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**STATISTICAL COMPENDIUM:  
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2005  
MARYLAND**

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CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY<sup>a, b</sup>  
DUAL ELIGIBLE BENEFICIARIES, MARYLAND, 2005

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown
<b>All</b>	<b>112,662</b>	<b>60,822</b>	<b>47,337</b>	<b>4,460</b>	<b>24</b>	<b>19</b>	<b>1,183,660</b>	<b>629,123</b>	<b>509,312</b>	<b>44,868</b>	<b>181</b>	<b>176</b>
<b>Age</b>												
5 and younger	4	0	3	0	1	0	37	0	25	0	12	0
6-14	10	0	6	0	4	0	91	0	54	0	37	0
15-20	109	0	98	0	11	0	819	0	745	0	74	0
21-44	15,895	32	14,255	1,600	8	0	168,257	375	152,263	15,561	58	0
45-64	25,953	155	22,975	2,814	0	9	276,024	1,721	245,210	28,993	0	100
65-74	27,503	21,517	5,939	37	0	10	293,013	226,290	66,381	266	0	76
75-84	26,712	23,800	2,904	8	0	0	283,453	250,753	32,664	36	0	0
85 and older	16,476	15,318	1,157	1	0	0	161,966	149,984	11,970	12	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
<b>Gender</b>												
Female	73,480	45,158	25,924	2,363	16	19	776,940	472,562	280,298	23,784	120	176
Male	39,182	15,664	21,413	2,097	8	0	406,720	156,561	229,014	21,084	61	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
<b>Race</b>												
White	54,742	29,284	23,530	1,905	10	13	573,096	298,203	255,378	19,317	78	120
African American	44,985	22,111	20,484	2,373	11	6	474,629	231,640	219,082	23,773	78	56
Other/unknown	12,935	9,427	3,323	182	3	0	135,935	99,280	34,852	1,778	25	0
<b>Use of Nursing Facilities<sup>c</sup></b>												
Entire year	14,090	12,507	1,581	1	1	0	138,595	121,652	16,919	12	12	0
Part year	6,488	5,148	1,330	10	0	0	59,546	45,953	13,476	117	0	0
None	92,084	43,167	44,426	4,449	23	19	985,519	461,518	478,917	44,739	169	176
<b>Maintenance Assistance Status</b>												
Cash	42,645	16,737	25,772	133	3	0	476,253	188,607	286,780	845	21	0
Medically needy	23,803	19,073	4,553	173	4	0	215,471	173,783	40,602	1,061	25	0
Poverty-related	979	395	498	59	8	19	9,454	4,040	4,754	421	63	176
Other/unknown	45,235	24,617	16,514	4,095	9	0	482,482	262,693	177,176	42,541	72	0
<b>Dual Medicare Status<sup>d</sup></b>												
Full dual, all year	110,738	59,801	46,459	4,435	24	19	1,163,658	618,225	500,479	44,597	181	176
Full dual, part year	1,924	1,021	878	25	0	0	20,002	10,898	8,833	271	0	0
<b>Managed Care (MC) Status</b>												
Fee-for-service (FFS) all year	108,896	60,394	44,275	4,194	14	19	1,160,986	626,460	490,836	43,381	133	176
FFS part year, with Rx claims	3,045	381	2,455	201	8	0	18,800	2,435	15,168	1,154	43	0
FFS part year, no Rx claims	721	47	607	65	2	0	3,874	228	3,308	333	5	0

Source: Data for this table are from the MAX 2005 file for Maryland, released by CMS in 1/2009. This table was produced on 04/23/2009.

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 2005. 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<sup>a, b</sup>  
DUAL ELIGIBLE BENEFICIARIES, MARYLAND, 2005

Beneficiary Characteristics	Percentage with at Least One Rx	Mean Number of Rx	Mean Rx \$	\$ per Rx	Mean \$, All Medicaid FFS \$ <sup>c</sup>	Rx \$ as a Percentage of All Medicaid FFS \$ <sup>d</sup>	Number of Beneficiaries
<b>All</b>	<b>80.9</b>	<b>41.8</b>	<b>\$2,632</b>	<b>\$63</b>	<b>\$15,744</b>	<b>16.7</b>	<b>112,662</b>
<b>Age</b>							
5 and younger	75.0	12.3	1,306	107	6,311	20.7	4
6-14	70.0	34.1	3,439	101	29,018	11.9	10
15-20	69.7	19.6	2,298	117	12,823	17.9	109
21-44	75.2	30.9	3,033	98	15,564	19.5	15,895
45-64	79.9	43.6	3,262	75	16,241	20.1	25,953
65-74	79.5	40.0	2,275	57	10,020	22.7	27,503
75-84	83.0	45.2	2,398	53	15,567	15.4	26,712
85 and older	86.9	47.4	2,230	47	24,989	8.9	16,476
Unknown	0.0	0.0	0	0	0	0.0	0
<b>Basis of Eligibility<sup>e</sup></b>							
Aged	81.2	42.0	2,165	52	15,625	13.9	60,822
Disabled	86.1	45.2	3,451	76	17,279	20.0	47,337
Adults	20.8	3.7	303	81	1,085	27.9	4,460
Children	70.8	22.2	2,636	119	15,629	16.9	24
Unknown	94.7	38.9	4,116	106	13,734	30.0	19
<b>Gender</b>							
Female	82.9	44.3	2,618	59	15,299	17.1	73,480
Male	77.1	37.1	2,658	72	16,579	16.0	39,182
Unknown	0.0	0.0	0	0	0	0.0	0
<b>Race</b>							
White	82.9	47.4	2,936	62	18,782	15.6	54,742
African American	77.8	36.5	2,359	65	13,299	17.7	44,985
Other/unknown	83.4	36.4	2,296	63	11,389	20.2	12,935
<b>Use of Nursing Facilities<sup>f</sup></b>							
Entire year	97.2	77.1	3,831	50	49,399	7.8	14,090
Part year	94.7	61.2	3,180	52	30,302	10.5	6,488
None	77.4	35.1	2,410	69	9,569	25.2	92,084
<b>Maintenance Assistance Status</b>							
Cash	87.2	45.0	3,222	72	13,434	24.0	42,645
Medically needy	90.0	61.7	3,159	51	39,244	8.1	23,803
Poverty related	59.3	12.8	909	71	3,178	28.6	979
Other/unknown	70.6	29.0	1,836	63	5,828	31.5	45,235

Source: Data for this table are from the MAX 2005 file for Maryland, released by CMS in 1/2009. This table was produced on 04/23/2009.

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 eight states (DE, IA, IL, 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 eight states (DE, IA, IL, 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<sup>a, b</sup>  
DUAL ELIGIBLE BENEFICIARIES, MARYLAND, 2005

CORE ELIGIBLE BENEFICIARIES, MAY 2010, 2009												
Beneficiary Characteristics	Number of Rx, Percentage with:									Number		
	Mean Number of Rx	Mean Rx \$	Rx \$ as a Percentage of All Medicaid FFS \$ <sup>c</sup>	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 \$ <sup>d</sup>	Beneficiaries	Benefit Months
All	4.0	\$251	16.7	19.1	16.4	10.4	25.7	21.0	7.3	\$1,499	112,662	1,183,660
Age												
5 and younger	1.3	141	20.7	25.0	50.0	25.0	0.0	0.0	0.0	682	4	37
6-14	3.7	378	11.9	30.0	10.0	20.0	10.0	30.0	0.0	3,189	10	91
15-20	2.6	306	17.9	30.3	21.1	13.8	17.4	7.3	10.1	1,707	109	819
21-44	2.9	287	19.5	24.8	24.0	11.0	22.1	13.8	4.4	1,470	15,895	168,257
45-64	4.1	307	20.1	20.1	16.6	10.0	24.5	20.9	7.8	1,527	25,953	276,024
65-74	3.8	214	22.7	20.5	17.4	11.0	25.7	19.2	6.2	941	27,503	293,013
75-84	4.3	226	15.4	17.0	14.0	10.4	27.4	23.1	8.1	1,467	26,712	283,453
85 and older	4.8	227	8.9	13.1	10.9	9.8	28.6	28.0	9.6	2,542	16,476	161,966
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Basis of Eligibility <sup>e</sup>												
Aged	4.1	209	13.9	18.8	15.0	10.5	26.4	21.8	7.6	1,511	60,822	629,123
Disabled	4.2	321	20.0	13.9	18.7	11.1	27.0	21.9	7.4	1,606	47,337	509,312
Adults	0.4	30	27.9	79.2	11.3	3.6	3.7	1.7	0.5	108	4,460	44,868
Children	2.9	350	16.9	29.2	29.2	12.5	4.2	16.7	8.3	2,072	24	181
Unknown	4.2	444	30.0	5.3	15.8	5.3	42.1	31.6	0.0	1,483	19	176
Gender												
Female	4.2	248	17.1	17.1	15.1	10.5	27.0	22.4	7.8	1,447	73,480	776,940
Male	3.6	256	16.0	22.9	18.9	10.3	23.3	18.4	6.2	1,597	39,182	406,720
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	4.5	280	15.6	17.1	14.0	9.2	25.7	24.4	9.6	1,794	54,742	573,096
African American	3.5	224	17.7	22.2	18.6	11.1	24.8	18.1	5.1	1,260	44,985	474,629
Other/unknown	3.5	218	20.2	16.6	19.0	13.4	29.3	17.1	4.6	1,084	12,935	135,935
Use of Nursing Facilities <sup>f</sup>												
Entire year	7.8	390	7.8	2.8	3.4	4.5	24.5	40.6	24.2	5,022	14,090	138,595
Part year	6.7	347	10.5	5.3	7.0	7.6	27.1	36.1	16.9	3,302	6,488	59,546
None	3.3	225	25.2	22.6	19.1	11.6	25.8	17.0	4.0	894	92,084	985,519
Maintenance Assistance Status												
Cash	4.0	289	24.0	12.8	17.6	12.0	29.9	21.7	6.0	1,203	42,645	476,253
Medically needy	6.8	349	8.1	10.0	7.0	6.2	24.2	34.1	18.5	4,335	23,803	215,471
Poverty related	1.3	94	28.6	40.7	30.7	10.7	12.1	4.8	1.0	329	979	9,454
Other/unknown	2.7	172	31.5	29.4	20.0	11.2	23.0	13.9	2.7	546	45,235	482,482

Source: Data for this table are from the MAX 2005 file for Maryland, released by CMS in 1/2009. This table was produced on 04/23/2009.

