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

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CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY<sup>a, b</sup>  
DUAL ELIGIBLE BENEFICIARIES, NEW HAMPSHIRE, 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>22,760</b>	<b>11,299</b>	<b>10,359</b>	<b>1,092</b>	<b>10</b>	<b>0</b>	<b>233,568</b>	<b>111,115</b>	<b>111,844</b>	<b>10,506</b>	<b>103</b>	<b>0</b>
<b>Age</b>												
5 and younger	3	0	1	0	2	0	30	0	12	0	18	0
6-14	3	0	0	0	3	0	36	0	0	0	36	0
15-20	48	0	43	0	5	0	543	0	494	0	49	0
21-44	5,275	0	4,432	843	0	0	56,179	0	48,114	8,065	0	0
45-64	6,044	0	5,803	241	0	0	64,820	0	62,446	2,374	0	0
65-74	3,258	3,188	62	8	0	0	33,025	32,381	577	67	0	0
75-84	3,819	3,808	11	0	0	0	37,749	37,626	123	0	0	0
85 and older	4,310	4,303	7	0	0	0	41,186	41,108	78	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
<b>Gender</b>												
Female	14,914	8,653	5,411	845	5	0	153,962	86,837	58,724	8,352	49	0
Male	7,846	2,646	4,948	247	5	0	79,606	24,278	53,120	2,154	54	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
<b>Race</b>												
White	22,075	10,968	10,060	1,039	8	0	226,662	107,806	108,783	9,994	79	0
African American	189	46	127	16	0	0	1,929	458	1,314	157	0	0
Other/unknown	496	285	172	37	2	0	4,977	2,851	1,747	355	24	0
<b>Use of Nursing Facilities<sup>c</sup></b>												
Entire year	4,461	4,230	231	0	0	0	45,732	43,177	2,555	0	0	0
Part year	2,303	2,090	212	1	0	0	19,887	17,637	2,238	12	0	0
None	15,996	4,979	9,916	1,091	10	0	167,949	50,301	107,051	10,494	103	0
<b>Maintenance Assistance Status</b>												
Cash	3,602	1,055	2,490	56	1	0	40,679	11,964	28,237	471	7	0
Medically needy	8,059	4,824	2,583	652	0	0	76,682	43,999	26,248	6,435	0	0
Poverty-related	1,437	603	769	62	3	0	12,998	5,353	7,164	451	30	0
Other/unknown	9,662	4,817	4,517	322	6	0	103,209	49,799	50,195	3,149	66	0
<b>Dual Medicare Status<sup>d</sup></b>												
Full dual, all year	20,450	10,399	9,050	991	10	0	211,094	102,586	98,933	9,472	103	0
Full dual, part year	2,310	900	1,309	101	0	0	22,474	8,529	12,911	1,034	0	0
<b>Managed Care (MC) Status</b>												
Fee-for-service (FFS) all year	22,760	11,299	10,359	1,092	10	0	233,568	111,115	111,844	10,506	103	0
FFS part year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
FFS part year, no Rx claims	0	0	0	0	0	0	0	0	0	0	0	0

Source: Data for this table are from the MAX 2005 file for New Hampshire, released by CMS in 10/2008. 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, NEW HAMPSHIRE, 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>90.0</b>	<b>52.5</b>	<b>\$3,441</b>	<b>\$66</b>	<b>\$19,417</b>	<b>17.7</b>	<b>22,760</b>
<b>Age</b>							
5 and younger	100.0	75.3	4,223	56	67,159	6.3	3
6-14	100.0	66.3	8,528	129	60,070	14.2	3
15-20	89.6	38.4	3,499	91	14,949	23.4	48
21-44	87.7	36.2	3,359	93	15,665	21.4	5,275
45-64	90.4	55.8	4,539	81	19,165	23.7	6,044
65-74	85.8	53.0	3,039	57	15,035	20.2	3,258
75-84	90.9	60.8	3,043	50	20,870	14.6	3,819
85 and older	94.9	60.2	2,650	44	26,374	10.0	4,310
Unknown	0.0	0.0	0	0	0	0.0	0
<b>Basis of Eligibility<sup>e</sup></b>							
Aged	91.0	58.3	2,890	50	21,307	13.6	11,299
Disabled	89.1	47.7	4,105	86	18,839	21.8	10,359
Adults	89.3	36.7	2,804	77	5,186	54.1	1,092
Children	90.0	50.9	6,780	133	34,905	19.4	10
Unknown	0.0	0.0	0	0	0	0.0	0
<b>Gender</b>							
Female	92.3	57.2	3,468	61	18,995	18.3	14,914
Male	85.7	43.6	3,388	78	20,217	16.8	7,846
Unknown	0.0	0.0	0	0	0	0.0	0
<b>Race</b>							
White	90.2	52.9	3,458	65	19,644	17.6	22,075
African American	84.1	35.8	3,143	88	11,820	26.6	189
Other/unknown	87.5	40.7	2,761	68	12,169	22.7	496
<b>Use of Nursing Facilities<sup>f</sup></b>							
Entire year	96.7	78.4	3,839	49	38,123	10.1	4,461
Part year	95.2	55.6	2,721	49	21,189	12.8	2,303
None	87.4	44.8	3,433	77	13,945	24.6	15,996
<b>Maintenance Assistance Status</b>							
Cash	91.7	47.9	3,543	74	21,160	16.7	3,602
Medically needy	90.9	54.4	3,434	63	18,021	19.1	8,059
Poverty related	72.4	18.5	1,232	67	4,203	29.3	1,437
Other/unknown	91.4	57.7	3,736	65	22,193	16.8	9,662

