,817
Gastrointestinal Agents	1.0	0.3	0.0	0.6	51	31	1	19	53	100	73	30	25,223	1,332,888	2,528	53.0	26,215
Genitourinary Agents	0.6	0.5	0.0	0.1	31	27	1	3	51	59	29	22	5,480	277,296	861	18.0	9,049
CNS Drugs	1.8	1.0	0.1	0.6	114	94	4	16	65	90	51	26	62,292	4,041,932	3,464	72.6	35,313
Stimulants/Anti-obesity/Anorexia	0.9	0.1	0.0	0.8	23	11	0	12	26	125	40	15	555	14,688	65	1.4	650
Miscellaneous Psychological/Neurological Agents	0.9	0.8	0.0	0.0	97	97	0	1	114	114	0	66	5,303	602,996	633	13.3	6,197
Analgesics and Anesthetics	1.0	0.5	0.1	0.5	52	41	2	9	51	82	28	21	25,623	1,301,842	2,435	51.0	24,806
Neuromuscular Agents	1.3	0.5	0.1	0.8	73	40	5	28	55	84	73	36	17,503	970,730	1,275	26.7	13,276
Nutritional Products	0.8	0.0	0.0	0.8	15	0	0	14	18	23	13	18	8,530	153,998	1,043	21.9	10,590
Hematological Agents	1.2	0.2	0.4	0.6	35	25	5	5	30	134	13	9	14,424	432,147	1,228	25.7	12,244
Topical Products	0.6	0.2	0.0	0.4	18	12	1	5	29	50	26	14	19,971	570,434	2,896	60.7	31,067
Miscellaneous Products	0.3	0.2	0.0	0.1	7	5	0	2	23	24	0	23	895	20,814	292	6.1	3,152
Unknown Therapeutic Category	0.4	0.0	0.0	0.0	9	0	0	0	26	0	0	0	102	2,631	26	0.5	284
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.	312,978	13,660,073	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2002 file for New Hampshire, released by CMS in 07/2006. 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 2,138 beneficiaries who were in nursing facilities for part of their enrollment and their 18,325 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 (May 13 2003).
- e. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. For information about this classification method, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003). In New Hampshire, 0.2 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^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, NEW HAMPSHIRE, 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	\$2,015,925	2,117	44.4 %	22,241	0.8	\$116	\$91
ANTIDEPRESSANTS	1,713,565	3,328	69.8	34,540	0.9	53	50
ULCER DRUGS	1,119,823	1,984	41.6	20,685	0.7	76	54
ANALGESICS - Narcotic	770,204	2,123	44.5	21,407	0.7	50	36
ANTICONVULSANT	653,164	1,096	23.0	11,690	1.0	54	56
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	606,119	645	13.5	6,330	0.9	112	96
ANTIASTHMATIC	558,104	1,980	41.5	20,867	0.6	48	27
ANALGESICS - ANTI-INFLAMMATORY	510,031	1,374	28.8	14,831	0.6	56	34
ANTI-DIABETIC	457,267	1,327	27.8	13,975	0.9	35	33
ANTI-HYPERTENSIVE	450,785	1,541	32.3	15,835	0.9	31	28
Total	8,854,987	17,515		182,401	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2002 file for New Hampshire, released by CMS in 07/2006. 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 2,138 beneficiaries who were in nursing facilities for part of their enrollment and their 18,325 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 (May 13 2003).

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

TABLE D.10A

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR TOP 10 DRUG GROUPS COMBINED AND FIRST AND SECOND TOP DRUG GROUPS SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BOE, AND AGE^{a, b, c, d}
DUAL ELIGIBLE BENEFICIARIES, NEW HAMPSHIRE, 2002