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 eight states (DE, IA, IL, 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 eight states (DE, IA, IL, 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<sup>a, b, c</sup>  
DUAL ELIGIBLE BENEFICIARIES, MARYLAND, 2005

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
<b>All</b>	<b>4.0</b>	<b>\$251</b>	<b>\$63</b>	<b>1.6</b>	<b>\$201</b>	<b>\$122</b>	<b>0.2</b>	<b>\$10</b>	<b>\$64</b>	<b>2.2</b>	<b>\$39</b>	<b>\$18</b>
<b>Age</b>												
5 and younger	1.3	141	107	0.2	20	120	0.0	0	0	1.2	122	105
6-14	3.7	378	101	2.0	331	163	0.2	3	21	1.6	44	28
15-20	2.6	306	117	1.1	259	242	0.1	2	26	1.5	44	30
21-44	2.9	287	98	1.2	234	192	0.1	12	109	1.6	40	25
45-64	4.1	307	75	1.6	244	149	0.2	13	87	2.3	50	22
65-74	3.8	214	57	1.6	173	109	0.1	8	59	2.0	33	16
75-84	4.3	226	53	1.8	183	100	0.2	9	49	2.2	34	15
85 and older	4.8	227	47	1.9	177	94	0.3	12	45	2.7	38	14
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Basis of Eligibility<sup>d</sup></b>												
Aged	4.1	209	52	1.7	168	100	0.2	9	49	2.2	33	15
Disabled	4.2	321	76	1.7	258	149	0.2	13	85	2.3	50	21
Adults	0.4	30	81	0.1	24	172	0.0	2	145	0.2	5	22
Children	2.9	350	119	0.9	268	287	0.2	27	134	1.8	55	31
Unknown	4.2	444	106	1.9	403	209	0.1	8	68	2.2	33	16
<b>Gender</b>												
Female	4.2	248	59	1.7	197	115	0.2	11	63	2.3	40	17
Male	3.6	256	72	1.5	209	139	0.1	9	66	1.9	38	19
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Race</b>												
White	4.5	280	62	1.8	221	120	0.2	13	65	2.5	46	19
African American	3.5	224	65	1.4	182	129	0.1	8	64	1.9	33	17
Other/unknown	3.5	218	63	1.6	182	112	0.1	7	59	1.7	30	17
<b>Use of Nursing Facilities<sup>e</sup></b>												
Entire year	7.8	390	50	3.0	300	101	0.5	23	46	4.4	67	15
Part year	6.7	347	52	2.5	267	107	0.4	20	50	3.8	59	16
None	3.3	225	69	1.4	183	131	0.1	8	80	1.8	34	19
<b>Maintenance Assistance Status</b>												
Cash	4.0	289	72	1.8	237	133	0.1	10	76	2.1	42	20
Medically needy	6.8	349	51	2.6	269	104	0.4	21	49	3.8	60	16
Poverty related	1.3	94	71	0.5	77	145	0.0	3	85	0.8	14	19
Other/unknown	2.7	172	63	1.1	138	125	0.1	7	82	1.5	27	18

Source: Data for this table are from the MAX 2005 file for Maryland, released by CMS in 1/2009. This table was produced on 04/23/2009.

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 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.

TABLE D.6  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, MARYLAND, 2005

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per Rx				Users <sup>e</sup>				
	Patented Brand-Name		Off-Patent Brand-Name		Patented Brand-Name		Off-Patent Brand-Name		Patented Brand-Name		Off-Patent Brand-Name		Total Number of Rx	Total Rx \$	Number	As a Percentage of Dual Benes	Number of Benefit Months
	Total	Generic	Total	Generic	Total	Generic	Total	Generic	Total	Generic	Total	Generic					
Anti-infective Agents	0.4	0.1	0.0	0.2	\$40	\$33	\$3	\$4	\$112	\$295	\$83	\$18	201,730	\$22,600,915	51,095	45.4	565,328
Biologicals	0.1	0.0	0.0	0.1	27	1	0	26	268	117	95	279	336	89,972	309	0.3	3,329
Antineoplastic Agents	0.5	0.2	0.0	0.3	105	83	0	22	207	514	202	64	18,104	3,755,759	3,442	3.1	35,733
Endocrine/Metabolic Drugs	0.9	0.3	0.1	0.5	44	34	4	6	47	98	39	13	459,003	21,376,866	43,988	39.0	484,329
Cardiovascular Agents	1.7	0.7	0.0	1.0	69	56	0	13	41	78	18	13	1,268,894	51,516,387	68,744	61.0	750,353
Respiratory Agents	0.7	0.4	0.0	0.3	39	34	1	3	57	94	63	11	267,109	15,121,829	35,481	31.5	391,935
Gastrointestinal Agents	0.8	0.5	0.0	0.3	61	58	0	4	80	127	46	12	353,812	28,478,069	42,453	37.7	463,488
Genitourinary Agents	0.5	0.3	0.0	0.2	30	27	1	3	60	78	62	20	81,603	4,916,345	14,605	13.0	161,804
CNS Drugs	1.3	0.7	0.0	0.7	116	102	1	13	86	154	73	20	723,948	62,550,161	50,310	44.7	541,032
Stimulants/Anti-obesity/Anorexia	0.6	0.4	0.0	0.3	71	62	2	7	111	170	439	26	10,055	1,117,921	1,461	1.3	15,722
Miscellaneous Psychological/Neurological Agents	0.8	0.8	0.0	0.0	123	121	0	2	152	154	102	99	63,599	9,693,397	7,496	6.7	78,897
Analgesics and Anesthetics	0.7	0.1	0.1	0.6	38	13	9	15	54	157	167	27	368,934	19,769,126	48,134	42.7	525,818
Neuromuscular Agents	1.0	0.3	0.1	0.6	69	44	4	22	68	141	51	35	320,355	21,890,021	28,976	25.7	317,969
Nutritional Products	0.6	0.0	0.0	0.5	6	0	0	6	11	29	13	11	125,916	1,417,532	20,930	18.6	225,019
Hematological Agents	0.8	0.4	0.1	0.4	77	70	2	5	93	197	18	13	201,340	18,724,960	22,590	20.1	242,689
Topical Products	0.5	0.2	0.0	0.3	25	19	1	5	50	84	51	19	232,097	11,565,427	41,796	37.1	465,596
Miscellaneous Products	0.3	0.1	0.0	0.2	57	46	3	8	166	387	279	38	11,412	1,892,591	3,138	2.8	32,978
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	5	0	0	0	15	0	0	0	3,968	58,468	1,179	1.0	12,981
<b>TOTAL NO. OF RX AND RX \$</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>4,712,215</b>	<b>296,535,746</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>

Source: Data for this table are from the MAX 2005 file for Maryland, released by CMS in 1/2009. This table was produced on 04/23/2009.

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.medispain.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 Maryland, 0.1 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).

e. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 2005.

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.

Dual Eligible Beneficiaries



TABLE D.7  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, MARYLAND, 2005

Top 10 Drug Groups	Users			Among Users			
	Total Medicaid Rx \$	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	\$42,052,605	27,833	24.7	306,744	0.8	\$172	\$137
ULCER DRUGS	23,946,985	40,221	35.7	442,004	0.6	93	54
ANTIHYPERLIPIDEMIC	22,242,716	37,645	33.4	427,464	0.6	90	52
ANTICONVULSANT	18,918,638	25,267	22.4	279,848	0.8	83	68
ANTIVIRAL	15,335,178	7,970	7.1	88,490	0.4	439	173
ANTIDIABETIC	14,924,422	38,856	34.5	431,228	0.6	54	35
ANTIDEPRESSANTS	14,841,302	40,803	36.2	445,601	0.7	50	33
ANALGESICS - Narcotic	12,528,628	53,215	47.2	583,460	0.4	52	21
ANTIASTHMATIC	11,405,694	37,136	33.0	405,782	0.4	64	28
ANTIHYPERTENSIVE	11,242,618	51,759	45.9	574,631	0.6	35	20
Total	187,438,786	360,705		3,985,252	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for Maryland, released by CMS in 1/2009. This table was produced on 04/23/2009.

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 2005. 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 2005. 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.

Dual Eligible Beneficiaries

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<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, MARYLAND, 2005

