STATISTICAL COMPENDIUM:
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2004
GEORGIA

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TABLE D.2

CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY[a, b]

DUAL ELIGIBLE BENEFICIARIES, GEORGIA, 2004

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown
All	**161,664**	**71,677**	**88,902**	**865**	**49**	**171**	**1,701,033**	**727,921**	**964,714**	**6,037**	**507**	**1,854**
Age												
5 and younger	17	0	14	0	3	0	180	0	155	0	25	0
6-14	32	0	25	0	7	0	361	0	287	0	74	0
15-20	350	0	330	1	19	0	3,820	0	3,616	6	198	0
21-44	25,739	0	25,113	601	13	12	276,701	0	272,275	4,158	134	134
45-64	38,159	0	37,834	217	5	103	400,985	0	398,205	1,620	52	1,108
65-74	36,623	19,467	17,058	41	1	56	392,372	197,286	194,232	230	12	612
75-84	34,814	28,243	6,566	5	0	0	367,716	293,390	74,303	23	0	0
85 and older	25,930	23,967	1,962	0	1	0	258,898	237,245	21,641	0	12	0
Unknown	0	0	0	0	0	0		0	0	0	0	0
Gender												
Female	108,336	54,111	53,394	636	24	171	1,155,751	559,559	589,597	4,475	266	1,854
Male	53,328	17,566	35,508	229	25	0	545,282	168,362	375,117	1,562	241	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	75,596	37,540	37,555	402	23	76	773,665	366,783	403,101	2,687	244	850
African American	66,850	25,304	41,019	437	21	69	717,295	265,058	448,152	3,139	203	743
Other/unknown	19,218	8,833	10,328	26	5	26	210,073	96,080	113,461	211	60	261
Use of Nursing Facilities[c]												
Entire year	22,181	19,357	2,824	0	0	0	230,223	199,447	30,776	0	0	0
Part year	12,938	11,097	1,841	0	0	0	121,639	103,155	18,484	0	0	0
None	126,545	41,223	84,237	865	49	171	1,349,171	425,319	915,454	6,037	507	1,854
Maintenance Assistance Status												
Cash	94,459	29,426	64,458	574	1	0	1,067,815	330,714	733,094	4,005	2	0
Medically needy	4,579	1,659	2,920	0	0	0	23,424	7,251	16,173	0	0	0
Poverty-related	5,519	1,926	3,207	187	28	171	53,980	18,969	31,635	1,234	288	1,854
Other/unknown	57,107	38,666	18,317	104	20	0	555,814	370,987	183,812	798	217	0
Dual Medicare Status[d]												
Full dual, all year	151,331	65,951	84,316	844	49	171	1,599,908	671,611	920,090	5,846	507	1,854
Full dual, part year	10,333	5,726	4,586	21	0	0	101,125	56,310	44,624	191	0	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	161,664	71,677	88,902	865	49	171	1,701,033	727,921	964,714	6,037	507	1,854
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 2004 file for Georgia, released by CMS in 01/2008. This table was produced on 03/25/2008.

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 2004. 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 = Centers for Medicare & Medicaid Services; FFS = fee-for-service pharmacy benefit; MAX = Medicaid Analytic Extract; Rx = pharmacy benefit.

ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC[a, b]
DUAL ELIGIBLE BENEFICIARIES, GEORGIA, 2004

Beneficiary Characteristics	Percentage with at Least One Rx	Mean Number of Rx	Mean Rx $	$ per Rx	Mean $, All Medicaid FFS $[c]	Rx $ as a Percentage of All Medicaid FFS $[d]	Number of Beneficiaries
All	**88.1 %**	**49.5**	**$2,836**	**$57**	**$13,329**	**21.3 %**	**161,664**
Age							
5 and younger	94.1	41.0	3,922	96	29,845	13.1	17
6-14	87.5	55.1	8,041	146	24,295	33.1	32
15-20	80.6	23.9	2,701	113	10,626	25.4	350
21-44	81.4	31.8	2,766	87	9,817	28.2	25,739
45-64	84.9	49.9	3,261	65	13,732	23.7	38,159
65-74	88.5	52.5	2,736	52	10,351	26.4	36,623
75-84	92.0	56.7	2,804	49	14,332	19.6	34,814
85 and older	93.8	52.8	2,460	47	19,096	12.9	25,930
Unknown	0.0	0.0	0	0	0	0.0	0
Basis of Eligibility[e]							
Aged	90.5	52.7	2,603	49	15,901	16.4	71,677
Disabled	86.2	47.1	3,033	64	11,318	26.8	88,902
Adults	80.3	26.2	1,721	66	6,057	28.4	865
Children	77.6	32.4	3,921	121	12,440	31.5	49
Unknown	95.3	49.2	3,650	74	17,826	20.5	171
Gender							
Female	91.2	54.8	2,986	54	13,878	21.5	108,336
Male	81.8	38.6	2,531	66	12,215	20.7	53,328
Unknown	0.0	0.0	0	0	0	0.0	0
Race							
White	89.5	56.7	3,268	58	15,666	20.9	75,596
African American	87.0	42.6	2,440	57	12,680	19.2	66,850
Other/unknown	86.6	45.1	2,518	56	6,396	39.4	19,218
Use of Nursing Facilities[f]							
Entire year	98.7	73.6	3,869	53	35,248	11.0	22,181
Part year	97.2	60.2	3,074	51	22,682	13.6	12,938
None	85.3	44.2	2,631	60	8,531	30.8	126,545
Maintenance Assistance Status							
Cash	89.0	48.2	2,809	58	8,598	32.7	94,459
Medically needy	75.0	25.4	1,743	69	6,589	26.5	4,579
Poverty related	80.3	29.9	1,920	64	7,455	25.8	5,519
Other/unknown	88.4	55.5	3,058	55	22,264	13.7	57,107

Source: Data for this table are from the MAX 2004 file for Georgia, released by CMS in 01/2008. This table was produced on 03/25/2008.

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. In seven states (DE, IA, NE, NY, TX, UT, and WV) the expenditures in this column include only Rx drug expenditures for those enrolled in capitated managed care plans, and not expenditures for other services covered by the plans or long-term-care services not covered by the plans. As a result, the amounts shown in this column for all Medicaid fee-for-service expenditures are lower than they would otherwise be.

d. In seven states (DE, IA, NE, NY, TX, UT, and WV) the Rx share of expenditures for all Medicaid services shown in this column is higher than it would be if all expenditures for these other services, including services provided in capitated managed care plans and long-term-care services, were included.

e. 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.

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

Bene(s) = beneficiary (or beneficiaries); CMS = Centers for Medicare & Medicaid Services; FFS = fee-for-service; 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, GEORGIA, 2004

Beneficiary Characteristics	Mean Number of Rx	Mean Rx $	Rx $ as a Percentage of All Medicaid FFS $[c]	Number of Rx, Percentage with: 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	Mean $, All Medicaid FFS $[d]	Number Beneficiaries	Benefit Months
All	4.7	$270	21.3 %	11.9 %	14.1 %	9.8 %	29.0 %	26.9 %	8.4 %	$1,267	161,664	1,701,033
Age												
5 and younger	3.9	370	13.1	5.9	11.8	23.5	35.3	17.6	5.9	2,819	17	180
6-14	4.9	713	33.1	12.5	0.0	12.5	34.4	34.4	6.3	2,154	32	361
15-20	2.2	247	25.4	19.4	34.9	13.4	20.9	10.6	0.9	974	350	3,820
21-44	3.0	257	28.2	18.6	26.3	12.3	25.0	14.5	3.3	913	25,739	276,701
45-64	4.7	310	23.7	15.1	13.7	9.5	26.7	25.7	9.4	1,307	38,159	400,985
65-74	4.9	255	26.4	11.5	12.9	9.5	29.3	27.6	9.1	966	36,623	392,372
75-84	5.4	266	19.6	8.0	10.1	8.9	30.7	32.1	10.3	1,357	34,814	367,716
85 and older	5.3	246	12.9	6.2	9.3	9.2	33.8	33.2	8.4	1,913	25,930	258,898
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Basis of Eligibility[e]												
Aged	5.2	256	16.4	9.5	10.9	9.2	30.6	30.1	9.6	1,566	71,677	727,921
Disabled	4.3	280	26.8	13.8	16.6	10.2	27.8	24.3	7.4	1,043	88,902	964,714
Adults	3.8	247	28.4	19.7	19.7	12.1	24.7	19.0	4.9	868	865	6,037
Children	3.1	379	31.5	22.4	18.4	14.3	24.5	18.4	2.0	1,202	49	507
Unknown	4.5	337	20.5	4.7	12.9	10.5	34.5	31.0	6.4	1,644	171	1,854
Gender												
Female	5.1	280	21.5	8.8	11.9	9.5	30.3	29.9	9.7	1,301	108,336	1,155,751
Male	3.8	248	20.7	18.2	18.5	10.3	26.4	20.8	5.8	1,195	53,328	545,282
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	5.5	319	20.9	10.5	10.9	8.2	27.1	30.9	12.4	1,531	75,596	773,665
African American	4.0	227	19.2	13.0	17.0	11.2	30.7	23.4	4.6	1,182	66,850	717,295
Other/unknown	4.1	230	39.4	13.4	16.5	10.8	30.6	23.1	5.6	585	19,218	210,073
Use of Nursing Facilities[f]												
Entire year	7.1	373	11.0	1.3	4.3	5.6	28.0	42.2	18.5	3,396	22,181	230,223
Part year	6.4	327	13.6	2.8	6.3	7.7	30.9	38.6	13.7	2,413	12,938	121,639
None	4.1	247	30.8	14.7	16.6	10.7	29.0	23.0	6.1	800	126,545	1,349,171
Maintenance Assistance Status												
Cash	4.3	248	32.7	11.0	16.4	10.8	30.8	24.8	6.2	761	94,459	1,067,815
Medically needy	5.0	341	26.5	25.0	9.0	8.4	25.2	23.3	9.2	1,288	4,579	23,424
Poverty related	3.1	196	25.8	19.7	25.9	12.6	23.7	14.5	3.7	762	5,519	53,980
Other/unknown	5.7	314	13.7	11.6	9.5	7.8	26.9	31.8	12.4	2,288	57,107	555,814

Source: Data for this table are from the MAX 2004 file for Georgia, released by CMS in 01/2008. This table was produced on 03/25/2008.