Beneficiary Characteristics	All Top 10 Drug Groups					ANTIPSYCHOTICS					ANTIDEPRESSANTS						
	No. of Rx	Rx \$	Users as %			Mean Rx \$	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	Users of All-Year of All-Year Residents	NF	No. of Bene Mos among Users	Mean No. of Rx	Users of All-Year of All-Year Residents	NF	No. of Bene Mos among Users	Mean No. of Rx
			2,117	44.4 %	22,241												
All	145,928	\$8,854,987	2,117	44.4 %	22,241	0.8	\$91	3,328	69.8 %		34,540	0.9	\$50				
Female	115,569	6,957,443	1,672	44.0	17,770	0.8	87	2,654	69.9		28,072	0.9	50				
Disabled	6,200	416,443	63	47.7	721	0.8	119	107	81.1		1,185	1.1	63				
64 or younger	5,872	398,057	61	48.4	697	0.8	119	103	81.7		1,137	1.1	65				
65-74	202	10,703	1	50.0	12	0.1	3	3	150.0		36	0.8	18				
75-84	0	0	0	0.0	0	0.0	0	0	0.0		0	0.0	0				
85 and older	126	7,683	1	25.0	12	1.5	236	1	25.0		12	0.9	31				
Other Eligibles	109,369	6,541,000	1,609	43.9	17,049	0.8	85	2,547	69.5		26,887	0.9	50				
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0		0	0.0	0				
65-74	12,748	856,947	174	58.8	1,910	0.9	125	231	78.0		2,556	1.0	54				
75-84	41,775	2,520,137	605	50.2	6,328	0.8	95	948	78.6		9,837	1.0	51				
85 and older	54,846	3,163,916	830	38.4	8,811	0.7	70	1,368	63.2		14,494	0.9	48				
Male	30,359	1,897,544	445	45.7	4,471	0.9	106	674	69.3		6,468	0.9	48				
Disabled	4,237	391,534	53	58.2	580	1.0	194	62	68.1		691	1.0	56				
64 or younger	4,102	383,994	49	56.3	544	1.1	201	59	67.8		661	1.0	56				
65-74	134	7,502	4	133.3	36	0.8	90	3	100.0		30	1.7	63				
75-84	0	0	0	0.0	0	0.0	0	0	0.0		0	0.0	0				
85 and older	1	38	0	0.0	0	0.0	0	0	0.0		0	0.0	0				
Other Eligibles	26,122	1,506,010	392	44.4	3,891	0.8	93	612	69.4		5,777	0.9	47				
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0		0	0.0	0				
65-74	5,980	379,176	88	49.4	908	0.8	120	142	79.8		1,382	1.0	54				
75-84	11,570	652,901	179	47.0	1,779	0.9	93	244	64.0		2,307	0.9	46				
85 and older	8,572	473,933	125	38.7	1,204	0.7	75	226	70.0		2,088	0.9	42				
Unknown	0	0	0	0.0	0	0.0	0	0	0.0		0	0.0	0				

Source: Data for this table are from the MAX 2002 file for New Hampshire, released by CMS in 07/2006. 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 2,138 beneficiaries who were in nursing facilities for part of their enrollment and their 18,325 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 (May 13 2003).

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

TABLE D.10B
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY
 AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BOE, AND AGE^{a,b,c,d}
 DUAL ELIGIBLE BENEFICIARIES, NEW HAMPSHIRE, 2002

Beneficiary Characteristics	ULCER DRUGS										ANALGESICS - Narcotic										ANTICONVULSANT									
	Users as %					Users as %					Users as %					Users as %					Users as %					Users as %				
	No. of Users	No. of Bene Users	Mean No. of Rx	Mean Rx \$	Mean No. of Rx	No. of Users	No. of Bene Users	Mean No. of Rx	Mean Rx \$	Mean No. of Rx	No. of Users	No. of Bene Users	Mean No. of Rx	Mean Rx \$	Mean No. of Rx	No. of Users	No. of Bene Users	Mean No. of Rx	Mean Rx \$	Mean No. of Rx	No. of Users	No. of Bene Users	Mean No. of Rx	Mean Rx \$	Mean No. of Rx	No. of Users	No. of Bene Users	Mean No. of Rx	Mean Rx \$	
All	1,984	20,685	0.7	\$54	0.7	2,123	21,407	0.7	\$36	0.7	1,096	11,690	1.0	\$56																
Female	1,575	16,627	0.7	54	0.7	1,726	17,754	0.7	34	0.7	796	8,583	1.0	54																
Disabled	55	562	0.7	65	0.7	79	842	0.9	38	0.9	91	983	1.3	104																
64 or younger	50	502	0.7	68	0.7	76	806	0.8	31	0.8	89	959	1.3	106																
65-74	3	36	0.4	44	0.4	2	24	4.3	255	4.3	1	12	0.3	11																
75-84	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0																
85 and older	2	24	0.5	33	0.5	1	12	1.1	45	1.1	1	12	1.0	47																
Other Eligibles	1,520	16,065	0.7	53	0.7	1,647	16,912	0.7	34	0.7	705	7,600	1.0	48																
64 or younger	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0																
65-74	126	1,362	0.7	65	0.7	147	1,643	0.9	51	0.9	137	1,552	1.2	69																
75-84	523	5,516	0.7	54	0.7	538	5,485	0.7	34	0.7	315	3,358	1.0	47																
85 and older	871	9,187	0.7	51	0.7	962	9,784	0.7	31	0.7	253	2,690	0.9	35																
Male	409	4,058	0.7	57	0.7	397	3,653	0.7	45	0.7	300	3,107	1.1	61																
Disabled	34	382	0.8	55	0.8	50	524	1.2	163	1.2	63	714	1.2	96																
64 or younger	32	358	0.8	58	0.8	49	518	1.2	165	1.2	62	702	1.2	97																
65-74	2	24	0.1	16	0.1	1	6	0.3	4	0.3	1	12	1.0	12																
75-84	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0																
85 and older	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0																
Other Eligibles	375	3,676	0.7	57	0.7	347	3,129	0.7	25	0.7	237	2,393	1.0	51																
64 or younger	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0																
65-74	83	789	0.7	57	0.7	64	573	0.7	26	0.7	71	682	1.2	68																
75-84	159	1,590	0.7	55	0.7	141	1,273	0.7	24	0.7	104	1,085	1.0	48																
85 and older	133	1,297	0.8	59	0.8	142	1,283	0.7	26	0.7	62	626	0.9	38																
Unknown	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0																