Source: Data for this table are from the MAX 2005 file for New Hampshire, released by CMS in 10/2008. 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, NEW HAMPSHIRE, 2005

Beneficiary Characteristics	Mean Number of Rx	Mean Rx \$	Rx \$ as a Percentage of All Medicaid FFS \$ <sup>c</sup>	Number of Rx, Percentage with:						Mean \$, All Medicaid FFS \$ <sup>d</sup>	Number	
				None	More than 0, but 1 or Less	More than 1, but 2 or Less	More than 2, but 5 or Less	More than 5, but 10 or Less	More than 10		Beneficiaries	Benefit Months
<b>All</b>	<b>5.1</b>	<b>\$335</b>	<b>17.7</b>	<b>10.0</b>	<b>14.4</b>	<b>9.5</b>	<b>28.2</b>	<b>27.7</b>	<b>10.2</b>	<b>\$1,892</b>	<b>22,760</b>	<b>233,568</b>
<b>Age</b>												
5 and younger	7.5	422	6.3	0.0	0.0	0.0	33.3	66.7	0.0	6,716	3	30
6-14	5.5	711	14.2	0.0	0.0	0.0	33.3	66.7	0.0	5,006	3	36
15-20	3.4	309	23.4	10.4	33.3	16.7	20.8	12.5	6.3	1,322	48	543
21-44	3.4	315	21.4	12.3	25.8	13.2	28.6	16.0	4.1	1,471	5,275	56,179
45-64	5.2	423	23.7	9.6	13.6	9.9	28.6	28.0	10.3	1,787	6,044	64,820
65-74	5.2	300	20.2	14.2	13.1	8.5	25.8	27.3	11.1	1,483	3,258	33,025
75-84	6.1	308	14.6	9.1	9.3	7.4	27.0	32.7	14.4	2,111	3,819	37,749
85 and older	6.3	277	10.0	5.1	7.1	7.2	30.2	37.3	13.2	2,760	4,310	41,186
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<b>Basis of Eligibility<sup>e</sup></b>												
Aged	5.9	294	13.6	9.0	9.5	7.7	27.9	32.9	13.0	2,167	11,299	111,115
Disabled	4.4	380	21.8	10.9	18.7	11.4	28.4	22.9	7.7	1,745	10,359	111,844
Adults	3.8	291	54.1	10.7	25.3	12.0	28.8	18.8	4.5	539	1,092	10,506
Children	4.9	658	19.4	10.0	10.0	10.0	30.0	30.0	10.0	3,389	10	103
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<b>Gender</b>												
Female	5.5	336	18.3	7.7	12.4	9.1	28.9	30.4	11.5	1,840	14,914	153,962
Male	4.3	334	16.8	14.3	18.3	10.4	26.9	22.5	7.6	1,993	7,846	79,606
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<b>Race</b>												
White	5.2	337	17.6	9.8	14.2	9.5	28.2	28.0	10.3	1,913	22,075	226,662
African American	3.5	308	26.6	15.9	20.6	12.7	29.6	19.0	2.1	1,158	189	1,929
Other/unknown	4.1	275	22.7	12.5	22.4	12.1	27.6	17.5	7.9	1,213	496	4,977
<b>Use of Nursing Facilities<sup>f</sup></b>												
Entire year	7.6	375	10.1	3.3	3.8	5.1	25.1	39.9	22.7	3,719	4,461	45,732
Part year	6.4	315	12.8	4.8	7.3	7.2	30.2	37.0	13.4	2,454	2,303	19,887
None	4.3	327	24.6	12.6	18.4	11.1	28.8	22.9	6.2	1,328	15,996	167,949
<b>Maintenance Assistance Status</b>												
Cash	4.2	314	16.7	8.3	18.6	12.2	31.0	24.5	5.5	1,874	3,602	40,679
Medically needy	5.7	361	19.1	9.1	10.9	8.4	29.0	31.1	11.5	1,894	8,059	76,682
Poverty related	2.0	136	29.3	27.6	29.9	10.4	19.4	10.5	2.2	465	1,437	12,998
Other/unknown	5.4	350	16.8	8.6	13.5	9.4	27.8	28.5	12.1	2,078	9,662	103,209

Source: Data for this table are from the MAX 2005 file for New Hampshire, released by CMS in 10/2008. 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.