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. In seven states (DE, IA, NE, NY, TX, UT, and WV) the expenditures in this column include only Rx drug expenditures for those enrolled in capitated managed care plans, and not expenditures for other services covered by the plans or long-term-care services not covered by the plans. As a result, the amounts shown in this column for all Medicaid fee-for-service expenditures are lower than they would otherwise be.

d. In seven states (DE, IA, NE, NY, TX, UT, and WV) the Rx share of expenditures for all Medicaid services shown in this column is higher than it would be if all expenditures for these other services, including services provided in capitated managed care plans and long-term-care services, were included.

e. 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.

f. 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 = Centers for Medicare & Medicaid Services; FFS = fee-for-service; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; $ = Medicaid reimbursement.

AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC[a, b, c]

DUAL ELIGIBLE BENEFICIARIES, GEORGIA, 2004

Beneficiary Characteristics	All Rx			Patented Brand-Name Drugs			Off-Patent Brand-Name Drugs			Generic Drugs		
	Number of Rx	Rx $	$ per Rx	Number of Rx	Rx $	$ per Rx	Number of Rx	Rx $	$ per Rx	Number of Rx	Rx $	$ per Rx
All	**4.7**	**$270**	**$57**	**1.9**	**$203**	**$107**	**0.3**	**$16**	**$55**	**2.5**	**$50**	**$20**
Age												
5 and younger	3.9	370	96	1.7	308	185	0.5	19	43	1.8	43	25
6-14	4.9	713	146	2.0	631	313	0.3	17	54	2.5	62	24
15-20	2.2	247	113	0.9	207	219	0.1	9	81	1.1	31	28
21-44	3.0	257	87	1.2	202	167	0.2	16	90	1.5	38	25
45-64	4.7	310	65	1.9	233	121	0.3	21	73	2.5	56	22
65-74	4.9	255	52	2.0	191	95	0.3	15	52	2.6	49	19
75-84	5.4	266	49	2.2	198	91	0.3	14	42	2.8	52	19
85 and older	5.3	246	47	2.0	180	90	0.4	14	36	2.9	52	18
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility[d]												
Aged	5.2	256	49	2.1	191	92	0.3	15	42	2.7	50	19
Disabled	4.3	280	64	1.8	212	120	0.3	18	69	2.3	50	22
Adults	3.8	247	66	1.5	185	124	0.2	18	83	2.0	43	21
Children	3.1	379	121	1.5	324	213	0.1	7	71	1.5	48	32
Unknown	4.5	337	74	1.8	262	146	0.3	17	62	2.5	57	23
Gender												
Female	5.1	280	54	2.1	209	101	0.3	17	52	2.7	53	20
Male	3.8	248	66	1.5	189	124	0.2	15	64	2.0	43	22
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Race												
White	5.5	319	58	2.2	237	107	0.4	21	55	2.9	61	21
African American	4.0	227	57	1.6	174	109	0.2	12	53	2.1	41	19
Other/unknown	4.1	230	56	1.8	175	100	0.2	13	60	2.1	42	20
Use of Nursing Facilities[e]												
Entire year	7.1	373	53	2.7	276	101	0.6	23	42	3.8	73	19
Part year	6.4	327	51	2.5	242	98	0.5	20	41	3.4	65	19
None	4.1	247	60	1.7	187	110	0.2	15	63	2.2	45	21
Maintenance Assistance Status												
Cash	4.3	248	58	1.8	189	107	0.2	14	61	2.2	45	20
Medically needy	5.0	341	69	2.0	255	130	0.3	23	78	2.7	63	23
Poverty related	3.1	196	64	1.2	147	120	0.2	14	75	1.6	35	22
Other/unknown	5.7	314	55	2.2	233	105	0.4	20	48	3.0	61	20

Source: Data for this table are from the MAX 2004 file for Georgia, released by CMS in 01/2008. This table was produced on 03/25/2008.

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 Georgia, 0.5 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all combined. For information about this classification method, see Wolters Kluwer Health, http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615 (October 26, 2007).

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 = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; $ = Medicaid reimbursement.

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY[a, b, c, d]
DUAL ELIGIBLE BENEFICIARIES, GEORGIA, 2004

| Therapeutic Category | Number of Rx per Benefit Month Among Users | | | | $ per Benefit Month Among Users | | | | $ per Rx | | | | Total Number of Rx | Total Rx $ | Users[e] | | Number of Benefit Months |
	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic			Number	As a Percentage of Dual Benes	
Anti-infective Agents	0.4	0.2	0.0	0.2	$29	$23	$2	$5	$80	$147	$90	$25	360,741	$29,035,907	89,724	55.5 %	992,333
Biologicals	0.6	0.0	0.1	0.6	####	3	233	####	4972	1,233	3,465	5,165	259	1,287,847	35	0.0	402
Antineoplastic Agents	0.5	0.1	0.0	0.4	85	53	1	31	173	531	116	81	33,193	5,734,877	6,542	4.0	67,622
Endocrine/Metabolic Drugs	1.0	0.4	0.1	0.4	48	38	3	7	48	84	24	17	756,112	36,621,490	69,749	43.1	767,370
Cardiovascular Agents	1.9	0.8	0.1	1.1	71	52	2	17	37	69	30	16	2,240,705	83,583,487	107,862	66.7	1,175,021
Respiratory Agents	0.6	0.3	0.0	0.3	35	29	0	6	55	86	37	20	438,948	23,970,697	61,753	38.2	682,445
Gastrointestinal Agents	0.8	0.2	0.0	0.5	41	30	1	10	54	131	70	19	568,627	30,904,462	68,712	42.5	754,739
Genitourinary Agents	0.5	0.3	0.0	0.1	33	28	2	3	68	82	53	27	132,408	9,036,930	24,751	15.3	275,975
CNS Drugs	1.2	0.6	0.1	0.5	102	85	4	13	88	144	78	24	1,061,789	92,911,192	83,808	51.8	909,940
Stimulants/Anti-obesity/Anorexia	0.5	0.3	0.0	0.2	54	46	1	7	105	150	80	35	8,006	840,596	1,405	0.9	15,691
Miscellaneous Psychological/ Neurological Agents	0.8	0.8	0.0	0.0	118	118	0	1	147	151	38	27	121,831	17,953,271	14,346	8.9	151,596
Analgesics and Anesthetics	0.9	0.3	0.0	0.6	44	32	2	10	50	115	139	18	906,607	45,536,959	94,303	58.3	1,037,418
Neuromuscular Agents	0.9	0.2	0.2	0.5	62	30	18	14	71	135	95	30	490,849	35,019,702	50,987	31.5	563,325
Nutritional Products	0.6	0.0	0.0	0.6	9	0	0	9	16	22	15	15	229,306	3,565,076	35,545	22.0	385,300
Hematological Agents	0.8	0.3	0.2	0.3	71	60	6	5	89	182	32	17	258,143	22,876,301	30,263	18.7	323,586
Topical Products	0.5	0.2	0.0	0.2	23	15	2	5	48	72	51	24	336,553	16,075,614	63,693	39.4	710,472
Miscellaneous Products	0.4	0.1	0.0	0.2	85	65	6	15	231	603	318	60	11,087	2,556,187	2,827	1.7	29,905
Unknown Therapeutic Category	0.4	0.0	0.0	0.0	8	0	0	0	23	0	0	0	44,609	1,006,348	10,887	6.7	122,703
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.	7,999,773	458,516,943	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2004 file for Georgia, released by CMS in 01/2008. This table was produced on 03/25/2008.

a. Table D.6 includes the beneficiaries represented by Cell G of Table 1. 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.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615 (October 26, 2007).

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 Georgia, 0.5 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615 (October 26, 2007).

e. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 2004.

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & 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, GEORGIA, 2004

Top 10 Drug Groups	Total Medicaid Rx $	Users			Among Users		
		Number of Users	As a Percentage of Dual Beneficiaries	Number of Benefit Months	Number of Rx per Benefit Month	$ per Rx	Rx $ per Benefit Month
ANTIPSYCHOTICS	$57,888,706	41,918	25.9 %	459,343	0.7	$186	$126
ANTIDEPRESSANTS	29,222,692	72,749	45.0	797,116	0.6	58	37
ANTIHYPERLIPIDEMIC	27,866,616	42,688	26.4	481,631	0.6	90	58
ANTICONVULSANT	27,690,629	39,899	24.7	441,199	0.7	87	63
ANTIDIABETIC	26,695,583	59,233	36.6	654,359	0.7	57	41
ANTIHYPERTENSIVE	23,001,854	88,759	54.9	986,639	0.7	36	23
ULCER DRUGS	22,883,760	71,930	44.5	799,940	0.5	53	29
ANALGESICS - Narcotic	22,087,501	118,296	73.2	1,313,284	0.4	41	17
ANALGESICS - ANTI-INFLAMMATORY	19,368,270	62,399	38.6	712,724	0.4	70	27
NEUROLOGICAL	17,953,271	16,455	10.2	174,695	0.7	147	103
Total	274,658,882	614,326		6,820,930	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2004 file for Georgia, released by CMS in 01/2008. This table was produced on 03/25/2008.

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 2004. 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 2004. For information about these drug groups, see Wolters Kluwer Health, http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615 (October 26, 2007).

