

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

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TABLE D.2
CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a, b}
DUAL ELIGIBLE BENEFICIARIES, MAINE, 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	51,833	26,302	21,732	3,759	27	13	567,162	280,155	246,654	39,897	321	135
Age												
5 and younger	0	0	0	0	0	0		0	0	0	0	0
6-14	2	0	2	0	0	0	24	0	24	0	0	0
15-20	115	0	89	0	26	0	1,364	0	1,055	0	309	0
21-44	11,138	0	8,918	2,219	1	0	125,693	0	101,658	24,023	12	0
45-64	14,058	0	12,723	1,329	0	6	157,795	0	143,917	13,812	0	66
65-74	10,289	10,090	0	192	0	7	114,077	112,137	0	1,871	0	69
75-84	9,519	9,501	0	18	0	0	101,689	101,510	0	179	0	0
85 and older	6,712	6,711	0	1	0	0	66,520	66,508	0	12	0	0
Unknown	0	0	0	0	0	0		0	0	0	0	0
Gender												
Female	30,653	18,616	10,371	1,643	10	13	336,018	199,801	118,350	17,612	120	135
Male	21,177	7,686	11,359	2,115	17	0	231,134	80,354	128,298	22,281	201	0
Unknown	3	0	2	1	0	0	10	0	6	4	0	0
Race												
White	48,232	24,197	20,485	3,515	26	9	528,515	258,134	232,633	37,352	309	87
African American	234	64	134	36	0	0	2,386	610	1,420	356	0	0
Other/unknown	3,367	2,041	1,113	208	1	4	36,261	21,411	12,601	2,189	12	48
Use of Nursing Facilities^c												
Entire year	3,086	2,888	198	0	0	0	31,095	28,955	2,140	0	0	0
Part year	4,512	4,138	370	4	0	0	43,278	39,279	3,951	48	0	0
None	44,235	19,276	21,164	3,755	27	13	492,789	211,921	240,563	39,849	321	135
Maintenance Assistance Status												
Cash	19,935	7,508	11,174	1,253	0	0	228,197	85,010	129,445	13,742	0	0
Medically needy	2,874	2,503	355	16	0	0	26,635	23,345	3,137	153	0	0
Poverty-related	19,088	10,539	8,486	43	7	13	211,464	116,127	94,672	446	84	135
Other/unknown	9,936	5,752	1,717	2,447	20	0	100,866	55,673	19,400	25,556	237	0
Dual Medicare Status^d												
Full dual, all year	49,605	25,072	20,811	3,682	27	13	542,958	266,791	236,680	39,031	321	135
Full dual, part year	2,228	1,230	921	77	0	0	24,204	13,364	9,974	866	0	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	51,833	26,302	21,732	3,759	27	13	567,162	280,155	246,654	39,897	321	135
FFS part year, with Rx claims	0	0	0	0	0	0		0	0	0	0	0
FFS part year, no Rx claims	0	0	0	0	0	0		0	0	0	0	0

Source: Data for this table are from the MAX 2004 file for Maine, released by CMS in 02/2008. 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.

TABLE D.3
ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC^{a, b}
DUAL ELIGIBLE BENEFICIARIES, MAINE, 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	92.1 %	52.0	\$2,868	\$55	\$15,206	18.9 %	51,833
Age							
5 and younger	0.0	0.0	0	0	0	0.0	0
6-14	100.0	97.5	7,461	77	16,156	46.2	2
15-20	92.2	29.2	2,579	88	28,381	9.1	115
21-44	90.4	38.8	2,996	77	15,319	19.6	11,138
45-64	92.8	54.6	3,529	65	15,499	22.8	14,058
65-74	89.9	52.3	2,606	50	10,212	25.5	10,289
75-84	93.2	58.7	2,504	43	14,819	16.9	9,519
85 and older	95.4	58.6	2,189	37	22,379	9.8	6,712
Unknown	0.0	0.0	0	0	0	0.0	0
Basis of Eligibility^e							
Aged	92.6	56.4	2,471	44	15,032	16.4	26,302
Disabled	91.9	48.9	3,364	69	16,854	20.0	21,732
Adults	89.8	38.6	2,778	72	6,728	41.3	3,759
Children	92.6	31.2	2,732	88	28,121	9.7	27
Unknown	92.3	26.6	2,328	88	35,451	6.6	13
Gender							
Female	94.7	57.3	2,943	51	15,368	19.1	30,653
Male	88.3	44.2	2,760	62	14,973	18.4	21,177
Unknown	0.0	0.0	0	0	0	0.0	3
Race							
White	92.3	52.4	2,905	55	15,144	19.2	48,232
African American	82.5	31.2	2,140	69	9,169	23.3	234
Other/unknown	89.9	46.8	2,384	51	16,513	14.4	3,367
Use of Nursing Facilities^f							
Entire year	98.1	79.9	3,262	41	43,693	7.5	3,086
Part year	97.8	74.8	3,227	43	29,969	10.8	4,512
None	91.1	47.7	2,804	59	11,712	23.9	44,235
Maintenance Assistance Status							
Cash	92.4	50.0	2,970	59	13,337	22.3	19,935
Medically needy	94.3	65.8	2,732	42	22,028	12.4	2,874
Poverty related	90.4	46.9	2,643	56	8,250	32.0	19,088
Other/unknown	94.2	61.4	3,134	51	30,344	10.3	9,936

Source: Data for this table are from the MAX 2004 file for Maine, released by CMS in 02/2008. 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, MAINE, 2004

Beneficiary Characteristics	Mean Number of Rx	Mean Rx \$	Rx \$ as a Percentage of All Medicaid FFS \$ ^c	Number of Rx, Percentage with:						Mean \$, All Medicaid FFS \$ ^d	Number	
				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		Beneficiaries	Benefit Months
All	4.7	\$262	18.9 %	7.9 %	16.0 %	11.0 %	29.5 %	26.5 %	9.1 %	\$1,390	51,833	567,162
Age												
5 and younger	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
6-14	8.1	622	46.2	0.0	0.0	0.0	0.0	100.0	0.0	1,346	2	24
15-20	2.5	218	9.1	7.8	44.3	9.6	26.1	9.6	2.6	2,393	115	1,364
21-44	3.4	266	19.6	9.6	25.9	14.4	29.2	16.9	4.0	1,358	11,138	125,693
45-64	4.9	314	22.8	7.2	15.7	10.7	30.4	27.5	8.5	1,381	14,058	157,795
65-74	4.7	235	25.5	10.1	15.0	10.4	29.4	26.7	8.4	921	10,289	114,077
75-84	5.5	234	16.9	6.8	10.8	9.9	28.7	30.7	13.0	1,387	9,519	101,689
85 and older	5.9	221	9.8	4.6	9.0	8.7	29.8	34.0	13.9	2,258	6,712	66,520
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	5.3	232	16.4	7.4	11.9	9.8	29.3	30.1	11.6	1,411	26,302	280,155
Disabled	4.3	296	20.0	8.1	19.9	12.2	29.4	23.4	7.0	1,485	21,732	246,654
Adults	3.6	262	41.3	10.2	22.3	12.6	32.3	18.8	3.8	634	3,759	39,897
Children	2.6	230	9.7	7.4	40.7	14.8	18.5	18.5	0.0	2,365	27	321
Unknown	2.6	224	6.6	7.7	38.5	7.7	38.5	7.7	0.0	3,414	13	135
Gender												
Female	5.2	268	19.1	5.3	12.9	10.6	30.8	30.1	10.3	1,402	30,653	336,018
Male	4.1	253	18.4	11.7	20.6	11.6	27.7	21.2	7.2	1,372	21,177	231,134
Unknown	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	0	3	10
Race												
White	4.8	265	19.2	7.7	15.9	10.9	29.5	26.7	9.2	1,382	48,232	528,515
African American	3.1	210	23.3	17.5	25.2	13.2	24.8	16.7	2.6	899	234	2,386
Other/unknown	4.3	221	14.4	10.1	17.1	11.4	30.0	24.1	7.3	1,533	3,367	36,261
use of nursing Facilities^f												
Entire year	7.9	324	7.5	1.9	4.2	5.1	22.3	39.3	27.1	4,336	3,086	31,095
Part year	7.8	337	10.8	2.2	5.2	5.4	23.3	38.9	25.0	3,124	4,512	43,278
None	4.3	252	23.9	8.9	18.0	12.0	30.7	24.3	6.2	1,051	44,235	492,789
Maintenance Assistance Status												
Cash	4.4	259	22.3	7.6	18.1	12.0	30.8	24.9	6.7	1,165	19,935	228,197
Medically needy	7.1	295	12.4	5.7	7.0	7.0	23.3	36.2	20.8	2,377	2,874	26,635
Poverty related	4.2	239	32.0	9.6	17.7	11.8	30.8	24.2	6.0	745	19,088	211,464
Other/unknown	6.0	309	10.3	5.8	11.4	8.6	26.5	31.2	16.5	2,989	9,936	100,866