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 Rx \$ per Month	Mean Benefit \$ per Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Rx \$ per Month	Mean Benefit \$ per Month
<b>All</b>	<b>2,328,160</b>	<b>\$187,438,786</b>	<b>27,833</b>	<b>24.7</b>	<b>306,744</b>	<b>0.8</b>	<b>\$137</b>	<b>40,221</b>	<b>35.7</b>	<b>442,004</b>	<b>0.6</b>	<b>\$54</b>
<b>Female</b>												
All Females	1,562,920	116,170,737	16,227	22.1	177,901	0.7	116	28,742	39.1	317,113	0.6	55
<b>Female, Disabled</b>												
All Ages	670,016	60,762,085	8,401	32.4	95,967	0.8	141	10,700	41.3	121,539	0.6	58
5 and younger	4	271	0	0.0	0	0.0	0	1	50.0	11	0.1	23
6-14	2	15	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	177	24,131	2	4.7	24	0.7	167	8	18.6	93	0.2	15
21-44	126,526	14,802,395	2,783	44.4	31,937	0.7	144	1,751	27.9	19,893	0.5	49
45-64	353,652	31,912,654	4,257	34.2	48,821	0.8	144	5,486	44.0	61,940	0.6	57
65-74	114,907	8,707,660	727	18.6	8,255	0.8	140	1,975	50.5	22,803	0.6	65
75-84	54,038	3,874,651	387	17.2	4,337	0.7	100	1,089	48.5	12,529	0.6	63
85 and older	20,710	1,440,308	245	24.6	2,593	0.8	107	390	39.1	4,270	0.7	69
<b>Female, Other Eligibles</b>												
All Ages	892,904	55,408,652	7,826	16.5	81,934	0.7	86	18,042	37.9	195,574	0.6	52
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	25	127	0	0.0	0	0.0	0	1	33.3	12	0.9	5
15-20	1	7	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	3,243	316,452	92	10.2	1,018	0.4	74	56	6.2	536	0.3	37
45-64	4,668	369,246	73	4.7	802	0.4	76	104	6.7	1,174	0.3	37
65-74	275,077	18,379,668	1,579	10.8	17,409	0.7	99	5,291	36.1	59,563	0.5	51
75-84	363,564	22,720,963	2,957	16.7	31,299	0.7	91	6,989	39.5	77,000	0.6	54
85 and older	246,326	13,622,189	3,125	24.5	31,406	0.7	75	5,601	44.0	57,289	0.7	52
<b>Male</b>												
All Males	765,240	71,268,049	11,606	29.6	128,843	0.9	167	11,479	29.3	124,891	0.6	53
<b>Male, Disabled</b>												
All Ages	490,195	53,826,598	8,800	41.1	100,688	0.9	186	6,042	28.2	67,804	0.6	56
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	28	1,746	0	0.0	0	0.0	0	3	60.0	36	0.5	31
15-20	438	48,450	6	10.9	43	1.4	193	11	20.0	117	0.5	51
21-44	154,887	20,541,604	3,881	48.6	44,622	0.9	192	1,622	20.3	18,243	0.6	53
45-64	267,597	28,311,902	4,391	41.8	50,094	1.0	188	3,258	31.0	36,419	0.6	55
65-74	50,161	3,743,919	388	19.1	4,429	0.9	149	810	40.0	9,164	0.6	61
75-84	14,459	1,020,418	107	16.2	1,224	0.7	99	279	42.3	3,239	0.6	62
85 and older	2,625	158,559	27	16.9	276	0.7	68	59	36.9	586	0.7	73

Dual Eligible Beneficiaries

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<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, MARYLAND, 2005

All Top 10 Drug Groups					ANTIPSYCHOTICS				ULCER DRUGS			
Beneficiary Characteristics	Number of Rx	Rx \$	Number of Users	Users as % of Dual Benes	Number of	Mean	Mean	Number of Users	Users as % of Dual Benes	Number of	Mean	Mean
					Benefit Months Among Users	Benefit per Rx	\$ per Benefit Month			Benefit Months Among Users	Benefit per Rx	
Male, Other Eligibles												
All Ages	275,045	17,441,451	2,806	15.8	28,155	0.7	96	5,437	30.6	57,087	0.6	50
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	22	2,057	2	50.0	22	0.2	10	0	0.0	0	0.0	0
21-44	1,297	223,673	51	6.9	574	0.4	68	17	2.3	164	0.3	35
45-64	3,176	350,243	60	4.2	675	0.5	100	55	3.9	615	0.3	23
65-74	109,502	7,298,265	870	12.6	9,142	0.8	114	1,947	28.2	21,185	0.5	50
75-84	115,793	7,079,995	1,159	18.9	11,414	0.7	90	2,307	37.7	24,419	0.6	51
85 and older	45,255	2,487,218	664	25.8	6,328	0.7	81	1,111	43.1	10,704	0.6	50
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 2005 file for Maryland, released by CMS in 1/2009. This table was produced on 04/23/2009.

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 2005. 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 2005. 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.

Dual Eligible Beneficiaries

TABLE D.7B  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR THIRD TO FIFTH TOP DRUG GROUPS  
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, MARYLAND, 2005

Beneficiary Characteristics	ANTIHYPERTENSIVE					ANTICONVULSANT					ANTIVIRAL				
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month
<b>All</b>	<b>37,645</b>	<b>33.4</b>	<b>427,464</b>	<b>0.6</b>	<b>\$52</b>	<b>25,267</b>	<b>22.4</b>	<b>279,848</b>	<b>0.8</b>	<b>\$68</b>	<b>7,970</b>	<b>7.1</b>	<b>88,490</b>	<b>0.4</b>	<b>\$173</b>
<b>Female</b>															
All Females	26,611	36.2	302,846	0.6	52	15,426	21.0	170,776	0.8	62	4,363	5.9	48,520	0.3	116
<b>Female, Disabled</b>															
All Ages	9,686	37.4	111,231	0.6	53	8,737	33.7	99,047	0.8	77	1,991	7.7	22,601	0.5	220
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	1	2.3	12	0.1	3	4	9.3	33	0.2	12	7	16.3	83	0.3	159
21-44	863	13.8	9,788	0.5	45	2,611	41.7	29,550	0.8	96	738	11.8	8,254	0.5	244
45-64	4,933	39.6	56,227	0.5	50	4,741	38.1	53,677	0.8	74	1,034	8.3	11,821	0.5	239
65-74	2,355	60.2	27,385	0.6	58	913	23.3	10,439	0.8	61	152	3.9	1,772	0.2	52
75-84	1,231	54.8	14,362	0.6	58	353	15.7	4,047	0.7	39	41	1.8	463	0.2	62
85 and older	303	30.4	3,457	0.7	63	115	11.5	1,301	0.8	44	19	1.9	208	0.2	13
<b>Female, Other Eligibles</b>															
All Ages	16,925	35.6	191,615	0.6	51	6,689	14.1	71,729	0.7	40	2,372	5.0	25,919	0.2	25
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	20	2.2	206	0.3	31	112	12.5	1,118	0.5	51	43	4.8	454	0.3	123
45-64	124	7.9	1,374	0.3	31	94	6.0	1,067	0.5	35	10	0.6	120	0.3	153
65-74	6,739	46.0	77,012	0.5	50	2,072	14.1	22,967	0.7	42	428	2.9	4,898	0.2	80
75-84	7,349	41.6	83,765	0.6	52	2,641	14.9	28,599	0.7	41	833	4.7	9,286	0.1	10
85 and older	2,693	21.1	29,258	0.6	52	1,770	13.9	17,978	0.8	35	1,058	8.3	11,161	0.1	7
<b>Male</b>															
All Males	11,034	28.2	124,618	0.6	53	9,841	25.1	109,072	0.9	77	3,607	9.2	39,970	0.5	243
<b>Male, Disabled</b>															
All Ages	5,873	27.4	67,325	0.6	54	7,286	34.0	82,627	0.9	88	2,762	12.9	30,876	0.6	293
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	3.6	15	0.4	50	3	5.5	19	2.7	397	12	21.8	144	0.2	105
21-44	1,259	15.8	14,471	0.6	50	2,850	35.7	32,428	0.9	101	1,128	14.1	12,665	0.6	291
45-64	3,305	31.4	37,762	0.6	53	3,792	36.1	42,872	0.9	82	1,522	14.5	16,980	0.6	305
65-74	968	47.8	11,117	0.6	56	503	24.8	5,767	0.9	59	83	4.1	913	0.4	165
75-84	303	46.0	3,556	0.7	61	115	17.5	1,291	0.7	49	13	2.0	126	0.3	64
85 and older	36	22.5	404	0.7	67	23	14.4	250	0.6	32	4	2.5	48	0.1	9

Dual Eligible Beneficiaries

TABLE D.7B  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR THIRD TO FIFTH TOP DRUG GROUPS  
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, MARYLAND, 2005

Beneficiary Characteristics	ANTIHYPERTENSIVE					ANTICONVULSANT					ANTIVIRAL				
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month
<b>Male, Other Eligibles</b>															
All Ages	5,161	29.0	57,293	0.6	51	2,555	14.4	26,445	0.8	44	845	4.8	9,094	0.2	74
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	50.0	17	0.2	36	0	0.0	0	0.0	0
21-44	19	2.6	198	0.4	32	44	5.9	472	0.3	27	60	8.1	592	0.4	200
45-64	71	5.0	797	0.4	33	78	5.5	878	0.5	46	46	3.3	514	0.4	196
65-74	2,445	35.4	27,430	0.5	50	1,014	14.7	10,751	0.8	48	255	3.7	2,844	0.3	126
75-84	2,130	34.8	23,612	0.6	54	1,049	17.1	10,724	0.8	45	283	4.6	3,075	0.2	27
85 and older	496	19.2	5,256	0.6	52	368	14.3	3,603	0.7	33	201	7.8	2,069	0.1	8
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2005 file for Maryland, released by CMS in 1/2009. This table was produced on 04/23/2009.

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 2005. 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 2005. 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 benefit; \$ = Medicaid reimbursement.

Dual Eligible Beneficiaries

TABLE D.7C  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR SIXTH TO EIGHTH TOP DRUG GROUPS  
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, MARYLAND, 2005