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

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS COMBINED

AND FIRST AND SECOND GROUPS SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE[a, b, c]

DUAL ELIGIBLE BENEFICIARIES, GEORGIA, 2004

Beneficiary Characteristics	All Top 10 Drug Groups		ANTIPSYCHOTICS					ANTIDEPRESSANTS				
	Number of Rx	Rx $	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx $ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx $ per Benefit Month
All	**3,927,659**	**$274,658,882**	**41,918**	**25.9 %**	**459,343**	**0.7**	**$126**	**72,749**	**45.0 %**	**797,116**	**0.6**	**$37**
Female	2,882,208	195,388,710	27,198	25.1	297,896	0.7	115	54,569	50.4	602,222	0.6	37
Disabled	1,470,222	108,133,150	13,431	25.2	153,257	0.6	132	29,644	55.5	337,315	0.6	35
5 and younger	19	185	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	148	3,834	0	0.0	0	0.0	0	1	11.1	12	1.1	7
15-20	1,228	90,482	19	14.3	202	0.7	147	26	19.5	304	0.5	28
21-44	234,276	22,133,355	4,288	35.7	48,917	0.6	137	7,287	60.7	82,584	0.5	34
45-64	663,271	50,639,001	6,129	27.6	69,719	0.6	138	14,874	67.1	168,134	0.6	36
65-74	381,797	24,042,646	1,778	14.8	20,661	0.7	121	5,135	42.6	59,747	0.6	32
75-84	149,878	8,987,875	908	17.2	10,346	0.6	105	1,833	34.7	21,069	0.6	31
85 and older	39,605	2,235,772	309	17.9	3,412	0.6	87	488	28.2	5,465	0.6	32
Other Eligibles	1,411,986	87,255,560	13,767	25.1	144,639	0.7	98	24,925	45.4	264,907	0.7	40
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	16	220	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	37	2,380	2	22.2	12	0.3	115	2	22.2	12	0.3	24
21-44	5,641	498,625	112	23.5	936	0.5	108	258	54.1	2,372	0.5	38
45-64	5,433	376,142	40	16.5	405	0.4	79	172	70.8	1,715	0.5	39
65-74	319,784	19,965,928	2,242	17.9	23,971	0.7	116	5,233	41.8	56,872	0.7	38
75-84	604,338	37,348,347	5,470	25.7	58,161	0.7	99	9,897	46.4	106,544	0.7	40
85 and older	476,737	29,063,918	5,901	29.0	61,154	0.7	90	9,363	46.0	97,392	0.7	41
Male	1,045,451	79,270,172	14,720	27.6	161,447	0.7	146	18,180	34.1	194,894	0.6	36
Disabled	672,900	55,997,716	10,250	28.9	116,721	0.7	163	11,844	33.4	131,109	0.6	34
5 and younger	38	1,735	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	120	3,209	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	2,029	261,721	63	32.0	726	0.7	228	55	27.9	643	0.6	38
21-44	200,275	20,949,656	5,022	38.3	57,773	0.7	166	4,547	34.7	51,031	0.5	35
45-64	325,404	26,040,671	4,294	27.4	48,386	0.8	167	5,651	36.1	61,252	0.6	35
65-74	112,223	6,823,957	611	12.2	6,916	0.7	128	1,240	24.8	14,209	0.6	30
75-84	28,481	1,669,436	209	16.4	2,358	0.8	113	289	22.6	3,262	0.7	32
85 and older	4,330	247,331	51	22.0	562	0.7	89	62	26.7	712	0.6	28
Other Eligibles	372,551	23,272,456	4,470	25.1	44,726	0.7	102	6,336	35.6	63,785	0.7	40
5 and younger	3	216	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	19	1,315	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	77	1,483	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	2,004	142,647	29	19.5	270	0.3	85	81	54.4	713	0.5	30
45-64	1,741	117,335	11	13.4	114	0.5	94	40	48.8	392	0.7	54
65-74	144,545	9,211,022	1,446	20.5	15,244	0.7	118	2,240	31.8	23,157	0.7	41
75-84	155,078	9,521,088	1,838	26.5	18,212	0.7	97	2,574	37.1	26,132	0.7	39
85 and older	69,084	4,277,350	1,146	31.8	10,886	0.7	89	1,401	38.9	13,391	0.7	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 2004 file for Georgia, released by CMS in 01/2008. This table was produced on 03/25/2008.

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 2004. 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 2004. For information about these drug groups, see Wolters Kluwer Health, http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615 (October 26, 2007).

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

TABLE D.7B

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR THIRD TO FIFTH TOP DRUG GROUPS

SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE[a, b, c]

DUAL ELIGIBLE BENEFICIARIES, GEORGIA, 2004

Beneficiary Characteristics	ANTIHYPERLIPIDEMIC					ANTICONVULSANT					ANTIDIABETIC				
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx $ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx $ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx $ per Benefit Month
All	**42,688**	**26.4 %**	**481,631**	**0.6**	**$58**	**39,899**	**24.7 %**	**441,199**	**0.7**	**$63**	**59,233**	**36.6 %**	**654,359**	**0.7**	**$41**
Female	31,146	28.7	354,915	0.6	58	26,403	24.4	293,381	0.7	60	44,229	40.8	494,131	0.7	41
Disabled	17,230	32.3	199,098	0.6	57	16,348	30.6	185,748	0.7	68	23,322	43.7	267,000	0.7	44
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	11.1	12	0.2	8	2	22.2	24	0.6	28	0	0.0	0	0.0	0
15-20	6	4.5	72	0.7	57	36	27.1	384	0.7	76	9	6.8	108	0.5	35
21-44	1,387	11.6	15,788	0.5	43	4,630	38.6	52,432	0.7	84	2,333	19.4	26,443	0.6	42
45-64	7,913	35.7	90,485	0.6	55	7,976	36.0	90,073	0.7	67	10,422	47.0	118,011	0.7	45
65-74	5,670	47.0	66,496	0.7	61	2,516	20.9	29,147	0.6	52	7,505	62.3	87,396	0.7	46
75-84	1,924	36.4	22,437	0.7	65	969	18.3	11,195	0.6	43	2,531	47.8	29,125	0.7	40
85 and older	329	19.0	3,808	0.7	59	219	12.7	2,493	0.6	34	522	30.2	5,917	0.7	34
Other Eligibles	13,916	25.3	155,817	0.7	59	10,055	18.3	107,633	0.7	45	20,907	38.1	227,131	0.8	37
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	2	22.2	24	1.0	28	0	0.0	0	0.0	0
21-44	33	6.9	295	0.5	47	117	24.5	1,074	0.6	68	70	14.7	585	0.5	39
45-64	64	26.3	668	0.6	55	80	32.9	767	0.5	50	83	34.2	845	0.6	42
65-74	4,616	36.9	51,751	0.6	56	2,672	21.3	29,135	0.7	52	6,088	48.6	66,606	0.7	39
75-84	6,469	30.4	72,974	0.7	61	4,093	19.2	44,333	0.7	45	9,242	43.4	101,610	0.8	38
85 and older	2,734	13.4	30,129	0.7	59	3,091	15.2	32,300	0.7	39	5,424	26.6	57,485	0.8	33
Male	11,542	21.6	126,716	0.6	57	13,496	25.3	147,818	0.8	69	15,004	28.1	160,228	0.7	41
Disabled	7,562	21.3	84,533	0.6	56	10,002	28.2	112,368	0.8	76	8,707	24.5	95,262	0.7	44
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	12.5	24	1.2	66	1	6.3	12	0.2	8	1	6.3	12	0.7	37
15-20	4	2.0	48	0.4	32	49	24.9	569	0.7	86	1	0.5	12	0.2	7
21-44	1,425	10.9	16,120	0.6	47	4,125	31.5	46,788	0.8	89	1,615	12.3	18,076	0.6	43
45-64	4,028	25.7	44,059	0.6	56	4,701	30.0	52,172	0.8	72	4,764	30.4	50,819	0.7	44
65-74	1,715	34.3	19,795	0.7	64	911	18.2	10,352	0.7	48	1,846	36.9	20,856	0.7	46
75-84	358	28.1	4,132	0.7	62	186	14.6	2,165	0.7	41	421	33.0	4,817	0.7	42
85 and older	30	12.9	355	0.7	59	29	12.5	310	0.6	34	59	25.4	670	0.7	37
Other Eligibles	3,980	22.3	42,183	0.7	59	3,494	19.6	35,450	0.8	48	6,297	35.3	64,966	0.7	37
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	2	18.2	24	0.5	16	0	0.0	0	0.0	0
21-44	28	18.8	219	0.5	44	38	25.5	329	0.4	50	26	17.4	191	0.9	70
45-64	24	29.3	193	0.6	51	30	36.6	282	0.5	36	42	51.2	360	0.7	48
65-74	1,905	27.1	20,222	0.7	57	1,509	21.4	15,778	0.8	54	2,698	38.3	28,411	0.7	39
75-84	1,615	23.3	17,371	0.7	61	1,335	19.3	13,539	0.8	46	2,612	37.7	27,047	0.8	36
85 and older	408	11.3	4,178	0.7	63	580	16.1	5,498	0.7	37	919	25.5	8,957	0.8	34
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2004 file for Georgia, released by CMS in 01/2008. This table was produced on 03/25/2008.

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 2004. 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 2004. For information about these drug groups, see Wolters Kluwer Health, http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615 (October 26, 2007).