Source: Data for this table are from the MAX 2004 file for Maine, released by CMS in 02/2008. 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.

TABLE D.5

AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC^{a, b, c}
DUAL ELIGIBLE BENEFICIARIES, MAINE, 2004

Beneficiary	All Rx			Patented Brand-Name Drugs			Off-Patent Brand-Name Drugs			Generic Drugs		
Characteristics	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	\$262	\$55	1.8	\$202	\$112	0.3	\$22	\$73	2.6	\$38	\$14
Age												
5 and younger	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
6-14	8.1	622	77	3.5	398	115	0.7	38	53	4.0	186	47
15-20	2.5	218	88	1.0	169	165	0.3	23	85	1.2	25	22
21-44	3.4	266	77	1.3	207	158	0.3	26	94	1.8	32	17
45-64	4.9	314	65	1.9	242	128	0.3	30	92	2.6	42	16
65-74	4.7	235	50	1.9	184	99	0.3	16	62	2.6	34	13
75-84	5.5	234	43	2.1	180	87	0.3	15	50	3.1	39	12
85 and older	5.9	221	37	2.0	164	82	0.3	15	45	3.5	41	12
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility^d												
Aged	5.3	232	44	2.0	179	90	0.3	16	53	3.0	38	13
Disabled	4.3	296	69	1.7	230	138	0.3	28	90	2.3	38	17
Adults	3.6	262	72	1.4	199	143	0.3	30	117	2.0	32	16
Children	2.6	230	88	1.1	188	178	0.3	10	36	1.3	32	25
Unknown	2.6	224	88	1.2	200	162	0.1	5	71	1.3	19	15
Gender												
Female	5.2	268	51	2.0	207	104	0.3	22	65	2.9	39	14
Male	4.1	253	62	1.5	196	129	0.2	22	91	2.3	35	15
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Race												
White	4.8	265	55	1.8	205	113	0.3	22	74	2.7	38	14
African American	3.1	210	69	1.2	174	149	0.2	14	75	1.7	22	13
Other/unknown	4.3	221	51	1.6	173	105	0.3	16	60	2.4	32	13
Use of Nursing Facilities^e												
Entire year	7.9	324	41	2.6	234	90	0.5	25	51	4.8	64	13
Part year	7.8	337	43	2.7	253	93	0.5	26	52	4.6	57	13
None	4.3	252	59	1.7	196	117	0.3	21	79	2.3	34	15
Maintenance Assistance Status												
Cash	4.4	259	59	1.7	201	119	0.3	23	79	2.4	35	15
Medically needy	7.1	295	42	2.6	227	87	0.4	19	52	4.1	48	12
Poverty related	4.2	239	56	1.7	186	113	0.3	19	75	2.3	33	14
Other/unknown	6.0	309	51	2.1	232	109	0.4	27	67	3.5	49	14

Source: Data for this table are from the MAX 2004 file for Maine, released by CMS in 02/2008. 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 Maine, 0.4 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, <http://www.medispain.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.

TABLE D.6
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, MAINE, 2004

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per Rx				Users ^e				
	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	Total Number of Rx	Total Rx \$	Number	As a Percentage of Dual Benes	Number of Benefit Months
Anti-infective Agents	0.4	0.1	0.1	0.2	\$25	\$17	\$5	\$3	\$69	\$148	\$95	\$17	110,380	\$7,587,246	27,008	52.1 %	305,149
Biologicals	0.1	0.1	0.0	0.1	109	5	0	104	799	59	69	1,909	330	263,649	214	0.4	2,418
Antineoplastic Agents	0.6	0.1	0.0	0.4	78	57	4	17	128	397	199	38	9,572	1,222,281	1,448	2.8	15,625
Endocrine/Metabolic Drugs	1.1	0.4	0.1	0.6	41	32	3	6	38	83	23	11	276,585	10,579,390	23,221	44.8	260,157
Cardiovascular Agents	1.9	0.6	0.1	1.2	58	44	2	12	31	72	36	10	678,676	21,047,957	32,505	62.7	361,010
Respiratory Agents	0.8	0.5	0.0	0.3	48	43	0	5	61	90	48	15	155,635	9,439,959	17,304	33.4	194,712
Gastrointestinal Agents	0.8	0.5	0.0	0.3	70	65	1	4	85	120	93	14	201,074	17,180,255	21,913	42.3	245,558
Genitourinary Agents	0.5	0.3	0.1	0.1	32	26	4	1	61	79	52	14	36,979	2,271,044	6,347	12.2	71,222
CNS Drugs	1.5	0.6	0.1	0.7	102	80	9	13	70	133	81	17	511,187	35,679,157	31,508	60.8	349,784
Stimulants/Anti-obesity/Anorexia	0.7	0.3	0.0	0.4	51	34	3	14	74	116	87	39	8,874	653,219	1,112	2.1	12,770
Miscellaneous Psychological/																	
Neurological Agents	0.7	0.7	0.0	0.0	147	146	0	1	200	204	94	52	21,854	4,377,716	2,772	5.3	29,685
Analgesics and Anesthetics	0.9	0.2	0.0	0.6	49	36	3	10	55	152	174	15	278,933	15,431,440	28,256	54.5	314,646
Neuromuscular Agents	1.0	0.3	0.2	0.5	69	39	20	10	70	145	111	19	177,415	12,462,616	15,949	30.8	180,574
Nutritional Products	0.6	0.0	0.0	0.6	9	0	0	9	15	17	16	15	42,023	634,641	6,224	12.0	68,005
Hematological Agents	0.9	0.2	0.0	0.7	57	49	2	7	64	226	59	10	80,125	5,092,121	8,149	15.7	89,127
Topical Products	0.4	0.2	0.0	0.2	16	10	2	4	38	63	50	18	87,833	3,354,032	18,685	36.0	212,223
Miscellaneous Products	0.4	0.2	0.1	0.2	69	49	13	7	159	255	178	44	7,419	1,181,726	1,520	2.9	17,164
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	7	0	0	0	23	0	0	0	7,933	184,930	2,225	4.3	25,131
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.	2,692,827	148,643,379	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2004 file for Maine, released by CMS in 02/2008. 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 Maine, 0.4 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, <http://www.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, MAINE, 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	\$21,373,096	16,100	31.1 %	180,480	0.8	\$148	\$118
ULCER DRUGS	15,508,012	22,944	44.3	258,421	0.7	89	60
ANTIDEPRESSANTS	13,012,592	33,851	65.3	380,107	0.7	50	34
ANTIHYPERTENSIVES	11,853,998	17,631	34.0	201,459	0.7	81	59
ANTICONVULSANT	10,823,128	13,480	26.0	153,596	0.8	85	70
ANALGESICS - Narcotic	8,070,408	33,126	63.9	370,619	0.5	46	22
ANTIASTHMATIC	7,843,502	23,063	44.5	259,216	0.5	62	30
ANTIDIABETIC	6,004,122	15,803	30.5	177,757	0.7	45	34
ANALGESICS - ANTI-INFLAMMATORY	5,403,504	15,643	30.2	179,747	0.4	71	30
NEUROLOGICAL	4,770,041	5,538	10.7	61,697	0.5	168	77
Total	104,662,403	197,179		2,223,099	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2004 file for Maine, released by CMS in 02/2008. 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.medispain.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.