Beneficiary Characteristics	ANTIDIABETIC					ANTIDEPRESSANTS					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
<b>All</b>	<b>38,856</b>	<b>34.5</b>	<b>431,228</b>	<b>0.6</b>	<b>\$35</b>	<b>40,803</b>	<b>36.2</b>	<b>445,601</b>	<b>0.7</b>	<b>\$33</b>	<b>53,215</b>	<b>47.2</b>	<b>583,460</b>	<b>0.4</b>	<b>\$22</b>
<b>Female</b>															
All Females	27,580	37.5	307,836	0.6	34	28,963	39.4	316,488	0.7	33	38,090	51.8	419,490	0.4	21
<b>Female, Disabled</b>															
All Ages	10,064	38.8	114,179	0.6	39	13,084	50.5	148,630	0.6	36	17,371	67.0	196,731	0.4	28
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	4.7	24	0.5	46	4	9.3	40	0.6	53	17	39.5	188	0.1	1
21-44	1,013	16.2	11,474	0.6	38	3,233	51.6	36,577	0.6	36	3,882	62.0	43,584	0.4	33
45-64	5,406	43.4	60,630	0.6	39	7,198	57.8	81,907	0.6	36	9,373	75.2	105,817	0.4	31
65-74	2,413	61.7	27,918	0.7	42	1,527	39.0	17,577	0.7	34	2,595	66.3	29,916	0.3	17
75-84	964	42.9	11,163	0.6	34	745	33.2	8,427	0.7	34	1,169	52.1	13,482	0.3	12
85 and older	266	26.7	2,970	0.6	34	377	37.8	4,102	0.8	34	335	33.6	3,744	0.3	16
<b>Female, Other Eligibles</b>															
All Ages	17,516	36.8	193,657	0.6	32	15,879	33.4	167,858	0.7	31	20,719	43.6	222,759	0.4	14
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	3	100.0	34	0.1	1
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	34	3.8	311	0.5	38	136	15.1	1,381	0.4	21	221	24.6	2,145	0.4	21
45-64	140	9.0	1,551	0.4	26	144	9.2	1,552	0.4	19	237	15.2	2,552	0.3	16
65-74	6,966	47.5	78,511	0.6	33	3,966	27.1	44,135	0.6	29	6,675	45.5	75,011	0.3	13
75-84	7,179	40.6	79,934	0.7	32	6,060	34.3	64,921	0.7	32	7,933	44.9	87,185	0.4	14
85 and older	3,197	25.1	33,350	0.7	29	5,573	43.7	55,869	0.8	33	5,650	44.3	55,832	0.5	18
<b>Male</b>															
All Males	11,276	28.8	123,392	0.6	35	11,840	30.2	129,113	0.7	33	15,125	38.6	163,970	0.4	24
<b>Male, Disabled</b>															
All Ages	5,679	26.5	63,660	0.6	39	7,494	35.0	85,027	0.7	34	9,472	44.2	105,605	0.4	29
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	20.0	12	0.1	1
15-20	1	1.8	12	1.2	194	6	10.9	52	0.5	14	14	25.5	139	0.2	2
21-44	1,135	14.2	12,754	0.6	38	2,716	34.0	30,950	0.7	37	3,058	38.3	34,163	0.4	32
45-64	3,316	31.5	36,974	0.7	39	4,002	38.1	45,315	0.7	33	5,198	49.4	57,834	0.5	30
65-74	922	45.5	10,440	0.7	40	552	27.2	6,249	0.7	36	903	44.5	10,057	0.4	19
75-84	259	39.3	3,003	0.7	39	173	26.3	1,976	0.6	29	259	39.3	2,989	0.3	11
85 and older	46	28.8	477	0.6	31	45	28.1	485	0.7	26	39	24.4	411	0.3	6

Dual Eligible Beneficiaries

TABLE D.7C  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR SIXTH TO EIGHTH TOP DRUG GROUPS  
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, MARYLAND, 2005

Beneficiary Characteristics	ANTIDIABETIC					ANTIDEPRESSANTS					ANALGESICS - Narcotic				
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month
<b>Male, Other Eligibles</b>															
All Ages	5,597	31.5	59,732	0.6	31	4,346	24.5	44,086	0.7	32	5,653	31.8	58,365	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	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	1	25.0	11	0.1	3	1	25.0	6	0.2	3
21-44	26	3.5	261	0.4	21	51	6.9	522	0.2	13	58	7.8	532	0.3	43
45-64	64	4.5	711	0.4	20	73	5.2	806	0.4	19	128	9.0	1,341	0.4	32
65-74	2,563	37.1	28,062	0.6	30	1,439	20.8	15,176	0.6	31	2,427	35.1	26,042	0.4	16
75-84	2,246	36.7	23,796	0.7	32	1,812	29.6	18,340	0.7	33	2,077	33.9	21,468	0.4	13
85 and older	698	27.1	6,902	0.7	32	970	37.6	9,231	0.7	33	962	37.3	8,976	0.4	13
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2005 file for Maryland, released by CMS in 1/2009. This table was produced on 04/23/2009.

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 2005. 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 2005. 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 benefit; \$ = Medicaid reimbursement.

Dual Eligible Beneficiaries

TABLE D.7D  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR NINTH AND TENTH TOP DRUG GROUPS  
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, MARYLAND, 2005

Beneficiary Characteristics	ANTIASTHMATIC					ANTIHYPERTENSIVE					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		
<b>All</b>	<b>37,136</b>	<b>33.0</b>	<b>405,782</b>	<b>0.4</b>	<b>\$28</b>	<b>51,759</b>	<b>45.9</b>	<b>574,631</b>	<b>0.6</b>	<b>\$20</b>	<b>112,662</b>	<b>1,183,660</b>
<b>Female</b>												
All Females	26,853	36.5	295,038	0.4	28	36,291	49.4	404,334	0.6	21	73,480	776,940
<b>Female, Disabled</b>												
All Ages	11,102	42.8	125,317	0.4	30	11,889	45.9	134,491	0.5	20	25,924	280,298
5 and younger	0	0.0	0	0.0	0	1	50.0	11	0.3	2	2	13
6-14	1	100.0	12	0.2	1	0	0.0	0	0.0	0	1	12
15-20	7	16.3	51	0.2	9	13	30.2	143	0.3	8	43	306
21-44	1,917	30.6	21,235	0.3	25	1,155	18.4	12,828	0.5	16	6,266	66,625
45-64	6,052	48.6	68,440	0.4	30	5,830	46.8	65,044	0.5	18	12,458	133,791
65-74	1,877	48.0	21,594	0.5	34	2,789	71.3	32,354	0.6	23	3,912	43,929
75-84	889	39.6	10,059	0.5	34	1,513	67.4	17,594	0.6	26	2,245	25,228
85 and older	359	36.0	3,926	0.4	35	588	59.0	6,517	0.7	24	997	10,394
<b>Female, Other Eligibles</b>												
All Ages	15,751	33.1	169,721	0.4	27	24,402	51.3	269,843	0.6	21	47,556	496,642
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
6-14	0	0.0	0	0.0	0	1	33.3	12	0.9	5	3	35
15-20	1	14.3	1	1.0	7	0	0.0	0	0.0	0	7	39
21-44	59	6.6	610	0.3	20	37	4.1	345	0.4	10	898	8,672
45-64	105	6.7	1,201	0.3	27	166	10.6	1,817	0.4	14	1,563	16,286
65-74	5,018	34.2	56,276	0.4	31	8,219	56.1	92,511	0.5	20	14,658	156,804
75-84	5,947	33.6	64,727	0.5	28	10,178	57.6	114,013	0.6	22	17,685	188,777
85 and older	4,621	36.3	46,906	0.4	21	5,801	45.5	61,145	0.7	20	12,742	126,029
<b>Male</b>												
All Males	10,283	26.2	110,744	0.5	28	15,468	39.5	170,297	0.6	17	39,182	406,720
<b>Male, Disabled</b>												
All Ages	4,953	23.1	55,396	0.4	29	7,675	35.8	85,770	0.6	17	21,413	229,014
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12
6-14	0	0.0	0	0.0	0	2	40.0	24	0.4	26	5	42
15-20	4	7.3	45	0.4	20	22	40.0	242	0.6	27	55	439
21-44	1,166	14.6	13,084	0.4	24	1,583	19.8	17,724	0.6	15	7,989	85,638
45-64	2,634	25.0	29,463	0.4	28	4,338	41.2	48,117	0.6	16	10,517	111,419
65-74	830	40.9	9,186	0.5	35	1,233	60.8	13,977	0.6	19	2,027	22,452
75-84	271	41.1	3,113	0.5	32	405	61.5	4,677	0.6	22	659	7,436
85 and older	48	30.0	505	0.4	23	92	57.5	1,009	0.6	20	160	1,576

Dual Eligible Beneficiaries



TABLE D.7D  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR NINTH AND TENTH TOP DRUG GROUPS  
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, MARYLAND, 2005

Beneficiary Characteristics	ANTIASTHMATIC					ANTIHYPERTENSIVE					Number of Beneficiaries	Number of Benefit Months
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month		
<b>Male, Other Eligibles</b>												
All Ages	5,330	30.0	55,348	0.5	28	7,793	43.9	84,527	0.6	17	17,769	177,706
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	2
15-20	0	0.0	0	0.0	0	1	25.0	12	1.0	98	4	35
21-44	19	2.6	168	0.2	10	46	6.2	464	0.3	9	742	7,322
45-64	63	4.5	737	0.3	26	99	7.0	1,074	0.3	9	1,415	14,528
65-74	1,985	28.7	21,174	0.5	29	3,378	48.9	37,112	0.5	17	6,906	69,828
75-84	2,132	34.8	22,228	0.5	30	3,162	51.6	34,504	0.6	19	6,123	62,012
85 and older	1,131	43.9	11,041	0.5	20	1,107	43.0	11,361	0.6	16	2,577	23,967
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0

Source: Data for this table are from the MAX 2005 file for Maryland, released by CMS in 1/2009. This table was produced on 04/23/2009.

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 2005. 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 2005. 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.

Dual Eligible Beneficiaries

TABLE D.8  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,  
 BY BENEFICIARY CHARACTERISTIC<sup>a, b</sup>  
 DUAL ELIGIBLE BENEFICIARIES, MARYLAND, 2005

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
<b>All</b>	<b>\$390</b>	<b>7.8</b>	<b>14,090</b>	<b>138,595</b>
<b>Age</b>				
0-64	595	9.3	1,221	13,071
65-74	482	9.2	1,876	19,359
75-84	400	8.2	4,642	45,608
85 and older	308	6.9	6,351	60,557
Unknown	0	0.0	0	0
<b>Gender</b>				
Female	373	7.8	10,234	101,133
Male	435	8.0	3,856	37,462
Unknown	0	0.0	0	0
<b>Race</b>				
White	380	8	8,449	82,001
African American	417	7.7	4,228	43,370
Other/unknown	357	7.3	1,413	13,224
<b>Basis of Eligibility<sup>c</sup></b>				
Aged	366	7.7	12,507	121,652
Disabled	560	9.2	1,581	16,919
Adults	342	4.8	1	12
Children	784	10.8	1	12
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 2005 file for Maryland, released by CMS in 1/2009. This table was produced on 04/23/2009.

a. Table D.8 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their 2005 Medicaid enrollment. A total of 6,488 beneficiaries who were in nursing facilities for part of their enrollment and their 59,546 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.