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

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR SIXTH TO EIGHTH TOP DRUG GROUPS

SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE[a, b, c]

DUAL ELIGIBLE BENEFICIARIES, GEORGIA, 2004

Beneficiary Characteristics	ANTIHYPERTENSIVE					ULCER DRUGS					ANALGESICS - Narcotic				
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx $ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx $ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx $ per Benefit Month
All	**88,759**	**54.9 %**	**986,639**	**0.7**	**$23**	**71,930**	**44.5 %**	**799,940**	**0.5**	**$29**	**118,296**	**73.2 %**	**1,313,284**	**0.4**	**$17**
Female	65,014	60.0	729,764	0.7	24	53,275	49.2	596,903	0.5	29	87,190	80.5	976,625	0.4	16
Disabled	31,537	59.1	361,909	0.6	24	27,309	51.1	314,603	0.5	29	51,741	96.9	592,603	0.4	17
5 and younger	2	50.0	20	0.3	3	2	50.0	24	0.5	5	1	25.0	8	0.1	1
6-14	8	88.9	96	0.8	13	5	55.6	60	0.6	27	2	22.2	24	0.5	3
15-20	39	29.3	437	0.4	8	37	27.8	427	0.4	13	77	57.9	856	0.2	6
21-44	3,046	25.4	34,720	0.5	19	4,262	35.5	48,954	0.4	26	11,380	94.8	129,647	0.4	18
45-64	13,272	59.9	150,254	0.6	23	12,099	54.6	138,535	0.5	31	23,181	104.6	263,450	0.4	21
65-74	9,950	82.5	116,208	0.7	25	7,080	58.7	82,829	0.5	30	11,292	93.7	131,871	0.4	12
75-84	4,072	77.0	47,129	0.7	25	2,946	55.7	33,944	0.5	28	4,508	85.2	52,139	0.4	11
85 and older	1,148	66.4	13,045	0.7	25	878	50.8	9,830	0.6	30	1,300	75.1	14,608	0.4	12
Other Eligibles	33,477	60.9	367,855	0.7	25	25,966	47.3	282,300	0.6	29	35,449	64.5	384,022	0.4	15
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	50.0	24	0.6	9	1	25.0	12	0.1	1	0	0.0	0	0.0	0
15-20	1	11.1	12	0.2	1	1	11.1	12	0.1	1	2	22.2	12	0.3	2
21-44	99	20.8	872	0.5	19	113	23.7	1,078	0.3	23	455	95.4	4,137	0.4	17
45-64	130	53.5	1,331	0.6	26	100	41.2	1,022	0.4	27	300	123.5	3,183	0.4	22
65-74	8,205	65.5	91,008	0.7	24	5,642	45.0	62,384	0.5	29	8,289	66.2	91,600	0.4	14
75-84	14,360	67.4	160,554	0.7	25	10,429	48.9	115,254	0.6	28	14,296	67.1	157,395	0.4	15
85 and older	10,680	52.4	114,054	0.7	24	9,680	47.5	102,538	0.7	29	12,107	59.4	127,695	0.5	16
Male	23,745	44.5	256,875	0.6	21	18,655	35.0	203,037	0.5	28	31,106	58.3	336,659	0.4	18
Disabled	14,254	40.1	157,469	0.6	21	11,356	32.0	127,366	0.5	28	22,136	62.3	244,500	0.4	19
5 and younger	2	20.0	24	0.3	4	4	40.0	48	0.6	34	2	20.0	24	0.1	0
6-14	9	56.3	108	0.6	8	2	12.5	24	0.4	5	5	31.3	58	0.2	2
15-20	42	21.3	483	0.4	12	45	22.8	522	0.4	22	84	42.6	957	0.3	4
21-44	3,028	23.1	33,756	0.6	20	3,051	23.3	34,805	0.4	26	7,236	55.2	80,923	0.4	19
45-64	7,104	45.3	76,231	0.6	22	5,430	34.7	59,567	0.5	29	10,437	66.6	112,483	0.4	22
65-74	3,184	63.6	36,686	0.7	22	2,136	42.7	24,582	0.5	29	3,422	68.4	39,295	0.4	15
75-84	782	61.3	8,991	0.7	22	594	46.6	6,784	0.5	27	832	65.2	9,491	0.4	14
85 and older	103	44.4	1,190	0.8	24	94	40.5	1,034	0.6	25	118	50.9	1,269	0.4	9
Other Eligibles	9,491	53.3	99,406	0.7	21	7,299	41.0	75,671	0.6	28	8,970	50.3	92,159	0.4	14
5 and younger	0	0.0	0	0.0	0	2	66.7	19	0.2	11	0	0.0	0	0.0	0
6-14	1	33.3	12	0.1	1	2	66.7	24	0.7	54	1	33.3	12	0.1	1
15-20	6	54.5	61	0.7	13	3	27.3	34	0.4	9	6	54.5	71	0.1	1
21-44	41	27.5	284	0.7	30	31	20.8	314	0.5	40	135	90.6	1,213	0.5	26
45-64	32	39.0	254	0.8	34	27	32.9	265	0.5	44	96	117.1	872	0.5	25
65-74	3,821	54.3	40,382	0.7	22	2,635	37.4	27,855	0.6	27	3,464	49.2	36,271	0.4	16
75-84	3,934	56.7	41,929	0.7	22	3,012	43.4	31,517	0.6	28	3,582	51.7	37,259	0.4	14
85 and older	1,656	46.0	16,484	0.7	19	1,587	44.1	15,643	0.7	28	1,686	46.8	16,461	0.4	11
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2004 file for Georgia, released by CMS in 01/2008. This table was produced on 03/25/2008.

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 2004. 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 2004. For information about these drug groups, see Wolters Kluwer Health, http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615 (October 26, 2007).

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

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR NINTH AND TENTH TOP DRUG GROUPS

SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE[a, b, c]

DUAL ELIGIBLE BENEFICIARIES, GEORGIA, 2004

Beneficiary Characteristics	ANALGESICS - ANTI-INFLAMMATORY					MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL						
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx $ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx $ per Benefit Month	Number of Beneficiaries	Number of Benefit Months
All	**62,399**	**38.6 %**	**712,724**	**0.4**	**$27**	**16,455**	**10.2 %**	**174,695**	**0.7**	**$103**	**161,664**	**1,701,033**
Female	46,976	43.4	539,449	0.4	29	12,835	11.8	137,801	0.7	103	108,336	1,155,751
Disabled	27,731	51.9	322,573	0.4	26	2,336	4.4	26,624	0.6	153	53,394	589,597
5 and younger	1	25.0	12	0.1	1	0	0.0	0	0.0	0	4	44
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	9	102
15-20	34	25.6	408	0.2	5	0	0.0	0	0.0	0	133	1,443
21-44	5,290	44.1	61,131	0.3	16	240	2.0	2,732	0.6	427	12,006	131,102
45-64	12,198	55.0	140,947	0.3	27	672	3.0	7,539	0.6	229	22,168	239,344
65-74	6,913	57.4	81,567	0.4	31	579	4.8	6,709	0.6	74	12,054	138,302
75-84	2,611	49.4	30,570	0.4	33	587	11.1	6,690	0.6	72	5,290	60,102
85 and older	684	39.5	7,938	0.5	32	258	14.9	2,954	0.6	72	1,730	19,158
Other Eligibles	19,245	35.0	216,876	0.5	33	10,499	19.1	111,177	0.7	91	54,942	566,154
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	4	48
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	9	96
21-44	184	38.6	1,680	0.3	29	5	1.0	49	0.7	783	477	3,395
45-64	151	62.1	1,591	0.3	18	8	3.3	96	0.5	86	243	2,198
65-74	4,956	39.6	56,342	0.4	29	1,182	9.4	12,553	0.7	91	12,526	130,242
75-84	8,154	38.3	93,066	0.5	33	4,491	21.1	47,871	0.7	90	21,314	225,756
85 and older	5,800	28.5	64,197	0.5	36	4,813	23.6	50,608	0.7	92	20,369	204,419
Male	15,423	28.9	173,275	0.4	22	3,620	6.8	36,894	0.7	101	53,328	545,282
Disabled	10,902	30.7	124,058	0.3	18	764	2.2	8,494	0.6	134	35,508	375,117
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	10	111
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	16	185
15-20	31	15.7	369	0.2	2	0	0.0	0	0.0	0	197	2,173
21-44	3,404	26.0	38,887	0.2	14	137	1.0	1,548	0.5	212	13,107	141,173
45-64	4,847	30.9	54,298	0.3	18	352	2.2	3,891	0.6	146	15,666	158,861
65-74	2,022	40.4	23,544	0.4	25	157	3.1	1,739	0.6	73	5,004	55,930
75-84	530	41.5	6,194	0.4	26	85	6.7	934	0.7	87	1,276	14,201
85 and older	68	29.3	766	0.4	30	33	14.2	382	0.7	89	232	2,483
Other Eligibles	4,521	25.4	49,217	0.4	30	2,856	16.0	28,400	0.7	91	17,820	170,165
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	25
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	26
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	11	108
21-44	50	33.6	461	0.3	14	0	0.0	0	0.0	0	149	1,031
45-64	33	40.2	314	0.3	17	1	1.2	12	0.5	61	82	582
65-74	1,811	25.7	19,800	0.4	27	651	9.2	6,776	0.7	91	7,039	67,898
75-84	1,860	26.8	20,570	0.5	30	1,322	19.1	13,203	0.7	89	6,934	67,657
85 and older	767	21.3	8,072	0.5	35	882	24.5	8,409	0.8	93	3,599	32,838
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 2004 file for Georgia, released by CMS in 01/2008. This table was produced on 03/25/2008.

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 2004. 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 2004. For information about these drug groups, see Wolters Kluwer Health, http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615 (October 26, 2007).

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & 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, GEORGIA, 2004

Beneficiary Characteristics	Rx $ per Benefit Month	Number of Rx per Benefit Month	Number of All-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents
All	**$373**	**7.1**	**22,181**	**230,223**
Age				
0-64	488	7.6	1,831	20,046
65-74	452	7.9	3,289	35,149
75-84	386	7.5	7,408	77,193
85 and older	311	6.4	9,653	97,835
Unknown	0	0.0	0	0
Gender				
Female	365	7.1	16,440	171,548
Male	395	7.1	5,741	58,675
Unknown	0	0.0	0	0
Race				
White	385	7.5	15,406	157,625
African American	346	6.3	6,631	71,099
Other/unknown	366	6.8	144	1,499
Basis of Eligibility[c]				
Aged	362	7.1	19,357	199,447
Disabled	446	7.2	2,824	30,776
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 2004 file for Georgia, released by CMS in 01/2008. This table was produced on 03/25/2008.

a. Table D.8 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their 2004 Medicaid enrollment. A total of 12,938 beneficiaries who were in nursing facilities for part of their enrollment and their 121,639 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 ebecause 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 = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy; $ = Medicaid reimbursement.