Source: Data for this table are from the MAX 2002 file for New Hampshire, released by CMS in 07/2006. 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 2,138 beneficiaries who were in nursing facilities for part of their enrollment and their 18,325 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 (May 13 2003).
- Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.10C

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY
 AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BOE, AND AGE^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, NEW HAMPSHIRE, 2002

Beneficiary Characteristics	MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL						ANTI-ASTHMATIC						ANALGESICS - ANTI-INFLAMMATORY						
	Users as %			Users as %			Users as %			Users as %			Users as %			Users as %			
	No. of Users	No. of Bene Users	Mean Rx \$	No. of Users	No. of Bene Users	Mean Rx \$	No. of Users	No. of Bene Users	Mean Rx \$	No. of Users	No. of Bene Users	Mean Rx \$	No. of Users	No. of Bene Users	Mean Rx \$	No. of Users	No. of Bene Users	Mean Rx \$	
All	645	6,330	0.9	1,980	20,867	0.6	1,980	20,867	0.6	1,374	14,831	0.6	1,374	14,831	0.6	1,374	14,831	0.6	\$34
Female	517	5,227	0.9	1,498	15,983	0.5	1,498	15,983	0.5	1,159	12,606	0.6	1,159	12,606	0.6	1,159	12,606	0.6	34
Disabled	9	96	0.9	74	795	0.8	74	795	0.8	45	502	0.5	45	502	0.5	45	502	0.5	16
64 or younger	9	96	0.9	72	771	0.8	72	771	0.8	45	502	0.5	45	502	0.5	45	502	0.5	16
65-74	0	0	0.0	2	24	0.5	2	24	0.5	0	0	0.0	0	0	0.0	0	0	0.0	0
75-84	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	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
Other Eligibles	508	5,131	0.9	1,424	15,188	0.5	1,424	15,188	0.5	1,114	12,104	0.6	1,114	12,104	0.6	1,114	12,104	0.6	35
64 or younger	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0
65-74	33	325	0.8	143	1,605	0.6	143	1,605	0.6	84	938	0.7	84	938	0.7	84	938	0.7	42
75-84	208	2,072	0.9	514	5,295	0.6	514	5,295	0.6	386	4,211	0.6	386	4,211	0.6	386	4,211	0.6	36
85 and older	267	2,734	0.8	767	8,288	0.5	767	8,288	0.5	644	6,955	0.6	644	6,955	0.6	644	6,955	0.6	33
Male	128	1,103	0.9	482	4,884	0.6	482	4,884	0.6	215	2,225	0.6	215	2,225	0.6	215	2,225	0.6	36
Disabled	7	75	0.6	44	476	0.8	44	476	0.8	25	284	0.6	25	284	0.6	25	284	0.6	31
64 or younger	7	75	0.6	43	464	0.8	43	464	0.8	24	272	0.6	24	272	0.6	24	272	0.6	29
65-74	0	0	0.0	0	0	0.0	0	0	0.0	1	12	1.0	1	12	1.0	1	12	1.0	77
75-84	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0
85 and older	0	0	0.0	1	12	0.1	1	12	0.1	3	0	0.0	3	0	0.0	0	0	0.0	0
Other Eligibles	121	1,028	0.9	438	4,408	0.5	438	4,408	0.5	190	1,941	0.6	190	1,941	0.6	190	1,941	0.6	37
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	19	146	0.9	88	901	0.5	88	901	0.5	29	295	0.6	29	295	0.6	29	295	0.6	34
75-84	59	513	0.8	193	1,970	0.6	193	1,970	0.6	89	906	0.6	89	906	0.6	89	906	0.6	30
85 and older	43	369	0.9	157	1,537	0.5	157	1,537	0.5	72	740	0.7	72	740	0.7	72	740	0.7	46
Unknown	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0