TABLE D.7A
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, MAINE, 2004

Beneficiary Characteristics	All Top 10 Drug Groups		ANTIPSYCHOTICS					ULCER DRUGS				
	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	1,391,021	\$104,662,403	16,100	31.1 %	180,480	0.8	\$118	22,944	44.3 %	258,421	0.7	\$60
Female	865,281	62,776,188	9,166	29.9	102,614	0.8	104	14,670	47.9	165,414	0.7	60
Disabled	347,277	29,073,729	4,523	43.6	52,785	0.7	119	5,232	50.4	60,844	0.6	59
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	37	4,476	0	0.0	0	0.0	0	3	150.0	36	0.9	123
15-20	507	28,738	10	28.6	120	0.3	36	6	17.1	72	0.3	28
21-44	109,547	9,632,683	2,030	53.5	23,752	0.7	109	1,555	41.0	18,192	0.5	51
45-64	237,186	19,407,832	2,483	38.0	28,913	0.8	127	3,668	56.1	42,544	0.6	63
65-74	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	518,004	33,702,459	4,643	22.9	49,829	0.8	89	9,438	46.5	104,570	0.7	61
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	109	6,613	8	88.9	96	0.2	30	2	22.2	24	0.2	19
21-44	29,712	2,445,841	427	38.2	4,843	0.5	82	478	42.8	5,499	0.5	43
45-64	12,522	859,013	127	27.7	1,395	0.5	77	207	45.1	2,306	0.6	55
65-74	175,849	12,137,089	1,063	16.5	12,076	0.9	105	3,013	46.8	34,778	0.7	62
75-84	177,635	11,206,749	1,537	22.7	16,396	0.8	91	3,220	47.6	35,701	0.7	61
85 and older	122,177	7,047,154	1,481	27.0	15,023	0.8	77	2,518	45.8	26,262	0.8	62
Male	525,740	41,886,215	6,934	32.7	77,866	0.9	137	8,274	39.1	93,007	0.7	60
Disabled	297,294	26,007,476	4,790	42.2	55,566	0.9	152	4,185	36.8	48,439	0.6	59
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	936	95,175	28	51.9	336	0.9	140	16	29.6	192	0.5	32
21-44	114,872	10,904,175	2,549	49.8	29,702	0.9	150	1,506	29.4	17,585	0.6	53
45-64	181,486	15,008,126	2,213	35.8	25,528	0.9	155	2,663	43.1	30,662	0.7	62
65-74	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	228,446	15,878,739	2,144	21.8	22,300	0.8	100	4,089	41.6	44,568	0.7	61
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	226	25,705	4	23.5	48	0.9	245	3	17.6	36	0.8	72
21-44	22,743	2,019,905	294	26.7	3,220	0.5	91	393	35.7	4,444	0.5	53
45-64	21,488	1,771,618	156	17.8	1,676	0.5	85	346	39.5	3,810	0.6	59
65-74	90,448	6,406,488	624	16.2	6,950	0.9	131	1,574	40.9	17,755	0.7	61
75-84	65,300	4,043,309	677	24.5	6,760	0.8	86	1,207	43.8	12,843	0.7	63
85 and older	28,241	1,611,714	389	31.9	3,646	0.8	76	566	46.4	5,680	0.8	66
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 Maine, released by CMS in 02/2008. 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, MAINE, 2004

Beneficiary Characteristics	ANTIDEPRESSANTS					ANTIHYPERTENSIVE					ANTIEPILEPTIC				
	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	33,851	65.3 %	380,107	0.7	\$34	17,631	34.0 %	201,459	0.7	\$59	13,480	26.0 %	153,596	0.8	\$71
Female	22,080	72.0	248,159	0.7	35	10,851	35.4	124,471	0.7	59	7,909	25.8	90,057	0.8	67
Disabled	10,221	98.6	118,348	0.7	38	3,360	32.4	39,071	0.7	57	4,616	44.5	53,516	0.8	79
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	23	65.7	276	0.6	38	0	0.0	0	0.0	0	13	37.1	156	0.7	38
21-44	3,781	99.6	44,025	0.6	36	540	14.2	6,310	0.6	50	1,988	52.4	23,043	0.8	85
45-64	6,417	98.1	74,047	0.7	40	2,820	43.1	32,761	0.7	58	2,615	40.0	30,317	0.8	75
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	11,859	58.5	129,811	0.7	32	7,491	36.9	85,400	0.8	60	3,293	16.2	36,541	0.8	49
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	8	88.9	96	0.3	14	0	0.0	0	0.0	0	2	22.2	24	0.4	63
21-44	1,247	111.5	14,192	0.6	35	138	12.3	1,599	0.6	49	545	48.7	6,178	0.7	71
45-64	511	111.3	5,663	0.6	35	129	28.1	1,380	0.6	47	159	34.6	1,763	0.7	54
65-74	3,420	53.1	39,131	0.7	31	3,378	52.4	39,202	0.7	62	1,066	16.5	12,253	0.8	52
75-84	3,592	53.1	39,170	0.8	32	2,835	41.9	32,182	0.8	61	954	14.1	10,439	0.8	41
85 and older	3,081	56.1	31,559	0.9	32	1,011	18.4	11,037	0.8	56	567	10.3	5,884	0.8	34
Male	11,771	55.6	131,948	0.7	33	6,780	32.0	76,988	0.7	58	5,571	26.3	63,539	0.8	75
Disabled	7,009	61.7	80,858	0.6	34	3,364	29.6	38,983	0.7	57	3,835	33.8	44,451	0.9	83
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	26	48.1	310	0.7	38	2	3.7	24	0.7	44	15	27.8	180	0.9	128
21-44	3,180	62.1	36,837	0.6	32	852	16.6	10,012	0.6	50	1,897	37.1	22,034	0.8	84
45-64	3,803	61.5	43,711	0.7	35	2,510	40.6	28,947	0.7	60	1,923	31.1	22,237	0.9	81
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	4,762	48.5	51,090	0.7	32	3,416	34.8	38,005	0.7	59	1,736	17.7	19,088	0.8	59
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	7	41.2	84	0.6	30	2	11.8	24	0.5	17	4	23.5	48	1.8	175
21-44	819	74.4	9,214	0.5	30	221	20.1	2,507	0.5	45	366	33.2	4,125	0.7	65
45-64	639	72.9	6,962	0.6	32	364	41.6	4,026	0.7	55	225	25.7	2,481	0.7	76
65-74	1,387	36.1	15,542	0.7	34	1,672	43.5	18,880	0.7	62	627	16.3	7,118	0.8	60
75-84	1,247	45.2	12,828	0.8	31	940	34.1	10,286	0.8	60	382	13.9	3,985	0.9	47
85 and older	663	54.4	6,460	0.9	32	217	17.8	2,282	0.8	57	132	10.8	1,331	0.8	31
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 Maine, released by CMS in 02/2008. 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.