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, GEORGIA, 2004

| Therapeutic Category | Number of Rx per Benefit Month Among Users | | | | $ per Benefit Month Among Users | | | | $ per Rx | | | | Total Number of Rx | Total Rx $ | Users | | Number of Benefit Months |
	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic			Number of Users	As a Percentage of Dual All-Year Nursing Facility Residents	
Anti-infective Agents	0.4	0.2	0.0	0.2	$21	$15	$1	$5	$55	$90	$66	$24	62,761	$3,469,287	15,333	69.1 %	164,527
Biologicals	0.1	0.0	0.1	0.0	2	0	2	0	28	0	28	0	1	28	1	0.0	12
Antineoplastic Agents	0.6	0.1	0.0	0.5	76	31	1	44	136	495	93	90	9,209	1,256,296	1,642	7.4	16,499
Endocrine/Metabolic Drugs	1.2	0.5	0.2	0.5	51	41	4	7	44	77	21	14	133,136	5,795,968	10,685	48.2	114,013
Cardiovascular Agents	2.1	0.6	0.1	1.4	63	37	3	23	30	66	25	16	378,687	11,405,626	17,254	77.8	181,353
Respiratory Agents	0.7	0.3	0.0	0.4	28	21	0	8	42	81	24	18	73,124	3,044,546	9,983	45.0	107,211
Gastrointestinal Agents	1.0	0.2	0.0	0.8	40	26	0	14	38	113	52	17	132,031	5,081,854	11,829	53.3	125,805
Genitourinary Agents	0.6	0.5	0.0	0.1	43	37	2	4	68	82	53	30	32,362	2,216,779	4,750	21.4	51,316
CNS Drugs	1.6	0.9	0.1	0.6	135	113	7	15	83	124	72	24	288,007	23,799,502	16,665	75.1	176,540
Stimulants/Anti-obesity/Anorexia	0.6	0.3	0.0	0.3	43	36	1	6	68	142	40	17	1,028	70,167	159	0.7	1,648
Miscellaneous Psychological/ Neurological Agents	1.0	1.0	0.0	0.0	127	126	0	0	130	131	38	26	57,406	7,475,264	5,595	25.2	59,078
Analgesics and Anesthetics	1.1	0.4	0.0	0.6	49	40	1	8	47	95	41	14	140,136	6,570,468	12,559	56.6	133,090
Neuromuscular Agents	1.2	0.3	0.3	0.6	75	33	21	21	63	108	71	35	98,372	6,152,594	7,623	34.4	82,198
Nutritional Products	0.8	0.0	0.0	0.7	11	0	1	11	15	16	14	15	57,870	859,352	7,323	33.0	76,997
Hematological Agents	1.1	0.4	0.4	0.3	73	59	9	5	64	157	22	14	78,536	5,055,392	6,554	29.5	68,809
Topical Products	0.6	0.2	0.1	0.3	23	15	2	6	41	64	47	22	81,702	3,321,613	12,971	58.5	141,743
Miscellaneous Products	0.3	0.0	0.0	0.2	13	6	0	7	51	219	210	31	2,305	116,676	852	3.8	9,011
Unknown Therapeutic Category	0.4	0.0	0.0	0.0	8	0	0	0	20	0	0	0	6,601	130,796	1,450	6.5	15,800
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.	1,633,274	85,822,208	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2004 file for Georgia, released by CMS in 01/2008. This table was produced on 03/25/2008.

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 2004. A total of 12,938 beneficiaries who were in nursing facilities for part of their enrollment and their 121,639 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 2004. 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.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615 (October 26, 2007).

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.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615 (October 26, 2007).

In Georgia, 0.5 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.

Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & 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, GEORGIA, 2004

Top 10 Drug Groups in Nursing Facilities	Total Medicaid Rx $	Users			Among Users		
		Number of Users	As a Percentage of All-Year Nursing Facility Residents	Number of Benefit Months	Number of Rx per Benefit Month	$ per Rx	Rx $ per Benefit Month
ANTIPSYCHOTICS	$14,642,291	11,089	50.0 %	119,600	0.8	$151	$122
ANTIDEPRESSANTS	8,010,855	14,940	67.4	160,920	0.8	61	50
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	7,475,264	6,401	28.9	67,828	0.8	130	110
ANTICONVULSANT	4,699,236	7,120	32.1	77,283	0.9	65	61
ULCER DRUGS	4,165,485	12,416	56.0	133,766	0.8	40	31
ANTIDIABETIC	3,985,092	8,960	40.4	96,607	0.9	45	41
ANALGESICS - Narcotic	3,396,865	12,969	58.5	137,452	0.6	38	25
ANTIHYPERTENSIVE	3,174,028	11,290	50.9	120,752	0.8	32	26
MISC. HEMATOLOGICAL	3,024,674	3,481	15.7	37,070	0.8	105	82
ANALGESICS - ANTI-INFLAMMATORY	2,559,267	5,703	25.7	63,396	0.6	69	40
Total	55,133,057	94,369		1,014,674	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2004 file for Georgia, released by CMS in 01/2008. This table was produced on 03/25/2008.

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 2004. A total of 12,938 beneficiaries who were in nursing facilities for part of their enrollment and their 121,639 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 2004. 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 2004 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615 (October 26, 2007).

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

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, BASIS OF ELIGIBILITY, AND AGE[a, b, c, d]

DUAL ELIGIBLE BENEFICIARIES, GEORGIA, 2004

Beneficiary Characteristics	All Top 10 Drug Groups		ANTIPSYCHOTICS					ANTIDEPRESSANTS				
	Number of Rx	Rx $	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx $	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx $
All	**805,011**	**$55,133,057**	**11,089**	**50.0 %**	**119,600**	**0.8**	**$122**	**14,940**	**67.4 %**	**160,920**	**0.8**	**$50**
Female	598,063	40,512,235	7,998	48.6	86,781	0.8	119	11,402	69.4	123,148	0.8	50
Disabled	61,929	4,877,194	937	62.1	10,548	0.8	153	1,056	70.0	11,764	0.8	54
64 or younger	36,468	2,992,399	502	61.4	5,616	0.9	161	660	80.7	7,367	0.9	56
65-74	10,213	789,223	171	74.0	1,966	0.8	156	167	72.3	1,843	0.8	51
75-84	9,332	692,967	162	61.8	1,855	0.8	148	134	51.1	1,499	0.8	51
85 and older	5,916	402,605	102	51.5	1,111	0.8	118	95	48.0	1,055	0.8	49
Other Eligibles	536,134	35,635,041	7,061	47.3	76,233	0.8	114	10,346	69.3	111,384	0.8	49
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	78,346	5,565,364	961	60.4	10,474	0.9	150	1,373	86.2	15,108	0.9	53
75-84	212,106	14,085,439	2,740	52.3	29,897	0.8	116	3,887	74.2	42,006	0.8	51
85 and older	245,682	15,984,238	3,360	41.5	35,862	0.8	102	5,086	62.8	54,270	0.8	47
Male	206,948	14,620,822	3,091	53.8	32,819	0.8	133	3,538	61.6	37,772	0.8	50
Disabled	55,107	4,294,887	864	65.7	9,755	0.9	163	845	64.3	9,463	0.9	51
64 or younger	44,260	3,509,059	664	65.5	7,455	0.9	170	678	66.9	7,578	0.9	52
65-74	6,350	470,664	114	70.8	1,313	0.8	146	97	60.2	1,109	0.8	46
75-84	3,488	247,421	64	64.6	740	1.0	133	52	52.5	589	0.9	46
85 and older	1,009	67,743	22	52.4	247	0.8	113	18	42.9	187	0.7	42
Other Eligibles	151,841	10,325,935	2,227	50.3	23,064	0.8	120	2,693	60.8	28,309	0.8	50
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	52,682	3,716,049	723	55.4	7,909	0.8	136	843	64.6	9,224	0.8	55
75-84	64,184	4,298,415	917	50.8	9,409	0.8	117	1,151	63.8	12,195	0.8	48
85 and older	34,975	2,311,471	587	44.6	5,746	0.8	103	699	53.1	6,890	0.8	45
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 2004 file for Georgia, released by CMS in 01/2008. This table was produced on 03/25/2008.

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 2004. A total of 12,938 beneficiaries who were in nursing facilities for part of their enrollment and their 121,639 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 2004. 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 2004 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615 (October 26, 2007).

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

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, BASIS OF ELIGIBILITY, AND AGE[a, b, c, d]