Benef(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, NEW HAMPSHIRE, 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>5.1</b>	<b>\$335</b>	<b>\$66</b>	<b>1.8</b>	<b>\$243</b>	<b>\$132</b>	<b>0.2</b>	<b>\$23</b>	<b>\$108</b>	<b>3.1</b>	<b>\$70</b>	<b>\$23</b>
<b>Age</b>												
5 and younger	7.5	422	56	3.4	325	96	0.2	4	25	4.0	93	23
6-14	5.5	711	129	2.0	676	338	0.0	0	0	3.5	35	10
15-20	3.4	309	91	1.5	259	169	0.1	5	45	1.8	46	26
21-44	3.4	315	93	1.2	236	193	0.2	23	153	2.0	57	28
45-64	5.2	423	81	1.9	306	163	0.2	33	154	3.1	84	27
65-74	5.2	300	57	1.9	218	115	0.2	17	92	3.1	65	21
75-84	6.1	308	50	2.2	220	99	0.2	18	74	3.7	70	19
85 and older	6.3	277	44	2.2	192	88	0.3	17	59	3.8	68	18
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	5.9	294	50	2.1	209	98	0.2	18	71	3.6	68	19
Disabled	4.4	380	86	1.6	281	173	0.2	27	148	2.6	72	28
Adults	3.8	291	77	1.1	189	166	0.2	39	201	2.5	63	26
Children	4.9	658	133	1.8	608	337	0.0	1	41	3.1	49	16
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Gender</b>												
Female	5.5	336	61	2.0	241	123	0.2	24	98	3.3	72	22
Male	4.3	334	78	1.6	246	155	0.2	22	138	2.5	66	26
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Race</b>												
White	5.2	337	65	1.8	243	132	0.2	23	107	3.1	70	23
African American	3.5	308	88	1.3	228	178	0.1	36	246	2.1	44	21
Other/unknown	4.1	275	68	1.6	210	133	0.1	14	114	2.3	51	22
<b>Use of Nursing Facilities<sup>e</sup></b>												
Entire year	7.6	375	49	2.7	259	95	0.3	22	65	4.6	94	20
Part year	6.4	315	49	2.2	217	99	0.3	22	77	4.0	76	19
None	4.3	327	77	1.6	241	155	0.2	24	138	2.5	62	25
<b>Maintenance Assistance Status</b>												
Cash	4.2	314	74	1.5	230	151	0.2	24	135	2.5	60	24
Medically needy	5.7	361	63	2.1	258	124	0.2	27	110	3.4	77	23
Poverty related	2.0	136	67	0.7	98	143	0.1	11	123	1.3	27	21
Other/unknown	5.4	350	65	1.9	254	132	0.2	22	97	3.2	74	23

Source: Data for this table are from the MAX 2005 file for New Hampshire, released by CMS in 10/2008. 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.medispn.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, NEW HAMPSHIRE, 2005