TABLE D.7C
 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, MAINE, 2004

Beneficiary Characteristics	ANALGESICS - Narcotic					ANTIASTHMATIC					ANTIDIABETIC				
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean 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 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 of Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	33,126	63.9 %	370,619	0.5	\$22	23,063	44.5 %	259,216	0.5	\$30	15,803	30.5 %	177,757	0.7	\$34
Female	20,584	67.2	230,286	0.5	18	14,734	48.1	166,007	0.5	29	9,746	31.8	109,745	0.7	33
Disabled	8,747	84.3	101,579	0.5	22	5,471	52.8	63,658	0.4	28	2,850	27.5	32,759	0.7	39
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	5	250.0	60	0.1	1	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	20	57.1	236	0.3	8	11	31.4	132	0.2	6	3	8.6	36	0.6	41
21-44	3,267	86.1	38,095	0.4	19	1,671	44.0	19,606	0.3	23	588	15.5	6,830	0.6	32
45-64	5,455	83.4	63,188	0.5	24	3,789	58.0	43,920	0.4	30	2,259	34.6	25,893	0.7	42
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	11,837	58.4	128,707	0.5	15	9,263	45.7	102,349	0.5	30	6,896	34.0	76,986	0.8	30
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	12	133.3	144	0.2	2	3	33.3	36	0.1	4	0	0.0	0	0.0	0
21-44	1,213	108.5	13,926	0.5	24	494	44.2	5,680	0.3	18	134	12.0	1,497	0.6	38
45-64	435	94.8	4,881	0.5	16	240	52.3	2,572	0.4	25	110	24.0	1,152	0.6	38
65-74	3,606	56.0	41,450	0.4	16	3,413	53.0	39,026	0.5	34	2,917	45.3	33,452	0.7	33
75-84	3,591	53.1	38,834	0.5	13	3,027	44.8	33,320	0.5	31	2,560	37.9	28,496	0.8	29
85 and older	2,980	54.3	29,472	0.5	14	2,086	38.0	21,715	0.5	24	1,175	21.4	12,389	0.8	24
Male	12,542	59.2	140,333	0.5	27	8,329	39.3	93,209	0.5	33	6,057	28.6	68,012	0.7	35
Disabled	7,099	62.5	81,767	0.5	29	3,657	32.2	42,403	0.5	31	2,710	23.9	31,386	0.7	40
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	22	40.7	263	0.2	2	13	24.1	156	0.4	29	1	1.9	12	0.7	38
21-44	3,108	60.7	36,024	0.5	25	1,213	23.7	14,090	0.4	26	587	11.5	6,841	0.7	44
45-64	3,969	64.2	45,480	0.5	32	2,431	39.3	28,157	0.5	34	2,122	34.3	24,533	0.7	39
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	5,443	55.4	58,566	0.5	25	4,672	47.6	50,806	0.6	33	3,347	34.1	36,626	0.8	31
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	2	11.8	24	0.1	1	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	1,000	90.8	11,313	0.6	42	292	26.5	3,332	0.3	20	142	12.9	1,607	0.6	37
45-64	721	82.3	8,028	0.6	53	318	36.3	3,551	0.4	29	251	28.7	2,767	0.7	41
65-74	1,789	46.5	20,067	0.4	19	1,920	49.9	21,780	0.6	39	1,600	41.6	17,979	0.7	31
75-84	1,314	47.6	13,490	0.4	10	1,460	52.9	15,403	0.6	31	1,026	37.2	10,970	0.8	30
85 and older	617	50.6	5,644	0.5	10	682	55.9	6,740	0.6	27	328	26.9	3,303	0.8	26
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 Maine, released by CMS in 02/2008. 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.

TABLE D.7D
 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, MAINE, 2004

Beneficiary Characteristics	ANALGESICS - ANTI-INFLAMMATORY					MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL					Number of Beneficiaries	Number of Benefit Months
	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	15,643	30.2 %	179,747	0.4	\$30	5,538	10.7 %	61,697	0.5	\$77	51,833	567,162
Female	10,178	33.2	117,052	0.4	34	3,457	11.3	38,604	0.5	89	30,653	336,018
Disabled	4,487	43.3	52,417	0.4	26	1,333	12.9	15,628	0.3	98	10,371	118,350
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	2	24
15-20	10	28.6	120	0.2	14	2	5.7	24	0.3	12	35	418
21-44	1,554	40.9	18,224	0.3	19	504	13.3	5,897	0.3	90	3,796	43,470
45-64	2,923	44.7	34,073	0.4	30	827	12.6	9,707	0.3	103	6,538	74,438
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Other Eligibles	5,691	28.1	64,635	0.5	40	2,124	10.5	22,976	0.6	82	20,282	217,668
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
15-20	5	55.6	60	0.1	1	0	0.0	0	0.0	0	9	108
21-44	516	46.2	5,939	0.3	16	158	14.1	1,842	0.2	113	1,118	12,270
45-64	193	42.0	2,117	0.4	21	60	13.1	640	0.2	58	459	4,706
65-74	2,041	31.7	23,836	0.5	44	468	7.3	5,349	0.4	51	6,442	72,130
75-84	1,810	26.8	20,558	0.5	43	747	11.0	7,966	0.8	88	6,761	73,254
85 and older	1,126	20.5	12,125	0.6	45	691	12.6	7,179	0.8	94	5,493	55,200
Male	5,465	25.8	62,695	0.4	23	2,081	9.8	23,093	0.4	59	21,177	231,134
Disabled	3,071	27.0	35,882	0.3	16	1,078	9.5	12,570	0.3	45	11,359	128,298
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
15-20	12	22.2	144	0.2	2	6	11.1	72	0.1	10	54	637
21-44	1,282	25.0	15,000	0.3	11	458	8.9	5,334	0.2	45	5,120	58,182
45-64	1,777	28.7	20,738	0.4	20	614	9.9	7,164	0.3	45	6,185	69,479
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Other Eligibles	2,394	24.4	26,813	0.5	32	1,003	10.2	10,523	0.5	75	9,818	102,836
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
15-20	1	5.9	12	0.1	1	0	0.0	0	0.0	0	17	201
21-44	357	32.4	4,092	0.3	15	125	11.4	1,436	0.2	116	1,101	11,761
45-64	325	37.1	3,604	0.4	27	84	9.6	939	0.2	31	876	9,172
65-74	934	24.3	10,723	0.5	33	277	7.2	3,063	0.5	50	3,847	41,947
75-84	552	20.0	6,103	0.6	40	329	11.9	3,251	0.7	84	2,758	28,435
85 and older	225	18.5	2,279	0.6	39	188	15.4	1,834	0.8	93	1,219	11,320
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	10

Source: Data for this table are from the MAX 2004 file for Maine, released by CMS in 02/2008. 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.medispn.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, MAINE, 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	\$324	7.9	3,086	31,095
Age				
0-64	488	9.0	198	2,140
65-74	450	9.5	360	3,723
75-84	343	8.4	1,022	10,105
85 and older	256	7.1	1,506	15,127
Unknown	0	0.0	0	0
Gender				
Female	308	7.7	2,308	23,631
Male	374	8.7	778	7,464
Unknown	0	0.0	0	0
Race				
White	327	8	2,809	28,328
African American	250	6	4	35
Other/unknown	290	7.6	273	2,732
Basis of Eligibility^c				
Aged	312	7.8	2,888	28,955
Disabled	488	9.0	198	2,140
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 Maine, released by CMS in 02/2008. 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 4,512 beneficiaries who were in nursing facilities for part of their enrollment and their 43,278 benefit months were excluded from the analysis. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