DUAL ELIGIBLE BENEFICIARIES, GEORGIA, 2004

Beneficiary Characteristics	MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL					ANTICONVULSANT					ULCER DRUGS				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx $	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx $	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx $
All	**6,401**	**28.9 %**	**67,828**	**0.8**	**$110**	**7,120**	**32.1 %**	**77,283**	**0.9**	**$61**	**12,416**	**56.0 %**	**133,766**	**0.8**	**$31**
Female	4,945	30.1	52,791	0.8	111	4,709	28.6	51,368	0.9	57	9,226	56.1	99,711	0.8	31
Disabled	196	13.0	2,063	0.8	209	797	52.8	8,894	1.1	77	856	56.7	9,345	0.8	31
64 or younger	91	11.1	941	0.8	333	570	69.7	6,359	1.1	83	450	55.0	4,961	0.8	33
65-74	31	13.4	348	0.8	103	109	47.2	1,207	1.0	71	127	55.0	1,398	0.7	26
75-84	46	17.6	471	0.8	105	85	32.4	941	0.9	52	158	60.3	1,702	0.7	25
85 and older	28	14.1	303	0.8	109	33	16.7	387	0.9	45	121	61.1	1,284	0.8	35
Other Eligibles	4,749	31.8	50,728	0.8	107	3,912	26.2	42,474	0.9	53	8,370	56.1	90,366	0.8	31
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	450	28.3	4,816	0.9	117	830	52.1	9,125	1.0	66	1,005	63.1	11,000	0.8	32
75-84	1,882	35.9	20,156	0.9	108	1,581	30.2	17,360	0.9	54	3,043	58.1	33,244	0.8	31
85 and older	2,417	29.9	25,756	0.8	105	1,501	18.5	15,989	0.8	46	4,322	53.4	46,122	0.8	31
Male	1,456	25.4	15,037	0.8	108	2,411	42.0	25,915	1.0	68	3,190	55.6	34,055	0.8	32
Disabled	113	8.6	1,261	0.8	143	892	67.8	10,011	1.0	86	723	55.0	8,125	0.8	31
64 or younger	80	7.9	882	0.8	157	766	75.6	8,600	1.1	89	553	54.6	6,166	0.8	32
65-74	15	9.3	178	0.8	109	81	50.3	887	1.0	69	95	59.0	1,111	0.8	32
75-84	12	12.1	133	0.9	115	35	35.4	420	0.8	60	54	54.5	627	0.7	25
85 and older	6	14.3	68	1.1	117	10	23.8	104	0.6	44	21	50.0	221	0.8	17
Other Eligibles	1,343	30.3	13,776	0.8	105	1,519	34.3	15,904	0.9	56	2,467	55.7	25,930	0.8	32
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	316	24.2	3,427	0.9	105	640	49.0	6,918	1.0	62	760	58.2	8,321	0.8	32
75-84	597	33.1	6,115	0.8	105	603	33.4	6,356	0.9	55	1,036	57.4	10,863	0.8	32
85 and older	430	32.7	4,234	0.8	104	276	21.0	2,630	0.8	43	671	51.0	6,746	0.8	30
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2004 file for Georgia, released by CMS in 01/2008. This table was produced on 03/25/2008.

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 2004. A total of 12,938 beneficiaries who were in nursing facilities for part of their enrollment and their 121,639 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 2004. 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 2004 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615 (October 26, 2007).

Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & 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, BASIS OF ELIGIBILITY, AND AGE[a, b, c, d]

DUAL ELIGIBLE BENEFICIARIES, GEORGIA, 2004

Beneficiary Characteristics	ANTIDIABETIC					ANALGESICS - Narcotic					ANTIHYPERTENSIVE				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx $	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx $	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx $
All	**8,960**	**40.4 %**	**96,607**	**0.9**	**$41**	**12,969**	**58.5 %**	**137,452**	**0.6**	**$25**	**11,290**	**50.9 %**	**120,752**	**0.8**	**$26**
Female	6,480	39.4	70,189	0.9	40	10,118	61.5	107,866	0.7	26	8,283	50.4	88,762	0.8	27
Disabled	707	46.9	7,733	1.0	49	902	59.8	9,783	0.7	29	720	47.7	7,892	0.8	30
64 or younger	370	45.2	4,119	1.0	51	503	61.5	5,524	0.8	31	366	44.7	4,044	0.8	30
65-74	149	64.5	1,606	1.0	53	138	59.7	1,496	0.7	31	141	61.0	1,563	0.8	30
75-84	121	46.2	1,292	0.9	45	151	57.6	1,638	0.7	25	123	46.9	1,353	0.9	34
85 and older	67	33.8	716	0.8	36	110	55.6	1,125	0.7	24	90	45.5	932	0.8	29
Other Eligibles	5,773	38.7	62,456	0.9	39	9,216	61.7	98,083	0.7	25	7,563	50.7	80,870	0.8	26
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	1,058	66.5	11,668	1.0	46	1,097	68.9	12,079	0.8	32	977	61.4	10,589	0.8	28
75-84	2,552	48.7	27,723	0.9	40	3,409	65.0	36,470	0.7	28	2,920	55.7	31,575	0.8	26
85 and older	2,163	26.7	23,065	0.9	35	4,710	58.2	49,534	0.6	22	3,666	45.3	38,706	0.8	26
Male	2,480	43.2	26,418	0.9	44	2,851	49.7	29,586	0.6	21	3,007	52.4	31,990	0.8	25
Disabled	598	45.5	6,724	1.0	49	618	47.0	6,847	0.7	21	655	49.8	7,232	0.8	27
64 or younger	451	44.5	5,067	1.0	49	503	49.7	5,533	0.7	23	512	50.5	5,574	0.8	28
65-74	83	51.6	925	1.0	52	66	41.0	760	0.6	14	87	54.0	1,004	0.8	21
75-84	46	46.5	536	0.8	48	42	42.4	487	0.5	17	46	46.5	542	0.8	20
85 and older	18	42.9	196	0.8	37	7	16.7	67	0.5	8	10	23.8	112	0.8	20
Other Eligibles	1,882	42.5	19,694	0.9	42	2,233	50.5	22,739	0.6	21	2,352	53.1	24,758	0.8	25
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	657	50.3	7,091	1.0	47	661	50.7	7,006	0.6	23	810	62.1	8,810	0.8	26
75-84	842	46.6	8,797	0.9	39	949	52.6	9,832	0.6	23	971	53.8	10,332	0.9	26
85 and older	383	29.1	3,806	0.9	41	623	47.3	5,901	0.5	13	571	43.4	5,616	0.8	21
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2004 file for Georgia, released by CMS in 01/2008. This table was produced on 03/25/2008.

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 2004. A total of 12,938 beneficiaries who were in nursing facilities for part of their enrollment and their 121,639 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 2004. 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 2004 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615 (October 26, 2007).

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

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, BASIS OF ELIGIBILITY, AND AGE[a, b, c, d]
DUAL ELIGIBLE BENEFICIARIES, GEORGIA, 2004

Beneficiary Characteristics	MISC. HEMATOLOGICAL					ANALGESICS - ANTI-INFLAMMATORY					All-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx $	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx $		
All	3,481	15.7 %	37,070	0.8	$82	5,703	25.7 %	63,396	0.6	$40	22,181	230,223
Female	2,486	15.1	26,556	0.8	81	4,480	27.3	49,960	0.6	41	16,440	171,548
Disabled	174	11.5	1,853	0.7	73	457	30.3	5,233	0.5	36	1,509	16,372
64 or younger	85	10.4	928	0.7	80	259	31.7	2,965	0.5	33	818	8,984
65-74	32	13.9	329	0.7	69	68	29.4	785	0.6	37	231	2,496
75-84	34	13.0	350	0.7	60	75	28.6	841	0.6	42	262	2,821
85 and older	23	11.6	246	0.7	74	55	27.8	642	0.6	40	198	2,071
Other Eligibles	2,312	15.5	24,703	0.8	82	4,023	26.9	44,727	0.6	42	14,931	155,176
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	275	17.3	2,979	0.8	86	464	29.1	5,256	0.6	40	1,592	17,001
75-84	816	15.6	8,760	0.8	84	1,545	29.5	17,301	0.6	40	5,242	55,178
85 and older	1,221	15.1	12,964	0.8	79	2,014	24.9	22,170	0.6	44	8,097	82,997
Male	995	17.3	10,514	0.8	82	1,223	21.3	13,436	0.6	37	5,741	58,675
Disabled	167	12.7	1,873	0.8	92	303	23.0	3,471	0.5	28	1,315	14,404
64 or younger	125	12.3	1,411	0.8	95	257	25.4	2,939	0.5	26	1,013	11,062
65-74	25	15.5	263	0.8	89	19	11.8	225	0.6	42	161	1,818
75-84	17	17.2	199	0.7	76	14	14.1	168	0.5	37	99	1,111
85 and older	0	0.0	0	0.0	0	13	31.0	139	0.5	42	42	413
Other Eligibles	828	18.7	8,641	0.8	80	920	20.8	9,965	0.6	41	4,426	44,271
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	252	19.3	2,783	0.8	88	256	19.6	2,834	0.5	40	1,305	13,834
75-84	342	18.9	3,532	0.8	75	408	22.6	4,458	0.6	40	1,805	18,083
85 and older	234	17.8	2,326	0.8	78	256	19.5	2,673	0.6	42	1,316	12,354
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 2004 file for Georgia, released by CMS in 01/2008. This table was produced on 03/25/2008.

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 2004. A total of 12,938 beneficiaries who were in nursing facilities for part of their enrollment and their 121,639 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 2004. 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 2004 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615 (October 26, 2007).

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

USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
AMONG DUALS, BY BENEFICIARY CHARACTERISTIC[a,b]
GEORGIA, 2004

Beneficiary Characteristics	Number of Beneficiaries with at Least One Part D Excluded Rx	Percentage of Beneficiaries with at Least One Part D Excluded Rx	Number of Part D Excluded Rx per Beneficiary	Total Number Part D Excluded Rx	Part D Excluded Rx $ per Beneficiary	Total Part D Excluded Rx $	$ per Part D Excluded Rx	Part D Excluded Rx $ as a Percentage of All Dual Rx $	Total Number of Beneficiaries
All	**73,236**	**45.3 %**	**3.4**	**550,697**	**$50**	**$8,142,391**	**$15**	**1.8 %**	**161,664**
Age									
5 and younger	12	70.6	10.1	171	150	2,550	15	3.8	17
6-14	24	75.0	7.0	223	184	5,888	26	2.3	32
15-20	139	39.7	2.3	794	104	36,328	46	3.8	350
21-44	8,367	32.5	1.9	49,598	42	1,092,977	22	1.5	25,739
45-64	17,179	45.0	3.3	125,765	67	2,562,173	20	2.1	38,159
65-74	16,463	45.0	3.5	126,844	42	1,552,300	12	1.5	36,623
75-84	17,344	49.8	4.0	139,322	48	1,685,973	12	1.7	34,814
85 and older	13,708	52.9	4.2	107,980	46	1,204,202	11	1.9	25,930
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Basis of Eligibility[c]									
Aged	34,547	48.2	3.8	271,306	45	3,230,121	12	1.7	71,677
Disabled	38,269	43.0	3.1	277,473	55	4,882,222	18	1.8	88,902
Adults	310	35.8	1.5	1,337	23	19,732	15	1.3	865
Children	17	34.7	2.0	96	63	3,080	32	1.6	49
Unknown	93	54.4	2.8	485	42	7,236	15	1.2	171
Gender									
Female	54,163	50.0	3.8	415,172	57	6,225,416	15	1.9	108,336
Male	19,073	35.8	2.5	135,525	36	1,916,975	14	1.4	53,328
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Race									
White	37,369	49.4	3.9	294,373	62	4,661,832	16	1.9	75,596
African American	28,357	42.4	3.1	204,903	41	2,765,820	13	1.7	66,850
Other/unknown	7,510	39.1	2.7	51,421	37	714,739	14	1.5	19,218
Use of Nursing Facilities[d]									
Entire year	13,098	59.1	5.7	126,723	70	1,545,481	12	1.8	22,181
Part year	8,422	65.1	4.7	60,826	59	766,048	13	1.9	12,938
None	51,716	40.9	2.9	363,148	46	5,830,862	16	1.8	126,545
Maintenance Assistance Status									
Cash	40,583	43.0	3.1	295,008	44	4,179,530	14	1.6	94,459
Medically needy	1,746	38.1	1.9	8,564	44	202,579	24	2.5	4,579
Poverty related	2,159	39.1	2.0	10,798	27	147,914	14	1.4	5,519
Other/unknown	28,748	50.3	4.1	236,327	63	3,612,368	15	2.1	57,107

Source: Data for this table are from the MAX 2004 file for Georgia, released by CMS in 01/2008. This table was produced on 03/25/2008.