Source: Data for this table are from the MAX 2002 file for New Hampshire, released by CMS in 07/2006. 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 2,138 beneficiaries who were in nursing facilities for part of their enrollment and their 18,325 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 (May 13 2003).
- Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.10D
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR NINTH AND TENTH TOP DRUG GROUPS
 SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BOE, AND AGE^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, NEW HAMPSHIRE, 2002

Beneficiary Characteristics	ANTIDIABETIC					ANTIHYPERTENSIVE					Bene Mos among All-Year NF Residents			
	Users as %		Mean		No. of Bene Mos among Users	Users as %		Mean		No. of Bene Mos among Users		All-Year NF Residents		
	No. of Users	Residents	Rx	Rx-\$		Residents	Rx	Rx-\$	Residents					
All	1,327	27.8 %	0.9	\$33	13,975	0.9	\$33	1,541	32.3 %	15,835	0.9	\$29	4,771	47,585
Female	1,017	26.8	0.9	33	10,733	0.9	33	1,187	31.3	12,339	0.9	29	3,798	38,510
Disabled	46	34.8	1.2	42	537	1.2	42	32	24.2	350	0.9	29	132	1,371
64 or younger	41	32.5	1.2	41	477	1.2	41	28	22.2	313	0.9	29	126	1,310
65-74	1	50.0	2.3	61	12	2.3	61	1	50.0	12	0.9	68	2	24
75-84	0	0.0	0.0	0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	4	100.0	0.7	47	48	0.7	47	3	75.0	25	1.0	14	4	37
Other Eligibles	971	26.5	0.9	32	10,196	0.9	32	1,155	31.5	11,989	0.9	29	3,666	37,139
64 or younger	0	0.0	0.0	0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	132	44.6	1.0	37	1,465	1.0	37	91	30.7	1,035	0.9	31	296	3,114
75-84	421	34.9	1.0	34	4,470	1.0	34	401	33.3	4,163	0.9	27	1,206	12,157
85 and older	418	19.3	0.9	28	4,261	0.9	28	663	30.6	6,791	0.9	29	2,164	21,868
Male	310	31.9	0.9	33	3,242	0.9	33	354	36.4	3,496	0.9	29	973	9,075
Disabled	27	29.7	1.0	50	302	1.0	50	23	25.3	248	0.9	35	91	966
64 or younger	27	31.0	1.0	50	302	1.0	50	20	23.0	218	0.9	35	87	924
65-74	0	0.0	0.0	0	0	0.0	0	3	100.0	30	0.9	30	3	30
75-84	0	0.0	0.0	0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0.0	0	0	0.0	0	0	0.0	0	0.0	0	1	12
Other Eligibles	283	32.1	0.9	32	2,940	0.9	32	331	37.5	3,248	0.9	28	882	8,109
64 or younger	0	0.0	0.0	0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	67	37.6	0.9	35	742	0.9	35	75	42.1	754	0.9	24	178	1,655
75-84	147	38.6	0.9	30	1,498	0.9	30	144	37.8	1,373	0.9	30	381	3,539
85 and older	69	21.4	1.0	31	700	1.0	31	112	34.7	1,121	0.9	29	323	2,915
Unknown	0	0.0	0.0	0	0	0.0	0	0	0.0	0	0.0	0	0	0