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

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

TABLE D.9
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d, e}
 DUAL ELIGIBLE BENEFICIARIES, MAINE, 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		
	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	Number of Benefit Months
Anti-infective Agents	0.6	0.2	0.1	0.4	\$25	\$14	\$6	\$5	\$39	\$85	\$52	\$14	14,306	\$552,047	2,086	67.6 %	22,083
Biologicals	0.1	0.0	0.0	0.1	5	3	1	1	54	150	25	27	9	487	9	0.3	100
Antineoplastic Agents	0.8	0.1	0.0	0.7	87	50	0	37	109	352	0	57	973	106,390	125	4.1	1,220
Endocrine/Metabolic Drugs	1.4	0.5	0.0	0.9	41	31	1	9	29	66	16	10	22,805	656,393	1,529	49.5	15,916
Cardiovascular Agents	2.4	0.4	0.1	1.9	45	25	2	18	19	59	28	10	55,639	1,053,303	2,274	73.7	23,274
Respiratory Agents	0.9	0.3	0.0	0.6	35	25	1	9	39	78	49	17	10,379	406,690	1,124	36.4	11,597
Gastrointestinal Agents	1.2	0.7	0.0	0.5	79	72	0	7	67	107	48	14	18,104	1,220,977	1,513	49.0	15,475
Genitourinary Agents	0.7	0.4	0.2	0.1	38	27	8	3	55	71	46	23	4,351	240,492	599	19.4	6,300
CNS Drugs	1.9	0.9	0.2	0.9	107	85	10	12	56	94	66	14	48,771	2,713,217	2,469	80.0	25,329
Stimulants/Anti-obesity/Anorexia	0.8	0.0	0.1	0.7	14	1	5	8	18	107	68	11	176	3,178	24	0.8	223
Miscellaneous Psychological/																	
Neurological Agents	0.9	0.9	0.0	0.0	118	118	0	0	125	126	19	71	4,320	540,620	446	14.5	4,564
Analgesics and Anesthetics	1.1	0.4	0.0	0.7	44	35	1	7	41	99	18	11	18,251	741,840	1,716	55.6	17,012
Neuromuscular Agents	1.4	0.3	0.2	0.9	72	29	16	27	52	93	76	31	15,978	827,266	1,078	34.9	11,419
Nutritional Products	0.9	0.0	0.0	0.8	11	0	0	10	13	22	11	13	6,373	80,931	740	24.0	7,490
Hematological Agents	1.6	0.3	0.0	1.3	61	50	1	10	38	200	52	7	13,263	510,521	817	26.5	8,341
Topical Products	0.6	0.2	0.0	0.3	19	11	2	6	33	52	47	19	11,248	371,425	1,806	58.5	19,553
Miscellaneous Products	0.2	0.1	0.0	0.1	15	11	0	4	62	102	0	30	285	17,592	107	3.5	1,160
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	6	0	0	0	19	0	0	0	1,222	23,161	332	10.8	3,677
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.	246,453	10,066,530	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2004 file for Maine, released by CMS in 02/2008. 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 4,512 beneficiaries who were in nursing facilities for part of their enrollment and their 43,278 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.medspan.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 Maine, 0.4 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.

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, MAINE, 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	\$1,658,928	1,520	49.3 %	15,856	1.0	\$109	\$105
ULCER DRUGS	1,121,983	1,557	50.5	16,205	0.9	75	69
ANTIDEPRESSANTS	969,215	2,453	79.5	25,695	1.0	38	38
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	544,396	491	15.9	5,115	0.9	124	106
ANTICONVULSANT	504,336	816	26.4	8,889	1.1	52	57
ANTIHYPERLIPIDEMIC	382,846	600	19.4	6,263	0.9	68	61
ANALGESICS - Narcotic	366,984	1,763	57.1	17,245	0.7	31	21
ANTIASTHMATIC	343,812	1,485	48.1	15,261	0.6	39	23
ANTIDIABETIC	331,052	1,052	34.1	11,095	1.0	31	30
ANALGESICS - ANTI-INFLAMMATORY	294,067	522	16.9	5,599	0.7	71	53
Total	6,517,619	12,259		127,223	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2004 file for Maine, released by CMS in 02/2008. 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 4,512 beneficiaries who were in nursing facilities for part of their enrollment and their 43,278 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.medispain.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.

TABLE D.10A

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR TOP 10 DRUG GROUPS COMBINED AND FIRST AND SECOND TOP DRUG GROUPS SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c, d}
DUAL ELIGIBLE BENEFICIARIES, MAINE, 2004

Beneficiary Characteristics	All Top 10 Drug Groups		ANTIPSYCHOTICS					ULCER DRUGS				
	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	110,693	\$6,517,619	1,520	49.3 %	15,856	1.0	\$105	1,557	50.5 %	16,205	0.9	\$69
Female	79,965	4,711,847	1,101	47.7	11,657	0.9	105	1,129	48.9	11,829	0.9	68
Disabled	5,509	403,567	53	49.5	551	1.2	202	56	52.3	618	0.9	72
64 or younger	5,509	403,567	53	49.5	551	1.2	202	56	52.3	618	0.9	72
65-74	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	74,456	4,308,280	1,048	47.6	11,106	0.9	100	1,073	48.8	11,211	0.9	68
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	10,418	723,690	140	65.1	1,577	1.0	124	103	47.9	1,112	0.9	70
75-84	28,197	1,630,773	395	54.0	4,143	1.0	105	371	50.7	3,868	0.9	68
85 and older	35,841	1,953,817	513	40.9	5,386	0.9	90	599	47.8	6,231	0.9	67
Male	30,728	1,805,772	419	53.9	4,199	1.0	103	428	55.0	4,376	0.9	72
Disabled	4,597	335,544	53	58.2	583	1.3	162	50	54.9	566	0.9	74
64 or younger	4,597	335,544	53	58.2	583	1.3	162	50	54.9	566	0.9	74
65-74	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	26,131	1,470,228	366	53.3	3,616	1.0	94	378	55.0	3,810	0.9	72
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	7,471	453,356	83	57.2	852	1.1	118	87	60.0	907	1.0	82
75-84	11,385	620,961	155	53.4	1,518	1.0	93	160	55.2	1,609	0.9	71
85 and older	7,275	395,911	128	50.8	1,246	0.9	78	131	52.0	1,294	0.9	67
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 Maine, released by CMS in 02/2008. 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 4,512 beneficiaries who were in nursing facilities for part of their enrollment and their 43,278 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.10B
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY
 AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, MAINE, 2004

Beneficiary Characteristics	ANTIDEPRESSANTS					MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL					ANTICONVULSANT				
	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	2,453	79.5 %	25,695	1.0	\$38	491	15.9 %	5,115	0.9	\$106	816	26.4 %	8,889	1.1	\$57
Female	1,815	78.6	19,230	1.0	38	352	15.3	3,736	0.9	113	550	23.8	5,994	1.1	50
Disabled	109	101.9	1,177	1.0	45	15	14.0	170	0.8	265	82	76.6	905	1.2	75
64 or younger	109	101.9	1,177	1.0	45	15	14.0	170	0.8	265	82	76.6	905	1.2	75
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	1,706	77.5	18,053	1.0	38	337	15.3	3,566	0.9	106	468	21.3	5,089	1.0	45
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	191	88.8	2,030	1.1	46	40	18.6	439	0.8	153	96	44.7	1,099	1.1	60
75-84	617	84.3	6,515	1.0	39	124	16.9	1,287	1.0	109	197	26.9	2,133	1.0	44
85 and older	898	71.6	9,508	1.0	35	173	13.8	1,840	0.8	92	175	14.0	1,857	1.0	38
Male	638	82.0	6,465	1.0	36	139	17.9	1,379	0.8	89	266	34.2	2,895	1.1	71
Disabled	75	82.4	832	0.9	38	7	7.7	83	0.5	50	71	78.0	806	1.3	102
64 or younger	75	82.4	832	0.9	38	7	7.7	83	0.5	50	71	78.0	806	1.3	102
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	563	82.0	5,633	1.0	36	132	19.2	1,296	0.8	91	195	28.4	2,089	1.1	59
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	137	94.5	1,450	1.1	47	25	17.2	254	0.9	102	75	51.7	817	1.0	68
75-84	240	82.8	2,357	1.0	33	59	20.3	560	0.8	84	82	28.3	885	1.2	62
85 and older	186	73.8	1,826	1.0	31	48	19.0	482	0.8	94	38	15.1	387	1.0	35
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 Maine, released by CMS in 02/2008. 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 4,512 beneficiaries who were in nursing facilities for part of their enrollment and their 43,278 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.medispn.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, MAINE, 2004