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 2004.

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 = Centers for Medicare & 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]

GEORGIA, 2004

Beneficiary Characteristics	Number Rx per Benefit Month	Rx $ per Benefit Month	$ per Rx	Barbiturate $ per Benefit Month	Benzodiazapine $ per Benefit Month	Number of Benefit Months
All	**0.3**	**$5**	**$15**	**$0**	**$1**	**1,701,033**
Age						
5 and younger	1.0	14	15	0	0	180
6-14	0.6	16	26	0	0	361
15-20	0.2	10	46	0	1	3,820
21-44	0.2	4	22	0	1	276,701
45-64	0.3	6	20	0	1	400,985
65-74	0.3	4	12	0	1	392,372
75-84	0.4	5	12	0	1	367,716
85 and older	0.4	5	11	0	1	258,898
Unknown	0.0	0	0	0	0	0
Basis of Eligibility[c]						
Aged	0.4	4	12	0	1	727,921
Disabled	0.3	5	18	0	1	964,714
Adults	0.2	3	15	0	1	6,037
Children	0.2	6	32	0	1	507
Unknown	0.3	4	15	0	1	1,854
Gender						
Female	0.4	5	15	0	1	1,155,751
Male	0.2	4	14	0	1	545,282
Unknown	0.0	0	0	0	0	0
Race						
White	0.4	6	16	0	2	773,665
African American	0.3	4	13	0	0	717,295
Other/unknown	0.2	3	14	0	1	210,073
Use of Nursing Facilities[d]						
Entire year	0.6	7	12	0	2	230,223
Part year	0.5	6	13	0	2	121,639
None	0.3	4	16	0	1	1,349,171
Maintenance Assistance Status						
Cash	0.3	4	14	0	1	1,067,815
Medically needy	0.4	9	24	0	2	23,424
Poverty related	0.2	3	14	0	1	53,980
Other/unknown	0.4	6	15	0	2	555,814

Source: Data for this table are from the MAX 2004 file for Georgia, released by CMS in 01/2008. This table was produced on 03/25/2008.

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 2004.

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 beneficaries 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 = Centers for Medicare & 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]
GEORGIA, 2004

Drug Category	Number of Users	Rx $ per User	Total Rx $	Rx $ as a Percentage of All Part D Excluded Rx $	Total Number Rx.	$ per Rx	Number Rx as a Percentage of All Part D Excluded Rx
All	**100,150**	**$81**	**$8,142,391**	**100.0** %	**550,697**	**$15**	**100.0** %
Anorexia or weight loss/gain	1	92	92	0.0	1	92	0.0
Fertility drugs	0	0	0	0.0	0	0	0.0
Drugs for cosmetic purposes	25	16	389	0.0	41	9	0.0
Cough and cold medications	2,624	66	172,212	2.1	3,665	47	0.7
Vitamins and minerals	35,061	101	3,547,975	43.6	228,676	16	41.5
Non-prescription drugs	22,806	30	685,811	8.4	129,905	5	23.6
Barbiturates	2,340	57	132,737	1.6	23,795	6	4.3
Benzodiazepines	31,720	58	1,851,540	22.7	144,425	13	26.2
Other Part D Excl Rx Drugs	5,573	314	1,751,635	21.5	20,189	87	3.7

Source: Data for this table are from the MAX 2004 file for Georgia, released by CMS in 01/2008. This table was produced on 03/25/2008.

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 2004. A user is a beneficiary who had at least one prescription filled for a Part D excluded drug in 2004. 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 = Centers for Medicare & Medicaid Services; Excl = excluded; MAX = Medicaid Analytic Extract; OTC = over-the-counter; Rx = prescription(s) or pharmacy benefit; $ = Medicaid reimbursement.

SUPPLEMENTAL TABLE 1
MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES[a, b]
GEORGIA, 2004

Total Number of Dual Eligible Beneficiaries	161,664
Total Pharmacy Reimbursement for Dual Eligible Beneficiaries	$458,516,943
Mean Pharmacy Reimbursement per Dual Eligible Beneficiary	$2,836

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
$0	19,220	11.9 %	$0	0.0 %
1-500	25,392	15.7	5,408,998	1.2
501-1,000	16,608	10.3	12,299,982	2.7
1,001-1,500	13,896	8.6	17,267,907	3.8
1,501-2,000	12,102	7.5	21,133,417	4.6
2,001-2,500	10,463	6.5	23,508,768	5.1
2,501-3,000	9,209	5.7	25,285,028	5.5
3,001-3,500	8,007	5.0	25,999,556	5.7
3,501-4,000	6,799	4.2	25,450,891	5.6
4,001-4,500	5,802	3.6	24,636,667	5.4
4,501-5,000	5,100	3.2	24,199,425	5.3
5,001-5,500	4,400	2.7	23,074,516	5.0
5,501-6,000	3,602	2.2	20,680,880	4.5
6,001-6,500	2,976	1.8	18,585,052	4.1
6,501-7,000	2,511	1.6	16,928,985	3.7
7,001-7,500	2,211	1.4	16,007,807	3.5
7,501-8,000	1,892	1.2	14,637,289	3.2
8,001-8,500	1,561	1.0	12,859,118	2.8
8,501-9,000	1,328	0.8	11,610,699	2.5
9,001-9,500	1,129	0.7	10,440,925	2.3
9,501-10,000	982	0.6	9,565,901	2.1
10,001+	6,474	4.0	98,935,132	21.6

Source: Data for this table are from the MAX 2004 file for Georgia, released by CMS in 01/2008. This table was produced on 03/25/2008.

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 2004.

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

MEDICAID PHARMACY REIMBURSEMENT FOR DISABLED DUAL ELIGIBLE BENEFICIARIES UNDER AGE 65[a, b, c]

GEORGIA, 2004

Total Number of Disabled Dual Eligible Beneficiaries, Age < 65	63,316
Total Pharmacy Reimbursement for Disabled Dual Eligible Beneficiaries, Age < 65	$194,775,669
Mean Pharmacy Reimbursement per Disabled Dual Eligible Beneficiary, Age < 65	$3,076

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Disabled Dual Beneficiaries, Age < 65	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
$0	10,448	16.5 %	0	0.0 %
1-500	11,620	18.4	2,280,203	1.2
501-1,000	6,037	9.5	4,430,739	2.3
1,001-1,500	4,516	7.1	5,595,020	2.9
1,501-2,000	3,729	5.9	6,494,231	3.3
2,001-2,500	3,103	4.9	6,972,424	3.6
2,501-3,000	2,765	4.4	7,595,060	3.9
3,001-3,500	2,448	3.9	7,953,377	4.1
3,501-4,000	2,083	3.3	7,801,375	4.0
4,001-4,500	1,894	3.0	8,046,751	4.1
4,501-5,000	1,654	2.6	7,858,062	4.0
5,001-5,500	1,486	2.3	7,789,942	4.0
5,501-6,000	1,250	2.0	7,183,393	3.7
6,001-6,500	1,101	1.7	6,879,576	3.5
6,501-7,000	994	1.6	6,709,468	3.4
7,001-7,500	876	1.4	6,349,409	3.3
7,501-8,000	781	1.2	6,045,066	3.1
8,001-8,500	665	1.1	5,479,263	2.8
8,501-9,000	616	1.0	5,386,376	2.8
9,001-9,500	576	0.9	5,326,033	2.7
9,501-10,000	500	0.8	4,872,880	2.5
10,001+	4,174	6.6	67,727,021	34.8

Source: Data for this table are from the MAX 2004 file for Georgia, released by CMS in 01/2008. This table was produced on 03/25/2008.

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 2004.

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

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

SUPPLEMENTAL TABLE 1B
MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 AND OLDER[a, b]
GEORGIA, 2004

Total Number of Dual Eligible Beneficiaries, Age 65+	97,367
Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65+	$261,617,765
Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65+	$2,687

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 65+	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
$0	8,609	8.8 %	0	0.0 %
1-500	13,510	13.9	3,081,399	1.2
501-1,000	10,451	10.7	7,783,889	3.0
1,001-1,500	9,309	9.6	11,584,904	4.4
1,501-2,000	8,319	8.5	14,544,422	5.6
2,001-2,500	7,317	7.5	16,439,836	6.3
2,501-3,000	6,401	6.6	17,571,896	6.7
3,001-3,500	5,528	5.7	17,945,425	6.9
3,501-4,000	4,688	4.8	17,545,890	6.7
4,001-4,500	3,893	4.0	16,525,550	6.3
4,501-5,000	3,435	3.5	16,289,030	6.2
5,001-5,500	2,892	3.0	15,168,322	5.8
5,501-6,000	2,336	2.4	13,405,745	5.1
6,001-6,500	1,865	1.9	11,643,163	4.5
6,501-7,000	1,503	1.5	10,125,620	3.9
7,001-7,500	1,323	1.4	9,572,242	3.7
7,501-8,000	1,101	1.1	8,514,137	3.3
8,001-8,500	886	0.9	7,298,366	2.8
8,501-9,000	706	0.7	6,171,907	2.4
9,001-9,500	545	0.6	5,040,565	1.9
9,501-10,000	478	0.5	4,654,166	1.8
10,001+	2,272	2.3	30,711,291	11.7

Source: Data for this table are from the MAX 2004 file for Georgia, released by CMS in 01/2008. This table was produced on 03/25/2008.