Source: Data for this table are from the MAX 2002 file for New Hampshire, released by CMS in 07/2006. 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 2,138 beneficiaries who were in nursing facilities for part of their enrollment and their 18,325 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 (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^{a,b}
 NEW HAMPSHIRE, 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		Total No. Part D Excl Rx	Part D Excl Rx \$ per Bene	Total Part D Excl Rx \$	\$ per Part D Excl Rx	Part D Excl Rx \$ as % of All Dual Rx	Total No. of Benes
			Excl Rx	Bene						
All	14,557	71.5 %	15.4	314,233	\$156	\$3,168,033	\$10	5.4 %	20,373	
Age										
5 and younger	1	100.0	26.0	26	1,400	1,400	54	14.1	1	
6-14	2	100.0	12.5	25	121	242	10	1.0	2	
15-20	21	46.7	5.1	228	77	3,448	15	3.2	45	
21-44	2,441	57.4	7.1	30,351	130	552,564	18	4.0	4,250	
45-64	3,111	67.6	11.9	54,751	156	719,608	13	4.0	4,599	
65-74	1,993	63.2	13.0	40,981	134	421,122	10	5.1	3,152	
75-84	3,167	78.0	19.4	78,837	162	659,143	8	6.5	4,060	
85 and older	3,821	89.6	25.6	109,034	190	810,506	7	9.3	4,264	
Unknown	0	0.0	0.0	0	0	0	0	0.0	0	
Basis of Eligibility^c										
Aged	8,938	78.4	20.0	227,996	165	1,879,738	8	7.0	11,399	
Disabled	5,176	63.6	10.1	82,630	149	1,215,184	15	4.0	8,144	
Adults	436	53.3	4.3	3,532	87	71,127	20	4.1	818	
Children	7	58.3	6.3	75	165	1,984	26	3.1	12	
Unknown	0	0.0	0.0	0	0	0	0	0.0	0	
Gender										
Female	10,489	76.0	17.2	237,712	169	2,334,429	10	5.9	13,800	
Male	4,068	61.9	11.6	76,521	127	833,604	11	4.3	6,573	
Unknown	0	0.0	0.0	0	0	0	0	0.0	0	
Race										
White	14,355	71.9	15.6	311,397	157	3,141,779	10	5.4	19,965	
African American	71	59.7	10.0	1,193	85	10,134	8	2.7	119	
Other/unknown	131	45.3	5.7	1,643	56	16,120	10	3.2	289	
Use of Nursing Facilities^d										
Entire year	4,596	96.3	33.0	157,559	253	1,209,413	8	8.9	4,771	
Part year	1,996	93.4	21.5	45,869	180	384,372	8	7.5	2,138	
None	7,965	59.2	8.2	110,805	117	1,574,248	14	3.9	13,464	
Maintenance Assistance Status										
Cash	2,231	63.8	9.9	34,670	124	434,741	13	4.1	3,496	
Medically needy	5,551	73.9	16.4	122,842	154	1,158,759	9	5.6	7,509	
Poverty related	390	50.4	4.9	3,759	62	47,937	13	5.1	774	
Other/unknown	6,385	74.3	17.8	152,962	178	1,526,596	10	5.7	8,594	

Table D11

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2002 file for New Hampshire, released by CMS in 07/2006. 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^{a,b}
 NEW HAMPSHIRE, 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
All	1.6	\$16	\$10	\$0	\$4	202,150
Age						
5 and younger	2.2	117	54	0	1	12
6-14	1.0	10	10	0	0	24
15-20	0.5	8	15	0	4	425
21-44	0.7	13	18	0	4	43,991
45-64	1.2	15	13	0	5	47,456
65-74	1.3	14	10	0	4	30,649
75-84	2.0	17	8	0	3	39,663
85 and older	2.7	20	7	0	3	39,930
Unknown	0.0	0	0	0	0	0
Basis of Eligibility^c						
Aged	2.1	17	8	0	3	109,519
Disabled	1.0	14	15	0	5	85,323
Adults	0.5	10	20	0	5	7,213
Children	0.8	21	26	0	0	95
Unknown	0.0	0	0	0	0	0
Gender						
Female	1.7	17	10	0	4	138,169
Male	1.2	13	11	0	4	63,981
Unknown	0.0	0	0	0	0	0
Race						
White	1.6	16	10	0	4	198,393
African American	1.0	9	8	0	2	1,164
Other/unknown	0.6	6	10	0	1	2,593
Use of Nursing Facilities^d						
Entire year	3.3	25	8	0	4	47,585
Part year	2.5	21	8	0	3	18,325
None	0.8	12	14	0	4	136,240
Maintenance Assistance Status						
Cash	0.9	11	13	0	4	39,084
Medically needy	1.8	17	9	0	4	68,180
Poverty related	0.6	8	13	0	2	6,228
Other/unknown	1.7	17	10	0	4	88,658