Dual Eligible Beneficiaries

TABLE D.9  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,  
 BY BRAND STATUS AND THERAPEUTIC CATEGORY<sup>a, b, c, d, e</sup>  
 DUAL ELIGIBLE BENEFICIARIES, MARYLAND, 2005

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per 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	Total Number of Rx	Total Rx \$	Number of Users	As a Percentage of Dual All-Year Nursing Facility Residents	Number of Benefit Months
Anti-infective Agents	0.4	0.1	0.0	0.2	\$28	\$20	\$4	\$4	\$65	\$137	\$87	\$17	43,127	\$2,800,313	9,546	67.8	99,412
Biologicals	0.1	0.0	0.0	0.1	3	0	0	3	32	143	95	30	227	7,374	217	1.5	2,330
Antineoplastic Agents	0.6	0.1	0.0	0.4	105	68	0	37	184	484	275	86	4,143	763,193	773	5.5	7,292
Endocrine/Metabolic Drugs	1.3	0.4	0.2	0.7	46	32	7	7	36	80	33	11	90,809	3,262,688	6,898	49.0	70,598
Cardiovascular Agents	2.3	0.7	0.0	1.6	62	44	0	18	27	63	10	11	249,570	6,745,775	10,901	77.4	109,520
Respiratory Agents	0.9	0.3	0.0	0.5	34	29	1	4	39	85	48	8	53,151	2,094,322	6,048	42.9	62,486
Gastrointestinal Agents	1.1	0.6	0.0	0.5	59	52	0	6	53	91	41	12	98,950	5,250,457	8,784	62.3	89,708
Genitourinary Agents	0.6	0.3	0.0	0.2	30	25	1	5	53	73	70	21	20,697	1,100,878	3,449	24.5	36,182
CNS Drugs	1.7	0.9	0.0	0.7	114	99	3	13	69	108	65	18	172,757	11,875,607	10,271	72.9	103,856
Stimulants/Anti-obesity/Anorexia	0.9	0.2	0.0	0.7	39	32	0	7	43	138	36	11	2,239	96,993	236	1.7	2,478
Miscellaneous Psychological/Neurological Agents	1.0	1.0	0.0	0.0	139	139	0	0	134	134	0	47	30,190	4,035,153	2,886	20.5	29,112
Analgesics and Anesthetics	1.0	0.1	0.2	0.8	40	9	19	13	39	96	108	17	70,737	2,793,701	6,999	49.7	69,138
Neuromuscular Agents	1.4	0.4	0.1	0.8	72	38	5	30	53	97	37	36	72,711	3,885,260	5,141	36.5	53,620
Nutritional Products	0.7	0.0	0.0	0.7	8	0	0	7	11	17	11	10	40,346	426,422	5,359	38.0	54,284
Hematological Agents	1.3	0.5	0.3	0.5	113	105	4	5	86	204	13	10	72,503	6,244,755	5,443	38.6	55,021
Topical Products	0.6	0.3	0.0	0.3	26	19	2	6	40	69	46	16	59,739	2,395,576	8,826	62.6	92,935
Miscellaneous Products	0.3	0.1	0.0	0.2	14	9	0	5	47	167	102	21	4,105	194,736	1,343	9.5	13,810
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	3	0	0	0	15	0	0	0	694	10,084	347	2.5	3,603
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.	1,086,695	53,983,287	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for Maryland, released by CMS in 1/2009. This table was produced on 04/23/2009.

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 2005. A total of 6,488 beneficiaries who were in nursing facilities for part of their enrollment and their 59,546 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 2005. 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.medispn.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.medispn.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

In Maryland, 0.1 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<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, MARYLAND, 2005

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 per	Number of Rx per Benefit Month	\$ per Rx	Rx \$ per Benefit Month
ANTIPSYCHOTICS	\$7,169,033	6,455	45.8	66,929	0.8	\$131	\$107
ULCER DRUGS	4,439,721	8,020	56.9	82,134	0.8	70	54
ANTIDEPRESSANTS	4,142,715	9,910	70.3	101,878	0.9	48	41
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	4,035,153	3,463	24.6	34,958	0.9	134	115
HEMATOPOIETIC AGENTS	3,523,275	3,047	21.6	31,180	0.8	147	113
ANTICONVULSANT	3,119,550	4,895	34.7	51,729	1.0	58	60
ANTIDIABETIC	2,438,512	6,374	45.2	66,617	0.9	41	37
ANTIHYPERTENSIVE	2,241,234	3,541	25.1	37,207	0.8	79	60
ANALGESICS - Narcotic	2,093,136	7,268	51.6	71,339	0.8	39	29
MISC. HEMATOLOGICAL	1,798,260	2,075	14.7	21,241	0.8	103	85
Total	35,000,589	55,048		565,212	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for Maryland, released by CMS in 1/2009. This table was produced on 04/23/2009.

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 2005. A total of 6,488 beneficiaries who were in nursing facilities for part of their enrollment and their 59,546 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 2005. 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 2005 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.

Dual Eligible Beneficiaries

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<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, MARYLAND, 2005

All Top 10 Drug Groups				ANTIPSYCHOTICS				ULCER DRUGS				
Beneficiary Characteristics	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 \$
<b>All</b>	<b>472,681</b>	<b>\$35,000,589</b>	<b>6,455</b>	<b>45.8</b>	<b>66,929</b>	<b>0.8</b>	<b>\$107</b>	<b>8,020</b>	<b>56.9</b>	<b>82,134</b>	<b>0.8</b>	<b>\$54</b>
<b>Female</b>												
All Females	338,158	24,667,372	4,523	44.2	47,212	0.8	103	5,812	56.8	59,773	0.8	54
<b>Female, Disabled</b>												
All Ages	36,192	2,988,444	372	49.4	4,169	1.0	150	500	66.4	5,407	0.8	54
64 or younger	27,884	2,328,064	281	50.3	3,185	1.0	143	377	67.4	4,061	0.8	51
65-74	6,753	535,022	69	47.6	764	1.1	168	91	62.8	1,016	0.8	66
75-84	1,238	106,773	19	54.3	198	0.9	184	24	68.6	260	0.8	59
85 and older	317	18,585	3	21.4	22	1.3	194	8	57.1	70	1.1	44
<b>Female, Other Eligibles</b>												
All Ages	301,966	21,678,928	4,151	43.8	43,043	0.8	99	5,312	56.0	54,366	0.8	54
64 or younger	205	12,015	0	0.0	0	0.0	0	1	25.0	12	1.0	46
65-74	42,018	3,127,388	534	60.4	5,738	0.8	119	610	69.0	6,397	0.8	52
75-84	119,652	8,779,184	1,562	48.1	16,401	0.8	111	1,854	57.1	19,183	0.8	56
85 and older	140,091	9,760,341	2,055	38.5	20,904	0.7	84	2,847	53.3	28,774	0.8	54
<b>Male</b>												
All Males	134,523	10,333,217	1,932	50.1	19,717	0.8	116	2,208	57.3	22,361	0.8	54
<b>Male, Disabled</b>												
All Ages	38,185	3,067,276	489	59.1	5,215	1.0	156	498	60.1	5,297	0.8	56
64 or younger	31,118	2,558,772	399	60.8	4,231	1.0	158	404	61.6	4,279	0.8	54
65-74	6,458	467,820	81	52.6	885	1.1	158	84	54.5	902	0.8	60
75-84	547	36,073	7	43.8	84	0.6	33	10	62.5	116	0.9	72
85 and older	62	4,611	2	100.0	15	0.7	56	0	0.0	0	0.0	0
<b>Male, Other Eligibles</b>												
All Ages	96,338	7,265,941	1,443	47.7	14,502	0.8	102	1,710	56.5	17,064	0.8	53
64 or younger	27	2,689	1	50.0	5	0.2	22	0	0.0	0	0.0	0
65-74	28,161	2,145,501	384	55.4	4,073	0.8	118	423	61.0	4,550	0.8	53
75-84	43,548	3,155,376	644	48.0	6,383	0.8	102	758	56.5	7,591	0.8	54
85 and older	24,602	1,962,375	414	41.8	4,041	0.7	87	529	53.4	4,923	0.8	52
<b>Unknown</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>

Source: Data for this table are from the MAX 2005 file for Maryland, released by CMS in 1/2009. This table was produced on 04/23/2009.

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 2005. A total of 6,488 beneficiaries who were in nursing facilities for part of their enrollment and their 59,546 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 2005. 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 2005 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<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, MARYLAND, 2005

Beneficiary Characteristics	ANTIDEPRESSANTS					MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL					HEMATOPOIETIC AGENTS				
	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 \$
<b>All</b>	<b>9,910</b>	<b>70.3</b>	<b>101,878</b>	<b>0.9</b>	<b>\$41</b>	<b>3,463</b>	<b>24.6</b>	<b>34,958</b>	<b>0.9</b>	<b>\$115</b>	<b>3,047</b>	<b>21.6</b>	<b>31,180</b>	<b>0.8</b>	<b>\$113</b>
<b>Female</b>															
All Females	7,343	71.8	75,660	0.9	40	2,595	25.4	26,396	0.9	116	2,107	20.6	21,656	0.8	110
<b>Female, Disabled</b>															
All Ages	585	77.7	6,429	0.9	47	84	11.2	938	0.9	449	145	19.3	1,517	0.7	111
64 or younger	462	82.6	5,155	0.9	47	63	11.3	698	0.9	547	119	21.3	1,243	0.7	104
65-74	97	66.9	1,049	0.9	49	18	12.4	211	0.9	167	15	10.3	175	1.0	139
75-84	21	60.0	193	1.0	59	2	5.7	24	1.0	143	7	20.0	83	0.9	175
85 and older	5	35.7	32	0.8	21	1	7.1	5	1.6	116	4	28.6	16	0.6	79
<b>Female, Other Eligibles</b>															
All Ages	6,758	71.3	69,231	0.8	40	2,511	26.5	25,458	0.9	104	1,962	20.7	20,139	0.8	110
64 or younger	2	50.0	24	0.6	3	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	739	83.6	7,882	0.9	43	188	21.3	1,992	0.9	103	201	22.7	2,065	0.8	148
75-84	2,498	76.9	25,860	0.9	41	1,007	31.0	10,194	0.9	105	676	20.8	6,981	0.8	120
85 and older	3,519	65.8	35,465	0.8	38	1,316	24.6	13,272	0.9	103	1,085	20.3	11,093	0.7	98
<b>Male</b>															
All Males	2,567	66.6	26,218	0.8	42	868	22.5	8,562	0.9	114	940	24.4	9,524	0.8	119
<b>Male, Disabled</b>															
All Ages	595	71.9	6,529	0.9	49	74	8.9	798	0.9	280	179	21.6	1,830	0.8	71
64 or younger	481	73.3	5,286	0.9	49	55	8.4	620	1.0	331	144	22.0	1,492	0.8	80
65-74	102	66.2	1,100	0.9	47	17	11.0	172	0.8	100	29	18.8	279	0.8	33
75-84	12	75.0	143	0.8	42	0	0.0	0	0.0	0	5	31.3	56	0.9	29
85 and older	0	0.0	0	0.0	0	2	100.0	6	1.7	129	1	50.0	3	0.7	176
<b>Male, Other Eligibles</b>															
All Ages	1,972	65.1	19,689	0.8	40	794	26.2	7,764	0.8	97	761	25.1	7,694	0.8	130
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	493	71.1	5,213	0.8	41	151	21.8	1,611	0.8	93	195	28.1	2,069	0.8	126
75-84	886	66.0	8,898	0.8	41	354	26.4	3,406	0.9	98	316	23.5	3,179	0.8	97
85 and older	593	59.8	5,578	0.8	37	289	29.2	2,747	0.8	98	250	25.2	2,446	0.9	176
<b>Unknown</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>

Source: Data for this table are from the MAX 2005 file for Maryland, released by CMS in 1/2009. This table was produced on 04/23/2009.