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 2004.

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

SUPPLEMENTAL TABLE 1C
MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 TO 74 [a, b]
GEORGIA, 2004

Total Number of Dual Eligible Beneficiaries, Age 65-74	36,623
Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65-74	$100,205,169
Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65-74	$2,736

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 65-74	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
$0	4,221	11.5 %	0	0.0 %
1-500	5,350	14.6	1,176,716	1.2
501-1,000	3,646	10.0	2,716,738	2.7
1,001-1,500	3,207	8.8	3,983,315	4.0
1,501-2,000	2,917	8.0	5,089,940	5.1
2,001-2,500	2,513	6.9	5,651,711	5.6
2,501-3,000	2,213	6.0	6,072,067	6.1
3,001-3,500	1,924	5.3	6,243,712	6.2
3,501-4,000	1,637	4.5	6,127,798	6.1
4,001-4,500	1,406	3.8	5,969,470	6.0
4,501-5,000	1,263	3.4	5,993,829	6.0
5,001-5,500	1,019	2.8	5,338,335	5.3
5,501-6,000	834	2.3	4,788,855	4.8
6,001-6,500	697	1.9	4,353,656	4.3
6,501-7,000	593	1.6	3,998,359	4.0
7,001-7,500	522	1.4	3,775,543	3.8
7,501-8,000	430	1.2	3,327,929	3.3
8,001-8,500	356	1.0	2,930,803	2.9
8,501-9,000	275	0.8	2,401,931	2.4
9,001-9,500	224	0.6	2,070,362	2.1
9,501-10,000	197	0.5	1,918,818	1.9
10,001+	1,179	3.2	16,275,282	16.2

Source: Data for this table are from the MAX 2004 file for Georgia, released by CMS in 01/2008. This table was produced on 03/25/2008.

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 2004.

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

MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 75 TO 84[a, b]
GEORGIA, 2004

Total Number of Dual Eligible Beneficiaries, Age 75-84	34,814
Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 75-84	$97,620,909
Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 75-84	$2,804

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 75-84	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
$0	2,784	8.0 %	0	0.0 %
1-500	4,344	12.5	1,007,914	1.0
501-1,000	3,605	10.4	2,687,711	2.8
1,001-1,500	3,365	9.7	4,204,077	4.3
1,501-2,000	3,019	8.7	5,278,763	5.4
2,001-2,500	2,694	7.7	6,051,253	6.2
2,501-3,000	2,348	6.7	6,439,662	6.6
3,001-3,500	2,041	5.9	6,624,513	6.8
3,501-4,000	1,773	5.1	6,634,964	6.8
4,001-4,500	1,461	4.2	6,207,099	6.4
4,501-5,000	1,241	3.6	5,881,598	6.0
5,001-5,500	1,106	3.2	5,803,200	5.9
5,501-6,000	908	2.6	5,209,541	5.3
6,001-6,500	743	2.1	4,641,094	4.8
6,501-7,000	592	1.7	3,983,558	4.1
7,001-7,500	518	1.5	3,748,616	3.8
7,501-8,000	423	1.2	3,271,009	3.4
8,001-8,500	354	1.0	2,917,447	3.0
8,501-9,000	275	0.8	2,406,197	2.5
9,001-9,500	228	0.7	2,109,433	2.2
9,501-10,000	193	0.6	1,878,771	1.9
10,001+	799	2.3	10,634,489	10.9

Source: Data for this table are from the MAX 2004 file for Georgia, released by CMS in 01/2008. This table was produced on 03/25/2008.

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 2004.

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

SUPPLEMENTAL TABLE 1E
MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 85 AND OLDER[a, b]
GEORGIA, 2004

Total Number of Dual Eligible Beneficiaries, Age 85+	25,930
Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 85+	$63,791,687
Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 85+	$2,460

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 85+	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
$0	1,604	6.2 %	0	0.0 %
1-500	3,816	14.7	896,769	1.4
501-1,000	3,200	12.3	2,379,440	3.7
1,001-1,500	2,737	10.6	3,397,512	5.3
1,501-2,000	2,383	9.2	4,175,719	6.5
2,001-2,500	2,110	8.1	4,736,872	7.4
2,501-3,000	1,840	7.1	5,060,167	7.9
3,001-3,500	1,563	6.0	5,077,200	8.0
3,501-4,000	1,278	4.9	4,783,128	7.5
4,001-4,500	1,026	4.0	4,348,981	6.8
4,501-5,000	931	3.6	4,413,603	6.9
5,001-5,500	767	3.0	4,026,787	6.3
5,501-6,000	594	2.3	3,407,349	5.3
6,001-6,500	425	1.6	2,648,413	4.2
6,501-7,000	318	1.2	2,143,703	3.4
7,001-7,500	283	1.1	2,048,083	3.2
7,501-8,000	248	1.0	1,915,199	3.0
8,001-8,500	176	0.7	1,450,116	2.3
8,501-9,000	156	0.6	1,363,779	2.1
9,001-9,500	93	0.4	860,770	1.3
9,501-10,000	88	0.3	856,577	1.3
10,001+	294	1.1	3,801,520	6.0

Source: Data for this table are from the MAX 2004 file for Georgia, released by CMS in 01/2008. This table was produced on 03/25/2008.

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 2004.

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

CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY[a, b]

DUAL ELIGIBLE BENEFICIARIES, GEORGIA, 2004

Beneficiary Characteristics	Number of Beneficiaries							Number of Benefit Months					
	All	Aged	Disabled	Adults	Children	Unknown		All	Aged	Disabled	Adults	Children	Unknown
All	**161,664**	**71,677**	**88,902**	**865**	**49**	**171**		**1,701,033**	**727,921**	**964,714**	**6,037**	**507**	**1,854**
Age													
5 and younger	17	0	14	0	3	0		180	0	155	0	25	0
6-14	32	0	25	0	7	0		361	0	287	0	74	0
15-20	350	0	330	1	19	0		3,820	0	3,616	6	198	0
21-44	25,739	0	25,113	601	13	12		276,701	0	272,275	4,158	134	134
45-64	38,159	0	37,834	217	5	103		400,985	0	398,205	1,620	52	1,108
65-74	36,623	19,467	17,058	41	1	56		392,372	197,286	194,232	230	12	612
75-84	34,814	28,243	6,566	5	0	0		367,716	293,390	74,303	23	0	0
85 and older	25,930	23,967	1,962	0	1	0		258,898	237,245	21,641	0	12	0
Unknown	0	0	0	0	0	0			0	0	0	0	0
Gender													
Female	108,336	54,111	53,394	636	24	171		1,155,751	559,559	589,597	4,475	266	1,854
Male	53,328	17,566	35,508	229	25	0	0	545,282	168,362	375,117	1,562	241	0
Unknown	0	0	0	0	0	0			0	0	0	0	0
Race													
White	75,596	37,540	37,555	402	23	76		773,665	366,783	403,101	2,687	244	850
African American	66,850	25,304	41,019	437	21	69	0	717,295	265,058	448,152	3,139	203	743
Other/unknown	19,218	8,833	10,328	26	5	26		210,073	96,080	113,461	211	60	261
Use of Nursing Facilities[c]													
Entire year	22,181	19,357	2,824	0	0	0		230,223	199,447	30,776	0	0	0
Part year	12,938	11,097	1,841	0	0	0		121,639	103,155	18,484	0	0	0
None	126,545	41,223	84,237	865	49	171		1,349,171	425,319	915,454	6,037	507	1,854
Maintenance Assistance Status													
Cash	94,459	29,426	64,458	574	1	0		1,067,815	330,714	733,094	4,005	2	0
Medically needy	4,579	1,659	2,920	0	0	0		23,424	7,251	16,173	0	0	0
Poverty related	5,519	1,926	3,207	187	28	171		53,980	18,969	31,635	1,234	288	1,854
Other/unknown	57,107	38,666	18,317	104	20	0		555,814	370,987	183,812	798	217	0
Dual Status[d]													
Full dual, all year	151,331	65,951	84,316	844	49	171		1,599,908	671,611	920,090	5,846	507	1,854
Full dual, part year	10,333	5,726	4,586	21	0	0		101,125	56,310	44,624	191	0	0
Managed Care (MC) Status													
Fee-for-service (FFS) all year	161,664	71,677	88,902	865	49	171		1,701,033	727,921	964,714	6,037	507	1,854
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
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 2004 file for Georgia, released by CMS in 01/2008. This table was produced on 03/25/2008.

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 2004. 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 = Centers for Medicare & 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, GEORGIA, 2004

Beneficiary	Beneficiaries and Benefit Months in Cell F of Table 1		Included in Cell G of Table 1		Excluded from Cell G of Table 1	
Characteristics	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months
All	**161,664**	**1,701,033**	**161,664**	**1,701,033**	**0**	**0**
Fee-for-service (FFS) all year	161,664	1,701,033	161,664	1,701,033	0	0
FFS part year, with Rx claims	0	0	0	0	0	0
FFS part year, with no Rx claims	0	0	0	0	0	0
Managed care (MC) all year, with Rx claims	0	0	0	0	0	0
MC all year, with no Rx claims	0	0	0	0	0	0

Source: Data for this table are from the MAX 2004 file for Georgia, released by CMS in 01/2008. This table was produced on 03/25/2008.

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

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