Source: Data for this table are from the MAX 2002 file for New Hampshire, released by CMS in 07/2006. 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^{a,b,c}
NEW HAMPSHIRE, 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
All	23,598	\$134	\$3,168,033	100.0 %	314,233	\$10	100.0 %
Anorexia or weight loss/gain	14	163	2,281	0.1	33	69	0.0
Fertility drugs	0	0	0	0.0	0	0	0.0
Drugs for cosmetic purposes	16	12	186	0.0	22	8	0.0
Cough and cold medications	2,351	92	216,369	6.8	7,848	28	2.5
Vitamins and minerals	3,085	134	412,149	13.0	21,821	19	6.9
Non-prescription drugs	11,600	137	1,589,663	50.2	235,135	7	74.8
Barbiturates	232	74	17,124	0.5	2,612	7	0.8
Benzodiazepines	5,812	136	791,255	25.0	44,169	18	14.1
Other Part D Excl Rx Drugs	488	285	139,006	4.4	2,593	54	0.8

Source: Data for this table are from the MAX 2002 file for New Hampshire, released by CMS in 07/2006. 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.

APPENDIX TABLE A.3

CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY^{a, b}
 DUAL ELIGIBLE BENEFICIARIES, NEW HAMPSHIRE, 2002

Beneficiary Characteristics	No. of Benes					No. of Bene Mos					
	All	Aged	Disabled	Adults	Children	All	Aged	Disabled	Adults	Children	Unknown
All	20,391	11,399	8,145	835	12	202,453	109,519	85,341	7,498	95	0
Age											
5 and younger	1	0	0	0	1	12	0	0	0	12	0
6-14	2	0	0	0	2	24	0	0	0	24	0
15-20	45	0	37	0	8	425	0	372	0	53	0
21-44	4,266	0	3,595	670	1	44,245	0	38,104	6,135	6	0
45-64	4,601	0	4,439	162	0	47,505	0	46,170	1,335	0	0
65-74	3,152	3,092	57	3	0	30,649	30,110	511	28	0	0
75-84	4,060	4,051	9	0	0	39,663	39,564	99	0	0	0
85 and older	4,264	4,256	8	0	0	39,930	39,845	85	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0
Gender											
Female	13,814	8,902	4,314	591	7	138,427	87,175	45,530	5,665	57	0
Male	6,577	2,497	3,831	244	5	64,026	22,344	39,811	1,833	38	0
Unknown	0	0	0	0	0	0	0	0	0	0	0
Race											
White	19,982	11,186	7,975	810	11	198,677	107,609	83,684	7,292	92	0
African American	119	34	75	9	1	1,164	337	735	89	3	0
Other/unknown	290	179	95	16	0	2,612	1,573	922	117	0	0
Use of Nursing Facilities^c											
Entire year	4,771	4,548	223	0	0	47,585	45,248	2,337	0	0	0
Part year	2,138	1,960	177	1	0	18,325	16,444	1,869	12	0	0
None	13,482	4,891	7,745	834	12	136,543	47,827	81,135	7,486	95	0
Maintenance Assistance Status											
Cash	3,499	1,169	2,268	62	0	39,126	13,290	25,399	437	0	0
Medically needy	7,513	4,810	2,223	479	1	68,299	42,623	21,254	4,421	1	0
Poverty related	779	344	384	47	4	6,303	2,706	3,195	376	26	0
Other/unknown	8,600	5,076	3,270	247	7	88,725	50,900	35,493	2,264	68	0
Dual Status^d											
Full dual, all year	19,006	10,838	7,361	795	12	189,547	104,434	77,953	7,065	95	0
Full dual, part year	1,385	561	784	40	0	12,906	5,085	7,388	433	0	0
Managed Care Status											
FFS all year	20,345	11,399	8,141	793	12	202,002	109,519	85,310	7,078	95	0
FFS part year, with Rx claims	25	0	1	24	0	259	0	8	251	0	0
FFS part year, no Rx claims	3	0	2	1	0	30	0	18	12	0	0
MC all year, with Rx claims	18	0	1	17	0	162	0	5	157	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 New Hampshire, released by CMS in 07/2006. 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^a
 DUAL ELIGIBLE BENEFICIARIES, NEW HAMPSHIRE, 2002

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
All	20,391	202,453	20,373	202,150	0	303
FFS all year	20,345	202,002	20,345	202,002	0	0
FFS part year, with Rx claims	25	259	25	135	0	124
FFS part year, with no Rx claims	3	30	3	13	0	17
MC all year, with Rx claims	18	162	0	0	0	162
MC all year, with no Rx claims	0	0	0	0	0	0

Source: Data for this table are from the MAX 2002 file for New Hampshire, released by CMS in 07/2006. 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.