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 2005. A total of 6,488 beneficiaries who were in nursing facilities for part of their enrollment and their 59,546 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 2005. 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 2005 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<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, MARYLAND, 2005

Beneficiary Characteristics	ANTICONVULSANT						ANTIDIABETIC					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	4,895	34.7	51,729	1.0	\$60	6,374	45.2	66,617	0.9	\$37	3,541	25.1	37,207	0.8	\$60	
Female																
All Females	3,174	31.0	33,571	1.0	56	4,513	44.1	47,445	0.9	36	2,499	24.4	26,265	0.8	60	
Female, Disabled																
All Ages	530	70.4	5,979	1.2	82	446	59.2	4,943	0.9	42	253	33.6	2,863	0.8	60	
64 or younger	415	74.2	4,724	1.2	81	315	56.4	3,473	0.9	42	185	33.1	2,115	0.8	62	
65-74	95	65.5	1,070	1.2	94	104	71.7	1,180	0.9	47	53	36.6	605	0.7	54	
75-84	17	48.6	164	1.1	41	20	57.1	233	0.8	35	11	31.4	114	0.6	42	
85 and older	3	21.4	21	0.7	28	7	50.0	57	1.0	27	4	28.6	29	0.9	75	
Female, Other Eligibles																
All Ages	2,644	27.9	27,592	1.0	51	4,067	42.9	42,502	0.9	36	2,246	23.7	23,402	0.8	61	
64 or younger	5	125.0	60	1.5	56	0	0.0	0	0.0	0	2	50.0	24	0.9	62	
65-74	468	52.9	5,033	1.1	64	680	76.9	7,348	0.9	40	390	44.1	4,183	0.8	63	
75-84	1,112	34.2	11,704	1.0	54	1,816	55.9	19,058	0.9	36	992	30.5	10,343	0.8	62	
85 and older	1,059	19.8	10,795	0.9	41	1,571	29.4	16,096	0.9	33	862	16.1	8,852	0.7	58	
Male																
All Males	1,721	44.6	18,158	1.1	68	1,861	48.3	19,172	0.9	37	1,042	27.0	10,942	0.8	60	
Male, Disabled																
All Ages	641	77.4	7,127	1.2	89	423	51.1	4,552	1.0	41	263	31.8	2,948	0.7	60	
64 or younger	526	80.2	5,842	1.2	91	323	49.2	3,484	0.9	42	211	32.2	2,376	0.7	60	
65-74	108	70.1	1,211	1.3	75	90	58.4	979	1.0	37	50	32.5	557	0.7	58	
75-84	6	37.5	71	1.6	161	6	37.5	68	1.2	40	0	0.0	0	0.0	0	
85 and older	1	50.0	3	1.7	246	4	200.0	21	1.0	34	2	100.0	15	0.9	67	
Male, Other Eligibles																
All Ages	1,080	35.7	11,031	1.0	55	1,438	47.5	14,620	0.9	36	779	25.7	7,994	0.8	60	
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	50.0	12	1.1	81	
65-74	375	54.1	3,888	1.0	61	432	62.3	4,719	0.9	38	242	34.9	2,674	0.8	62	
75-84	487	36.3	5,038	1.0	56	686	51.1	6,799	0.9	36	389	29.0	3,881	0.8	60	
85 and older	218	22.0	2,105	0.9	40	320	32.3	3,102	0.9	33	147	14.8	1,427	0.8	56	
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 2005 file for Maryland, released by CMS in 1/2009. This table was produced on 04/23/2009.

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 2005. A total of 6,488 beneficiaries who were in nursing facilities for part of their enrollment and their 59,546 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 2005. 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 2005 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.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<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, MARYLAND, 2005

Beneficiary Characteristics	ANALGESICS - Narcotic						MISC. HEMATOLOGICAL					
	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-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents
<b>All</b>	<b>7,268</b>	<b>51.6</b>	<b>71,339</b>	<b>0.8</b>	<b>\$29</b>	<b>2,075</b>	<b>14.7</b>	<b>21,241</b>	<b>0.8</b>	<b>\$85</b>	<b>14,090</b>	<b>138,595</b>
<b>Female</b>												
All Females	5,406	52.8	53,102	0.8	30	1,477	14.4	15,171	0.8	83	10,234	101,133
<b>Female, Disabled</b>												
All Ages	460	61.1	4,911	1.0	42	106	14.1	1,155	0.8	88	753	8,008
64 or younger	354	63.3	3,830	1.0	46	79	14.1	877	0.8	93	559	5,987
65-74	80	55.2	849	0.9	33	19	13.1	208	0.7	63	145	1,582
75-84	18	51.4	170	0.6	19	4	11.4	39	0.7	75	35	332
85 and older	8	57.1	62	0.6	9	4	28.6	31	1.2	125	14	107
<b>Female, Other Eligibles</b>												
All Ages	4,946	52.2	48,191	0.7	29	1,371	14.5	14,016	0.8	82	9,481	93,125
64 or younger	2	50.0	24	2.8	272	0	0.0	0	0.0	0	4	48
65-74	554	62.7	5,762	1.0	41	159	18.0	1,667	0.8	88	884	8,984
75-84	1,726	53.1	17,285	0.8	30	533	16.4	5,556	0.8	84	3,249	32,373
85 and older	2,664	49.9	25,120	0.7	25	679	12.7	6,793	0.8	79	5,344	51,720
<b>Male</b>												
All Males	1,862	48.3	18,237	0.7	27	598	15.5	6,070	0.8	90	3,856	37,462
<b>Male, Disabled</b>												
All Ages	441	53.3	4,743	1.0	39	110	13.3	1,196	0.8	91	828	8,911
64 or younger	379	57.8	4,116	1.0	41	86	13.1	930	0.8	88	656	7,019
65-74	57	37.0	567	0.6	18	24	15.6	266	0.9	102	154	1,689
75-84	5	31.3	60	0.4	53	0	0.0	0	0.0	0	16	188
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	15
<b>Male, Other Eligibles</b>												
All Ages	1,421	46.9	13,494	0.6	22	488	16.1	4,874	0.8	90	3,028	28,551
64 or younger	0	0.0	0	0.0	0	1	50.0	12	1.1	134	2	17
65-74	355	51.2	3,737	0.7	27	128	18.5	1,371	0.8	89	693	7,104
75-84	622	46.3	5,862	0.6	22	225	16.8	2,243	0.9	93	1,342	12,715
85 and older	444	44.8	3,895	0.6	19	134	13.5	1,248	0.8	85	991	8,715
<b>Unknown</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0</b>

Source: Data for this table are from the MAX 2005 file for Maryland, released by CMS in 1/2009. This table was produced on 04/23/2009.

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 2005. A total of 6,488 beneficiaries who were in nursing facilities for part of their enrollment and their 59,546 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 2005. 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 2005 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.11  
USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D  
AMONG DUALS, BY BENEFICIARY CHARACTERISTIC<sup>a,b</sup>  
MARYLAND, 2005

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
<b>All</b>	<b>48,089</b>	<b>42.7</b>	<b>3.1</b>	<b>352,513</b>	<b>\$38</b>	<b>\$4,235,135</b>	<b>\$12</b>	<b>1.4</b>	<b>112,662</b>
<b>Age</b>									
5 and younger	3	75.0	4.8	19	936	3,743	197	71.7	4
6-14	6	60.0	7.1	71	1,000	9,997	141	29.1	10
15-20	31	28.4	1.4	155	36	3,929	25	1.6	109
21-44	5,720	36.0	2.7	42,730	44	702,466	16	1.5	15,895
45-64	11,482	44.2	3.6	94,611	47	1,216,086	13	1.4	25,953
65-74	11,232	40.8	2.8	76,814	32	867,193	11	1.4	27,503
75-84	11,681	43.7	3.0	81,322	32	859,874	11	1.3	26,712
85 and older	7,934	48.2	3.4	56,791	35	571,847	10	1.6	16,476
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
<b>Basis of Eligibility<sup>c</sup></b>									
Aged	25,756	42.3	2.9	175,500	30	1,845,078	11	1.4	60,822
Disabled	21,972	46.4	3.7	175,400	50	2,367,594	13	1.4	47,337
Adults	344	7.7	0.3	1,497	4	18,921	13	1.4	4,460
Children	9	37.5	3.4	82	124	2,987	36	4.7	24
Unknown	8	42.1	1.8	34	29	555	16	0.7	19
<b>Gender</b>									
Female	34,004	46.3	3.4	248,678	40	2,968,695	12	1.5	73,480
Male	14,085	35.9	2.7	103,835	32	1,266,440	12	1.2	39,182
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
<b>Race</b>									
White	25,528	46.6	3.8	208,747	46	2,506,957	12	1.6	54,742
African American	17,255	38.4	2.5	111,958	30	1,329,107	12	1.3	44,985
Other/unknown	5,306	41.0	2.5	31,808	31	399,071	13	1.3	12,935
<b>Use of Nursing Facilities<sup>d</sup></b>									
Entire year	8,462	60.1	5.5	77,808	60	847,678	11	1.6	14,090
Part year	4,221	65.1	4.6	29,838	50	325,235	11	1.6	6,488
None	35,406	38.4	2.7	244,867	33	3,062,222	13	1.4	92,084
<b>Maintenance Assistance Status</b>									
Cash	19,602	46.0	3.4	145,300	46	1,954,142	13	1.4	42,645
Medically needy	13,081	55.0	4.5	107,547	50	1,185,371	11	1.6	23,803
Poverty related	222	22.7	1.0	979	13	12,607	13	1.4	979
Other/unknown	15,184	33.6	2.2	98,687	24	1,083,015	11	1.3	45,235

Source: Data for this table are from the MAX 2005 file for Maryland, released by CMS in 1/2009. This table was produced on 04/23/2009.