Beneficiary Characteristics	ANTIHYPERTENSIVE					ANALGESICS - Narcotic					ANTIASTHMATIC				
	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	600	19.4 %	6,263	0.9	\$61	1,763	57.1 %	17,245	0.7	\$21	1,485	48.1 %	15,261	0.6	\$23
Female	424	18.4	4,528	0.9	59	1,300	56.3	12,871	0.7	21	1,048	45.4	10,980	0.5	21
Disabled	23	21.5	241	0.9	63	66	61.7	696	1.2	51	40	37.4	442	0.5	18
64 or younger	23	21.5	241	0.9	63	66	61.7	696	1.2	51	40	37.4	442	0.5	18
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	401	18.2	4,287	0.9	59	1,234	56.1	12,175	0.7	20	1,008	45.8	10,538	0.5	21
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	71	33.0	782	0.9	65	132	61.4	1,325	0.7	46	122	56.7	1,240	0.7	27
75-84	185	25.3	1,962	0.9	64	425	58.1	4,231	0.7	18	334	45.6	3,446	0.5	22
85 and older	145	11.6	1,543	0.8	51	677	54.0	6,619	0.6	15	552	44.0	5,852	0.5	19
Male	176	22.6	1,735	0.9	66	463	59.5	4,374	0.6	22	437	56.2	4,281	0.7	28
Disabled	18	19.8	195	0.9	64	48	52.7	543	1.1	83	29	31.9	318	1.0	34
64 or younger	18	19.8	195	0.9	64	48	52.7	543	1.1	83	29	31.9	318	1.0	34
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	158	23.0	1,540	0.9	66	415	60.4	3,831	0.6	13	408	59.4	3,963	0.7	27
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	51	35.2	505	0.9	67	105	72.4	1,005	0.6	15	94	64.8	1,000	0.8	35
75-84	76	26.2	735	1.0	69	178	61.4	1,626	0.6	10	176	60.7	1,641	0.7	25
85 and older	31	12.3	300	0.8	55	132	52.4	1,200	0.5	15	138	54.8	1,322	0.6	25
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 Maine, released by CMS in 02/2008. 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 4,512 beneficiaries who were in nursing facilities for part of their enrollment and their 43,278 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.medispain.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.10D
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR NINTH AND TENTH TOP DRUG GROUPS
 SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, MAINE, 2004

Beneficiary Characteristics	ANTIDIABETIC					ANALGESICS - ANTI-INFLAMMATORY					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	1,052	34.1 %	11,095	1.0	\$30	522	16.9 %	5,599	0.7	\$53	3,086	31,095
Female	736	31.9	7,869	1.0	29	384	16.6	4,156	0.7	55	2,308	23,631
Disabled	43	40.2	464	1.1	40	22	20.6	252	0.5	24	107	1,169
64 or younger	43	40.2	464	1.1	40	22	20.6	252	0.5	24	107	1,169
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Other Eligibles	693	31.5	7,405	1.0	28	362	16.4	3,904	0.7	57	2,201	22,462
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	93	43.3	1,032	1.1	37	39	18.1	429	0.7	96	215	2,267
75-84	307	41.9	3,196	1.0	29	130	17.8	1,407	0.8	52	732	7,413
85 and older	293	23.4	3,177	0.9	25	193	15.4	2,068	0.8	53	1,254	12,782
Male	316	40.6	3,226	1.0	32	138	17.7	1,443	0.7	45	778	7,464
Disabled	28	30.8	295	1.0	29	17	18.7	204	0.6	20	91	971
64 or younger	28	30.8	295	1.0	29	17	18.7	204	0.6	20	91	971
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Other Eligibles	288	41.9	2,931	1.0	32	121	17.6	1,239	0.8	49	687	6,493
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	90	62.1	975	1.0	32	27	18.6	292	0.7	45	145	1,456
75-84	140	48.3	1,385	1.0	36	52	17.9	518	0.9	58	290	2,692
85 and older	58	23.0	571	0.9	23	42	16.7	429	0.7	40	252	2,345
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 Maine, released by CMS in 02/2008. 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 4,512 beneficiaries who were in nursing facilities for part of their enrollment and their 43,278 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.medispn.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.11
USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
AMONG DUALS, BY BENEFICIARY CHARACTERISTIC^{a,b}
MAINE, 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	26,740	51.6 %	4.9	254,278	\$63	\$3,290,110	\$13	2.2 %	51,833
Age									
5 and younger	0	0.0	0.0	0	0	0	0	0.0	0
6-14	1	50.0	6.5	13	272	544	42	3.6	2
15-20	41	35.7	2.9	332	52	5,970	18	2.0	115
21-44	5,457	49.0	4.3	47,614	69	770,127	16	2.3	11,138
45-64	7,707	54.8	5.5	77,813	83	1,173,463	15	2.4	14,058
65-74	4,777	46.4	4.3	44,181	51	523,164	12	2.0	10,289
75-84	4,943	51.9	4.9	46,418	48	460,741	10	1.9	9,519
85 and older	3,814	56.8	5.6	37,907	53	356,101	9	2.4	6,712
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Basis of Eligibility^c									
Aged	13,472	51.2	4.9	128,107	51	1,335,131	10	2.1	26,302
Disabled	11,464	52.8	5.2	112,611	81	1,754,396	16	2.4	21,732
Adults	1,789	47.6	3.6	13,464	53	199,130	15	1.9	3,759
Children	10	37.0	2.9	77	50	1,361	18	1.8	27
Unknown	5	38.5	1.5	19	7	92	5	0.3	13
Gender									
Female	17,410	56.8	5.6	170,521	71	2,177,215	13	2.4	30,653
Male	9,330	44.1	4.0	83,757	53	1,112,895	13	1.9	21,177
Unknown	0	0.0	0.0	0	0	0	0	0.0	3
Race									
White	25,019	51.9	5.0	239,006	64	3,110,862	13	2.2	48,232
African American	92	39.3	2.5	581	37	8,641	15	1.7	234
Other/unknown	1,629	48.4	4.4	14,691	51	170,607	12	2.1	3,367
Use of Nursing Facilities^d									
Entire year	1,797	58.2	6.1	18,885	65	199,695	11	2.0	3,086
Part year	2,970	65.8	6.2	28,192	66	298,306	11	2.0	4,512
None	21,973	49.7	4.7	207,201	63	2,792,109	13	2.3	44,235
Maintenance Assistance Status									
Cash	10,422	52.3	5.1	100,919	69	1,381,022	14	2.3	19,935
Medically needy	1,793	62.4	7.0	20,169	64	183,974	9	2.3	2,874
Poverty related	8,980	47.0	4.2	80,566	57	1,086,353	13	2.2	19,088
Other/unknown	5,545	55.8	5.3	52,624	64	638,761	12	2.1	9,936