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 2005.

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<sup>a,b</sup>  
MARYLAND, 2005

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
<b>All</b>	<b>0.3</b>	<b>\$4</b>	<b>\$12</b>	<b>\$0</b>	<b>\$1</b>	<b>1,183,660</b>
<b>Age</b>						
5 and younger	0.5	101	197	0	0	37
6-14	0.8	110	141	0	1	91
15-20	0.2	5	25	0	0	819
21-44	0.3	4	16	0	2	168,257
45-64	0.3	4	13	0	2	276,024
65-74	0.3	3	11	0	1	293,013
75-84	0.3	3	11	0	1	283,453
85 and older	0.4	4	10	0	1	161,966
Unknown	0.0	0	0	0	0	0
<b>Basis of Eligibility<sup>c</sup></b>						
Aged	0.3	3	11	0	1	629,123
Disabled	0.3	5	13	0	2	509,312
Adults	0.0	0	13	0	0	44,868
Children	0.5	17	36	1	1	181
Unknown	0.2	3	16	0	1	176
<b>Gender</b>						
Female	0.3	4	12	0	1	776,940
Male	0.3	3	12	0	1	406,720
Unknown	0.0	0	0	0	0	0
<b>Race</b>						
White	0.4	4	12	0	2	573,096
African American	0.2	3	12	0	1	474,629
Other/unknown	0.2	3	13	0	1	135,935
<b>Use of Nursing Facilities<sup>d</sup></b>						
Entire year	0.6	6	11	0	2	138,595
Part year	0.5	5	11	0	2	59,546
None	0.2	3	13	0	1	985,519
<b>Maintenance Assistance Status</b>						
Cash	0.3	4	13	0	1	476,253
Medically needy	0.5	6	11	0	2	215,471
Poverty related	0.1	1	13	0	0	9,454
Other/unknown	0.2	2	11	0	1	482,482

Source: Data for this table are from the MAX 2005 file for Maryland, released by CMS in 1/2009. This table was produced on 04/23/2009.

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 2005.

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<sup>a,b,c</sup>  
MARYLAND, 2005

Drug Category	Number of Users	Rx \$ per User	Total Rx \$	Rx \$ as a Percentage of All Part D		\$ per Rx	Number Rx as a Percentage of All Part D	
				Excluded Rx \$	Total Number Rx.		Excluded Rx	
<b>All</b>	<b>68,263</b>	<b>\$62</b>	<b>\$4,235,135</b>	<b>100.0</b>	<b>352,513</b>	<b>\$12</b>	<b>100.0</b>	
Anorexia or weight loss/gain	6	77	459	0.0	16	29	0.0	
Fertility drugs	6	249	1,496	0.0	33	45	0.0	
Drugs for cosmetic purposes	47	32	1,521	0.0	89	17	0.0	
Cough and cold medications	12,193	49	592,027	14.0	28,674	21	8.1	
Vitamins and minerals	20,269	63	1,285,298	30.3	120,703	11	34.2	
Non-prescription drugs	12,249	45	550,329	13.0	47,906	11	13.6	
Barbiturates	928	75	69,858	1.6	9,704	7	2.8	
Benzodiazepines	20,818	65	1,346,258	31.8	139,335	10	39.5	
Other Part D Excl Rx Drugs	1,747	222	387,889	9.2	6,053	64	1.7	

Source: Data for this table are from the MAX 2005 file for Maryland, released by CMS in 1/2009. This table was produced on 04/23/2009.

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 2005. A user is a beneficiary who had at least one prescription filled for a Part D excluded drug in 2005. 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.

Dual Eligible Beneficiaries

SUPPLEMENTAL TABLE 1  
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES<sup>a, b</sup>  
 MARYLAND, 2005

Total Number of Dual Eligible Beneficiaries: 112,662  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries: \$296,535,746  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary: \$2,632

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	21,531	19.1	\$0	0.0
1-500	20,969	18.6	3,915,218	1.3
501-1,000	10,118	9.0	7,477,146	2.5
1,001-1,500	8,005	7.1	9,943,192	3.4
1,501-2,000	6,804	6.0	11,862,012	4.0
2,001-2,500	5,970	5.3	13,393,101	4.5
2,501-3,000	5,177	4.6	14,213,805	4.8
3,001-3,500	4,484	4.0	14,561,948	4.9
3,501-4,000	4,006	3.6	15,032,371	5.1
4,001-4,500	3,400	3.0	14,432,791	4.9
4,501-5,000	3,006	2.7	14,260,282	4.8
5,001-5,500	2,556	2.3	13,403,823	4.5
5,501-6,000	2,169	1.9	12,473,043	4.2
6,001-6,500	1,767	1.6	11,038,143	3.7
6,501-7,000	1,614	1.4	10,890,092	3.7
7,001-7,500	1,345	1.2	9,740,776	3.3
7,501-8,000	1,160	1.0	8,981,462	3.0
8,001-8,500	999	0.9	8,239,424	2.8
8,501-9,000	823	0.7	7,195,637	2.4
9,001-9,500	722	0.6	6,673,250	2.3
9,501-10,000	652	0.6	6,351,171	2.1
10,001+	5,385	4.8	82,457,059	27.8

Source: Data for this table are from the MAX 2005 file for Maryland, released by CMS in 1/2009. This table was produced on 04/23/2009.

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 2005.

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

SUPPLEMENTAL TABLE 1A  
 MEDICAID PHARMACY REIMBURSEMENT FOR DISABLED DUAL ELIGIBLE BENEFICIARIES UNDER AGE 65<sup>a, b, c</sup>  
 MARYLAND, 2005

Total Number of Disabled Dual Eligible Beneficiaries, Age < 65: 37,337  
 Total Pharmacy Reimbursement for Disabled Dual Eligible Beneficiaries, Age < 65: \$131,227,712  
 Mean Pharmacy Reimbursement per Disabled Dual Eligible Beneficiary, Age < 65: \$3,514

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Disabled Dual Beneficiaries,		Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
		Age < 65			
\$0	5,653	15.1	0	0.0	
1-500	7,451	20.0	1,296,607	1.0	
501-1,000	3,142	8.4	2,308,788	1.8	
1,001-1,500	2,309	6.2	2,864,500	2.2	
1,501-2,000	2,008	5.4	3,499,984	2.7	
2,001-2,500	1,633	4.4	3,660,268	2.8	
2,501-3,000	1,457	3.9	3,999,505	3.0	
3,001-3,500	1,291	3.5	4,204,461	3.2	
3,501-4,000	1,158	3.1	4,347,117	3.3	
4,001-4,500	1,104	3.0	4,694,305	3.6	
4,501-5,000	959	2.6	4,553,042	3.5	
5,001-5,500	873	2.3	4,579,342	3.5	
5,501-6,000	807	2.2	4,645,912	3.5	
6,001-6,500	673	1.8	4,199,326	3.2	
6,501-7,000	650	1.7	4,386,215	3.3	
7,001-7,500	578	1.5	4,181,899	3.2	
7,501-8,000	521	1.4	4,031,096	3.1	
8,001-8,500	418	1.1	3,451,863	2.6	
8,501-9,000	423	1.1	3,698,423	2.8	
9,001-9,500	375	1.0	3,468,421	2.6	
9,501-10,000	362	1.0	3,527,603	2.7	
10,001+	3,492	9.4	55,629,035	42.4	

Source: Data for this table are from the MAX 2005 file for Maryland, released by CMS in 1/2009. This table was produced on 04/23/2009.

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 2005.

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

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

SUPPLEMENTAL TABLE 1B  
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 AND OLDER<sup>a, b</sup>  
 MARYLAND, 2005

Total Number of Dual Eligible Beneficiaries, Age 65+: 70,691  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65+: \$163,381,228  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65+: \$2,311

Annual Pharmacy Reimbursement per Beneficiary	Percent of Dual Beneficiaries, Age 65		Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
	Number of Beneficiaries	+		
\$0	12,341	17.5	0	0.0
1-500	12,995	18.4	2,532,889	1.6
501-1,000	6,834	9.7	5,066,526	3.1
1,001-1,500	5,616	7.9	6,980,460	4.3
1,501-2,000	4,724	6.7	8,236,132	5.0
2,001-2,500	4,291	6.1	9,629,926	5.9
2,501-3,000	3,677	5.2	10,094,778	6.2
3,001-3,500	3,166	4.5	10,268,681	6.3
3,501-4,000	2,827	4.0	10,607,149	6.5
4,001-4,500	2,277	3.2	9,658,705	5.9
4,501-5,000	2,030	2.9	9,626,524	5.9
5,001-5,500	1,665	2.4	8,730,899	5.3
5,501-6,000	1,353	1.9	7,774,955	4.8
6,001-6,500	1,080	1.5	6,751,662	4.1
6,501-7,000	954	1.3	6,436,105	3.9
7,001-7,500	762	1.1	5,522,170	3.4
7,501-8,000	635	0.9	4,919,183	3.0
8,001-8,500	576	0.8	4,746,496	2.9
8,501-9,000	394	0.6	3,444,678	2.1
9,001-9,500	342	0.5	3,158,513	1.9
9,501-10,000	286	0.4	2,784,714	1.7
10,001+	1,866	2.6	26,410,083	16.2

Source: Data for this table are from the MAX 2005 file for Maryland, released by CMS in 1/2009. This table was produced on 04/23/2009.