Table D11

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2004 file for Maine, released by CMS in 02/2008. 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}
MAINE, 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	0.4	\$6	\$13	\$0	\$2	567,162
Age						
5 and younger	0.0	0	0	0	0	0
6-14	0.5	23	42	0	0	24
15-20	0.2	4	18	0	1	1,364
21-44	0.4	6	16	0	2	125,693
45-64	0.5	7	15	0	2	157,795
65-74	0.4	5	12	0	1	114,077
75-84	0.5	5	10	0	1	101,689
85 and older	0.6	5	9	0	1	66,520
Unknown	0.0	0	0	0	0	0
Basis of Eligibility^c						
Aged	0.5	5	10	0	1	280,155
Disabled	0.5	7	16	0	2	246,654
Adults	0.3	5	15	0	2	39,897
Children	0.2	4	18	0	1	321
Unknown	0.1	1	5	0	1	135
Gender						
Female	0.5	6	13	0	2	336,018
Male	0.4	5	13	0	1	231,134
Unknown	0.0	0	0	0	0	10
Race						
White	0.5	6	13	0	2	528,515
African American	0.2	4	15	0	1	2,386
Other/unknown	0.4	5	12	0	1	36,261
Use of Nursing Facilities^d						
Entire year	0.6	6	11	0	2	31,095
Part year	0.7	7	11	0	2	43,278
None	0.4	6	13	0	2	492,789
Maintenance Assistance Status						
Cash	0.4	6	14	0	2	228,197
Medically needy	0.8	7	9	0	2	26,635
Poverty related	0.4	5	13	0	1	211,464
Other/unknown	0.5	6	12	0	2	100,866

Source: Data for this table are from the MAX 2004 file for Maine, released by CMS in 02/2008. 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 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.13
USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
FOR SELECTED DRUG CATEGORIES AMONG DUALS^{a,b,c}
MAINE, 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	37,440	\$88	\$3,290,110	100.0 %	254,278	\$13	100.0 %
Anorexia or weight loss/gain	0	0	0	0.0	0	0	0.0
Fertility drugs	6	27	161	0.0	8	20	0.0
Drugs for cosmetic purposes	37	14	517	0.0	63	8	0.0
Cough and cold medications	91	172	15,682	0.5	284	55	0.1
Vitamins and minerals	6,050	104	628,470	19.1	41,672	15	16.4
Non-prescription drugs	14,865	91	1,360,051	41.3	92,008	15	36.2
Barbiturates	379	64	24,234	0.7	3,994	6	1.6
Benzodiazepines	14,860	62	928,192	28.2	111,107	8	43.7
Other Part D Excl Rx Drugs	1,152	289	332,803	10.1	5,142	65	2.0

Source: Data for this table are from the MAX 2004 file for Maine, released by CMS in 02/2008. 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}
 MAINE, 2004

Total Number of Dual Eligible Beneficiaries	51,833
Total Pharmacy Reimbursement for Dual Eligible Beneficiaries	\$148,643,379
Mean Pharmacy Reimbursement per Dual Eligible Beneficiary	\$2,868

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	4,092	7.9 %	\$0	0.0 %
1-500	9,539	18.4	1,892,423	1.3
501-1,000	5,488	10.6	4,079,438	2.7
1,001-1,500	4,635	8.9	5,766,980	3.9
1,501-2,000	4,039	7.8	7,036,591	4.7
2,001-2,500	3,676	7.1	8,247,245	5.5
2,501-3,000	3,132	6.0	8,590,368	5.8
3,001-3,500	2,548	4.9	8,255,808	5.6
3,501-4,000	2,205	4.3	8,260,764	5.6
4,001-4,500	1,888	3.6	8,013,535	5.4
4,501-5,000	1,611	3.1	7,640,087	5.1
5,001-5,500	1,313	2.5	6,888,435	4.6
5,501-6,000	1,103	2.1	6,333,290	4.3
6,001-6,500	882	1.7	5,500,270	3.7
6,501-7,000	799	1.5	5,388,772	3.6
7,001-7,500	682	1.3	4,940,762	3.3
7,501-8,000	513	1.0	3,973,360	2.7
8,001-8,500	458	0.9	3,773,733	2.5
8,501-9,000	385	0.7	3,367,067	2.3
9,001-9,500	334	0.6	3,090,339	2.1
9,501-10,000	284	0.5	2,768,997	1.9
10,001+	2,227	4.3	34,835,115	23.4

Source: Data for this table are from the MAX 2004 file for Maine, released by CMS in 02/2008. 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 1A
 MEDICAID PHARMACY REIMBURSEMENT FOR DISABLED DUAL ELIGIBLE BENEFICIARIES UNDER AGE 65^{a, b, c}
 MAINE, 2004

Total Number of Disabled Dual Eligible Beneficiaries, Age < 65	21,732
Total Pharmacy Reimbursement for Disabled Dual Eligible Beneficiaries, Age < 65	\$73,095,445
Mean Pharmacy Reimbursement per Disabled Dual Eligible Beneficiary, Age < 65	\$3,364

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Disabled Dual Beneficiaries, Age < 65	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	1,765	8.1 %	0	0.0 %
1-500	4,121	19.0	769,764	1.1
501-1,000	2,117	9.7	1,570,404	2.1
1,001-1,500	1,702	7.8	2,118,097	2.9
1,501-2,000	1,477	6.8	2,562,685	3.5
2,001-2,500	1,327	6.1	2,972,274	4.1
2,501-3,000	1,141	5.3	3,123,969	4.3
3,001-3,500	970	4.5	3,144,608	4.3
3,501-4,000	832	3.8	3,115,470	4.3
4,001-4,500	746	3.4	3,169,857	4.3
4,501-5,000	674	3.1	3,197,291	4.4
5,001-5,500	544	2.5	2,855,990	3.9
5,501-6,000	490	2.3	2,811,481	3.8
6,001-6,500	426	2.0	2,658,184	3.6
6,501-7,000	396	1.8	2,671,377	3.7
7,001-7,500	365	1.7	2,642,506	3.6
7,501-8,000	279	1.3	2,160,808	3.0
8,001-8,500	242	1.1	1,993,690	2.7
8,501-9,000	217	1.0	1,895,551	2.6
9,001-9,500	197	0.9	1,822,900	2.5
9,501-10,000	162	0.7	1,580,810	2.2
10,001+	1,542	7.1	24,257,729	33.2

Source: Data for this table are from the MAX 2004 file for Maine, released by CMS in 02/2008. 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}
 MAINE, 2004

Total Number of Dual Eligible Beneficiaries, Age 65+	26,520
Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65+	\$65,344,159
Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65+	\$2,464

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 65+	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	1,998	7.5 %	0	0.0 %
1-500	4,566	17.2	965,711	1.5
501-1,000	2,968	11.2	2,214,006	3.4
1,001-1,500	2,610	9.8	3,243,794	5.0
1,501-2,000	2,332	8.8	4,069,730	6.2
2,001-2,500	2,124	8.0	4,766,928	7.3
2,501-3,000	1,815	6.8	4,982,279	7.6
3,001-3,500	1,446	5.5	4,683,173	7.2
3,501-4,000	1,249	4.7	4,677,442	7.2
4,001-4,500	1,021	3.8	4,328,628	6.6
4,501-5,000	846	3.2	4,012,362	6.1
5,001-5,500	702	2.6	3,681,882	5.6
5,501-6,000	561	2.1	3,222,313	4.9
6,001-6,500	403	1.5	2,510,853	3.8
6,501-7,000	363	1.4	2,447,662	3.7
7,001-7,500	284	1.1	2,058,875	3.2
7,501-8,000	202	0.8	1,564,735	2.4
8,001-8,500	194	0.7	1,598,594	2.4
8,501-9,000	148	0.6	1,296,552	2.0
9,001-9,500	122	0.5	1,128,134	1.7
9,501-10,000	100	0.4	974,287	1.5
10,001+	466	1.8	6,916,219	10.6

Source: Data for this table are from the MAX 2004 file for Maine, released by CMS in 02/2008. 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}
 MAINE, 2004

Total Number of Dual Eligible Beneficiaries, Age 65-74	10,289
Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65-74	\$26,811,258
Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65-74	\$2,606