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 2005.

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

SUPPLEMENTAL TABLE 1C  
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 TO 74<sup>a, b</sup>  
 MARYLAND, 2005

Total Number of Dual Eligible Beneficiaries, Age 65-74: 27,503  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65-74: \$62,581,063  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65-74: \$2,275

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age		Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
		65-74			
\$0	5,646	20.5		0	0.0
1-500	5,295	19.3		962,991	1.5
501-1,000	2,471	9.0		1,838,315	2.9
1,001-1,500	2,020	7.3		2,518,473	4.0
1,501-2,000	1,725	6.3		3,010,734	4.8
2,001-2,500	1,517	5.5		3,392,932	5.4
2,501-3,000	1,286	4.7		3,529,444	5.6
3,001-3,500	1,169	4.3		3,793,765	6.1
3,501-4,000	1,002	3.6		3,765,755	6.0
4,001-4,500	803	2.9		3,405,466	5.4
4,501-5,000	707	2.6		3,349,307	5.4
5,001-5,500	594	2.2		3,110,327	5.0
5,501-6,000	471	1.7		2,704,858	4.3
6,001-6,500	403	1.5		2,518,712	4.0
6,501-7,000	342	1.2		2,309,887	3.7
7,001-7,500	285	1.0		2,066,057	3.3
7,501-8,000	230	0.8		1,782,037	2.8
8,001-8,500	231	0.8		1,902,442	3.0
8,501-9,000	158	0.6		1,381,043	2.2
9,001-9,500	141	0.5		1,300,527	2.1
9,501-10,000	118	0.4		1,148,173	1.8
10,001+	889	3.2		12,789,818	20.4

Source: Data for this table are from the MAX 2005 file for Maryland, released by CMS in 1/2009. This table was produced on 04/23/2009.

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 2005.

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

SUPPLEMENTAL TABLE 1D  
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 75 TO 84<sup>a, b</sup>  
 MARYLAND, 2005

Total Number of Dual Eligible Beneficiaries, Age 75-84: 26,712  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 75-84: \$64,051,657  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 75-84: \$2,397

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 75-84	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	4,544	17.0	0	0.0
1-500	4,575	17.1	902,682	1.4
501-1,000	2,532	9.5	1,876,541	2.9
1,001-1,500	2,104	7.9	2,619,441	4.1
1,501-2,000	1,727	6.5	3,011,387	4.7
2,001-2,500	1,669	6.2	3,752,578	5.9
2,501-3,000	1,407	5.3	3,868,773	6.0
3,001-3,500	1,243	4.7	4,028,534	6.3
3,501-4,000	1,134	4.2	4,252,641	6.6
4,001-4,500	955	3.6	4,052,182	6.3
4,501-5,000	825	3.1	3,915,749	6.1
5,001-5,500	699	2.6	3,669,786	5.7
5,501-6,000	558	2.1	3,205,358	5.0
6,001-6,500	426	1.6	2,665,568	4.2
6,501-7,000	396	1.5	2,669,667	4.2
7,001-7,500	328	1.2	2,380,183	3.7
7,501-8,000	261	1.0	2,020,438	3.2
8,001-8,500	232	0.9	1,912,221	3.0
8,501-9,000	170	0.6	1,487,647	2.3
9,001-9,500	134	0.5	1,237,937	1.9
9,501-10,000	118	0.4	1,148,826	1.8
10,001+	675	2.5	9,373,518	14.6

Source: Data for this table are from the MAX 2005 file for Maryland, released by CMS in 1/2009. This table was produced on 04/23/2009.

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 2005.

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



SUPPLEMENTAL TABLE 1E  
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 85 AND OLDER<sup>a, b</sup>  
 MARYLAND, 2005

Total Number of Dual Eligible Beneficiaries, Age 85+: 16,476  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 85+: \$36,748,508  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 85+: \$2,230

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 85		Percent of Total Pharmacy Reimbursement
			+ Pharmacy Reimbursement	
\$0	2,151	13.1	0	0.0
1-500	3,125	19.0	667,216	1.8
501-1,000	1,831	11.1	1,351,670	3.7
1,001-1,500	1,492	9.1	1,842,546	5.0
1,501-2,000	1,272	7.7	2,214,011	6.0
2,001-2,500	1,105	6.7	2,484,416	6.8
2,501-3,000	984	6.0	2,696,561	7.3
3,001-3,500	754	4.6	2,446,382	6.7
3,501-4,000	691	4.2	2,588,753	7.0
4,001-4,500	519	3.2	2,201,057	6.0
4,501-5,000	498	3.0	2,361,468	6.4
5,001-5,500	372	2.3	1,950,786	5.3
5,501-6,000	324	2.0	1,864,739	5.1
6,001-6,500	251	1.5	1,567,382	4.3
6,501-7,000	216	1.3	1,456,551	4.0
7,001-7,500	149	0.9	1,075,930	2.9
7,501-8,000	144	0.9	1,116,708	3.0
8,001-8,500	113	0.7	931,833	2.5
8,501-9,000	66	0.4	575,988	1.6
9,001-9,500	67	0.4	620,049	1.7
9,501-10,000	50	0.3	487,715	1.3
10,001+	302	1.8	4,246,747	11.6

Source: Data for this table are from the MAX 2005 file for Maryland, released by CMS in 1/2009. This table was produced on 04/23/2009.

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 2005.

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

APPENDIX TABLE A.3  
CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY<sup>a, b</sup>  
DUAL ELIGIBLE BENEFICIARIES, MARYLAND, 2005

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Blind/ Disabled	Adults	Children	Other/ Unknown	All	Aged	Blind/ Disabled	Adults	Children	Other/ Unknown
<b>All</b>	<b>115,595</b>	<b>60,973</b>	<b>49,871</b>	<b>4,695</b>	<b>37</b>	<b>19</b>	<b>1,235,801</b>	<b>633,069</b>	<b>553,598</b>	<b>48,572</b>	<b>386</b>	<b>176</b>
<b>Age</b>												
5 and younger	5	0	4	0	1	0	50	0	38	0	12	0
6-14	10	0	6	0	4	0	101	0	54	0	47	0
15-20	184	1	165	0	18	0	2,089	12	1,881	0	196	0
21-44	17,445	32	15,638	1,761	14	0	193,817	375	175,313	17,998	131	0
45-64	27,060	156	24,007	2,888	0	9	295,846	1,737	263,781	30,228	0	100
65-74	27,581	21,547	5,987	37	0	10	297,118	228,884	67,860	298	0	76
75-84	26,785	23,871	2,906	8	0	0	284,301	251,576	32,689	36	0	0
85 and older	16,525	15,366	1,158	1	0	0	162,479	150,485	11,982	12	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
<b>Gender</b>												
Female	75,076	45,286	27,204	2,546	21	19	806,001	475,500	303,445	26,647	233	176
Male	40,519	15,687	22,667	2,149	16	0	429,800	157,569	250,153	21,925	153	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
<b>Race</b>												
White	56,025	29,346	24,646	2,006	14	13	595,551	299,751	274,585	20,929	166	120
African American	46,405	22,189	21,695	2,495	20	6	500,135	233,606	240,634	25,653	186	56
Other/unknown	13,165	9,438	3,530	194	3	0	140,115	99,712	38,379	1,990	34	0
<b>Use of Nursing Facilities<sup>c</sup></b>												
Entire year	14,090	12,507	1,581	1	1	0	138,595	121,652	16,919	12	12	0
Part year	6,491	5,148	1,333	10	0	0	59,831	45,993	13,721	117	0	0
None	95,014	43,318	46,957	4,684	36	19	1,037,375	465,424	522,958	48,443	374	176
<b>Maintenance Assistance Status</b>												
Cash	44,861	16,797	27,757	301	6	0	514,081	191,136	319,785	3,103	57	0
Medically needy	24,463	19,163	5,075	221	4	0	225,909	175,037	49,158	1,689	25	0
Poverty related	982	395	498	61	9	19	9,978	4,052	5,104	545	101	176
Other/unknown	45,289	24,618	16,541	4,112	18	0	485,833	262,844	179,551	43,235	203	0
<b>Dual Status<sup>d</sup></b>												
Full dual, all year	113,671	59,952	48,993	4,670	37	19	1,215,376	622,153	544,362	48,299	386	176
Full dual, part year	1,924	1,021	878	25	0	0	20,425	10,916	9,236	273	0	0
<b>Managed Care (MC) Status</b>												
Fee-for-service (FFS) all year	108,896	60,394	44,275	4,194	14	19	1,160,986	626,460	490,836	43,381	133	176
FFS part year, with Rx claims	3,045	381	2,455	201	8	0	34,306	4,496	27,625	2,097	88	0
FFS part year, no Rx claims	721	47	607	65	2	0	7,661	538	6,465	635	23	0
MC all year, with Rx claims	1,487	8	1,315	158	6	0	16,977	89	15,096	1,721	71	0
MC all year, no Rx claims	1,446	143	1,219	77	7	0	15,871	1,486	13,576	738	71	0

Source: Data for this table are from the MAX 2005 file for Maryland, released by CMS in 1/2009. This table was produced on 04/23/2009.

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 2005. 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<sup>a</sup>  
 DUAL ELIGIBLE BENEFICIARIES, MARYLAND, 2005

Beneficiary Characteristics	Beneficiaries and Benefit Months in Cell F of		Included in Cell G of Table 1		Excluded from Cell G of Table 1	
	Table 1					
	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months
<b>All</b>	<b>115,595</b>	<b>1,235,801</b>	<b>112,662</b>	<b>1,183,660</b>	<b>0</b>	<b>52,141</b>
Fee-for-service (FFS) all year	108,896	1,160,986	108,896	1,160,986	0	0
FFS part year, with Rx claims	3,045	34,306	3,045	18,800	0	15,506
FFS part year, with no Rx claims	721	7,661	721	3,874	0	3,787
Managed care (MC) all year, with Rx claims	1,487	16,977	0	0	0	16,977
MC all year, with no Rx claims	1,446	15,871	0	0	0	15,871

Source: Data for this table are from the MAX 2005 file for Maryland, released by CMS in 1/2009. This table was produced on 04/23/2009.

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.

Dual Eligible Beneficiaries