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 65-74	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	1,035	10.1 %	0	0.0 %
1-500	1,778	17.3	355,652	1.3
501-1,000	1,000	9.7	756,514	2.8
1,001-1,500	905	8.8	1,127,398	4.2
1,501-2,000	839	8.2	1,460,181	5.4
2,001-2,500	785	7.6	1,767,291	6.6
2,501-3,000	635	6.2	1,750,326	6.5
3,001-3,500	535	5.2	1,726,542	6.4
3,501-4,000	486	4.7	1,817,355	6.8
4,001-4,500	396	3.8	1,678,518	6.3
4,501-5,000	341	3.3	1,617,886	6.0
5,001-5,500	294	2.9	1,544,476	5.8
5,501-6,000	225	2.2	1,294,181	4.8
6,001-6,500	159	1.5	991,531	3.7
6,501-7,000	154	1.5	1,039,254	3.9
7,001-7,500	117	1.1	847,125	3.2
7,501-8,000	93	0.9	720,504	2.7
8,001-8,500	92	0.9	757,713	2.8
8,501-9,000	67	0.7	586,714	2.2
9,001-9,500	52	0.5	482,517	1.8
9,501-10,000	55	0.5	536,425	2.0
10,001+	246	2.4	3,953,155	14.7

Source: Data for this table are from the MAX 2004 file for Maine, released by CMS in 02/2008. 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 1D
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 75 TO 84^{a, b}
 MAINE, 2004

Total Number of Dual Eligible Beneficiaries, Age 75-84	9,519
Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 75-84	\$23,839,172
Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 75-84	\$2,504

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 75-84	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	652	6.8 %	0	0.0 %
1-500	1,512	15.9	325,211	1.4
501-1,000	1,088	11.4	805,201	3.4
1,001-1,500	947	9.9	1,178,369	4.9
1,501-2,000	832	8.7	1,450,756	6.1
2,001-2,500	777	8.2	1,738,229	7.3
2,501-3,000	700	7.4	1,922,350	8.1
3,001-3,500	514	5.4	1,671,707	7.0
3,501-4,000	474	5.0	1,778,501	7.5
4,001-4,500	391	4.1	1,656,604	6.9
4,501-5,000	312	3.3	1,480,894	6.2
5,001-5,500	250	2.6	1,309,115	5.5
5,501-6,000	212	2.2	1,215,143	5.1
6,001-6,500	164	1.7	1,020,989	4.3
6,501-7,000	147	1.5	991,983	4.2
7,001-7,500	112	1.2	812,470	3.4
7,501-8,000	71	0.7	550,234	2.3
8,001-8,500	75	0.8	619,081	2.6
8,501-9,000	55	0.6	481,738	2.0
9,001-9,500	52	0.5	480,711	2.0
9,501-10,000	29	0.3	282,557	1.2
10,001+	153	1.6	2,067,329	8.7

Source: Data for this table are from the MAX 2004 file for Maine, released by CMS in 02/2008. 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}
 MAINE, 2004

Total Number of Dual Eligible Beneficiaries, Age 85+	6,712
Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 85+	\$14,693,729
Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 85+	\$2,189

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 85+	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	311	4.6 %	0	0.0 %
1-500	1,276	19.0	284,848	1.9
501-1,000	880	13.1	652,291	4.4
1,001-1,500	758	11.3	938,027	6.4
1,501-2,000	661	9.8	1,158,793	7.9
2,001-2,500	562	8.4	1,261,408	8.6
2,501-3,000	480	7.2	1,309,603	8.9
3,001-3,500	397	5.9	1,284,924	8.7
3,501-4,000	289	4.3	1,081,586	7.4
4,001-4,500	234	3.5	993,506	6.8
4,501-5,000	193	2.9	913,582	6.2
5,001-5,500	158	2.4	828,291	5.6
5,501-6,000	124	1.8	712,989	4.9
6,001-6,500	80	1.2	498,333	3.4
6,501-7,000	62	0.9	416,425	2.8
7,001-7,500	55	0.8	399,280	2.7
7,501-8,000	38	0.6	293,997	2.0
8,001-8,500	27	0.4	221,800	1.5
8,501-9,000	26	0.4	228,100	1.6
9,001-9,500	18	0.3	164,906	1.1
9,501-10,000	16	0.2	155,305	1.1
10,001+	67	1.0	895,735	6.1

Source: Data for this table are from the MAX 2004 file for Maine, released by CMS in 02/2008. 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.

APPENDIX TABLE A.3
CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY^{a, b}
DUAL ELIGIBLE BENEFICIARIES, MAINE, 2004

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Disabled	Adults	Children	Unknown	All	Aged	Disabled	Adults	Children	Unknown
All	51,833	26,302	21,732	3,759	27	13	567,162	280,155	246,654	39,897	321	135
Age												
5 and younger	0	0	0	0	0	0		0	0	0	0	0
6-14	2	0	2	0	0	0	24	0	24	0	0	0
15-20	115	0	89	0	26	0	1,364	0	1,055	0	309	0
21-44	11,138	0	8,918	2,219	1	0	125,693	0	101,658	24,023	12	0
45-64	14,058	0	12,723	1,329	0	6	157,795	0	143,917	13,812	0	66
65-74	10,289	10,090	0	192	0	7	114,077	112,137	0	1,871	0	69
75-84	9,519	9,501	0	18	0	0	101,689	101,510	0	179	0	0
85 and older	6,712	6,711	0	1	0	0	66,520	66,508	0	12	0	0
Unknown	0	0	0	0	0	0		0	0	0	0	0
Gender												
Female	30,653	18,616	10,371	1,643	10	13	336,018	199,801	118,350	17,612	120	135
Male	21,177	7,686	11,359	2,115	17	0	231,134	80,354	128,298	22,281	201	0
Unknown	3	0	2	1	0	0	10	0	6	4	0	0
Race												
White	48,232	24,197	20,485	3,515	26	9	528,515	258,134	232,633	37,352	309	87
African American	234	64	134	36	0	0	2,386	610	1,420	356	0	0
Other/unknown	3,367	2,041	1,113	208	1	4	36,261	21,411	12,601	2,189	12	48
Use of Nursing Facilities^c												
Entire year	3,086	2,888	198	0	0	0	31,095	28,955	2,140	0	0	0
Part year	4,512	4,138	370	4	0	0	43,278	39,279	3,951	48	0	0
None	44,235	19,276	21,164	3,755	27	13	492,789	211,921	240,563	39,849	321	135
Maintenance Assistance Status												
Cash	19,935	7,508	11,174	1,253	0	0	228,197	85,010	129,445	13,742	0	0
Medically needy	2,874	2,503	355	16	0	0	26,635	23,345	3,137	153	0	0
Poverty related	19,088	10,539	8,486	43	7	13	211,464	116,127	94,672	446	84	135
Other/unknown	9,936	5,752	1,717	2,447	20	0	100,866	55,673	19,400	25,556	237	0
Dual Status^d												
Full dual, all year	49,605	25,072	20,811	3,682	27	13	542,958	266,791	236,680	39,031	321	135
Full dual, part year	2,228	1,230	921	77	0	0	24,204	13,364	9,974	866	0	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	51,833	26,302	21,732	3,759	27	13	567,162	280,155	246,654	39,897	321	135
FFS part year, with Rx claims	0	0	0	0	0	0		0	0	0	0	0
FFS part year, no Rx claims	0	0	0	0	0	0		0	0	0	0	0
MC all year, with Rx claims	0	0	0	0	0	0		0	0	0	0	0
MC all year, no Rx claims	0	0	0	0	0	0		0	0	0	0	0

Source: Data for this table are from the MAX 2004 file for Maine, released by CMS in 02/2008. 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, MAINE, 2004

Beneficiary Characteristics	Beneficiaries and Benefit Months in Cell F of Table 1		Included in Cell G of Table 1		Excluded from Cell G of Table 1	
	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months
All	51,833	567,162	51,833	567,162	0	0
Fee-for-service (FFS) all year	51,833	567,162	51,833	567,162	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 Maine, released by CMS in 02/2008. 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.