Therapeutic Category	Number of Rx per Benefit Month Among Users			\$ per Benefit Month Among Users			\$ per Rx			Users <sup>e</sup>							
	Total	Patented Brand-	Off-Patent Brand-	Total	Patented Brand-	Off-Patent Brand-	Total	Patented Brand-	Off-Patent Brand-	Total Number of Rx	Total Rx \$	Number	As a Percentage of Dual Benes	Number of Benefit Months			
		Name	Name Generic		Name	Name Generic		Name	Name Generic								
Anti-infective Agents	0.3	0.1	0.0	0.2	\$23	\$15	\$3	\$5	\$67	\$227	\$85	\$20	45,521	\$3,029,117	12,013	52.8	131,626
Biologicals	0.1	0.0	0.0	0.1	11	1	4	6	104	24	1,960	113	1,185	123,444	1,040	4.6	11,480
Antineoplastic Agents	0.6	0.2	0.0	0.4	100	77	1	23	171	507	61	53	3,809	649,735	620	2.7	6,499
Endocrine/Metabolic Drugs	1.0	0.3	0.1	0.6	45	31	5	9	44	94	39	16	110,792	4,863,291	9,984	43.9	108,158
Cardiovascular Agents	1.8	0.6	0.0	1.2	64	46	0	18	36	83	40	14	252,786	8,981,685	13,095	57.5	139,576
Respiratory Agents	0.7	0.5	0.0	0.3	51	45	1	5	69	97	65	18	62,846	4,365,284	7,898	34.7	85,999
Gastrointestinal Agents	0.8	0.3	0.0	0.5	54	45	0	9	70	148	66	19	78,114	5,434,049	9,310	40.9	101,204
Genitourinary Agents	0.6	0.4	0.0	0.2	35	31	1	4	63	79	62	23	21,412	1,339,878	3,472	15.3	38,199
CNS Drugs	1.7	0.7	0.0	0.9	151	121	3	27	91	164	150	30	264,502	24,049,904	14,852	65.3	159,316
Stimulants/Anti-obesity/Anorexia	0.7	0.3	0.0	0.3	73	58	2	13	111	176	168	41	3,962	440,185	543	2.4	6,044
Miscellaneous Psychological/Neurological Agents	0.8	0.7	0.0	0.0	121	119	0	2	156	159	134	64	21,260	3,321,694	2,611	11.5	27,506
Analgesics and Anesthetics	1.0	0.2	0.1	0.7	66	24	25	17	69	146	197	26	119,665	8,296,273	11,710	51.4	125,265
Neuromuscular Agents	1.1	0.3	0.0	0.7	83	52	4	27	79	157	93	40	93,033	7,358,901	8,071	35.5	88,468
Nutritional Products	0.6	0.0	0.0	0.6	13	2	0	11	21	192	14	18	22,541	480,509	3,429	15.1	36,033
Hematological Agents	0.9	0.2	0.0	0.6	61	52	1	8	68	223	32	12	39,587	2,700,238	4,200	18.5	44,231
Topical Products	0.5	0.2	0.0	0.3	23	16	1	6	47	88	44	22	50,068	2,366,601	9,544	41.9	105,134
Miscellaneous Products	0.4	0.2	0.0	0.1	63	48	4	11	168	222	281	76	2,965	498,376	735	3.2	7,951
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	5	0	0	0	17	0	0	0	372	6,143	103	0.5	1,130
<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>1,194,420</b>	<b>78,305,307</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 New Hampshire, released by CMS in 10/2008. 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.medispn.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 New Hampshire, 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.medispn.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.



TABLE D.7  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, NEW HAMPSHIRE, 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	\$16,061,992	9,445	41.5	104,089	0.9	\$181	\$154
ANTIDEPRESSANTS	6,891,460	15,900	69.9	172,678	0.7	56	40
ANTICONVULSANT	6,171,340	7,532	33.1	83,074	0.8	90	74
ANALGESICS - Narcotic	5,341,080	13,976	61.4	150,637	0.5	67	35
ANTIHYPERLIPIDEMIC	4,646,245	6,560	28.8	72,830	0.7	96	64
ULCER DRUGS	4,314,784	9,173	40.3	100,653	0.6	76	43
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	3,352,848	3,244	14.3	34,421	0.6	153	97
ANTIASTHMATIC	3,272,633	9,136	40.1	99,516	0.5	72	33
ANTIDIABETIC	3,042,675	6,541	28.7	70,966	0.8	55	43
ANALGESICS - ANTI-INFLAMMATORY	1,932,055	5,906	25.9	65,909	0.4	73	29
Total	55,027,112	87,413		954,773	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for New Hampshire, released by CMS in 10/2008. 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.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); 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, NEW HAMPSHIRE, 2005

Beneficiary Characteristics	All Top 10 Drug Groups				ANTIPSYCHOTICS				ANTIDEPRESSANTS			
	Number of Rx	Rx \$	Number of Users	Users as % of Dual Benes	Number of Months Among Users	Mean Number of Rx per Rx \$ per Month	Mean Benefit per Rx \$ per Month	Number of Users	Users as % of Dual Benes	Number of Months Among Users	Mean Number of Rx per Rx \$ per Month	Mean Benefit per Rx \$ per Month
<b>All</b>	<b>615,825</b>	<b>\$55,027,112</b>	<b>9,445</b>	<b>41.5</b>	<b>104,089</b>	<b>0.9</b>	<b>\$154</b>	<b>15,900</b>	<b>69.9</b>	<b>172,678</b>	<b>0.7</b>	<b>\$40</b>
<b>Female</b>												
All Females	424,913	35,575,032	5,782	38.8	63,255	0.8	133	11,604	77.8	126,211	0.7	40
<b>Female, Disabled</b>												
All Ages	171,694	17,581,317	2,772	51.2	31,697	0.8	167	4,969	91.8	55,988	0.6	42
5 and younger	21	437	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	335	27,701	10	50.0	120	0.8	109	19	95.0	219	0.5	30
21-44	52,894	5,581,344	1,149	55.9	13,094	0.7	152	1,825	88.9	20,446	0.6	41
45-64	116,917	11,850,574	1,598	48.6	18,312	0.9	179	3,101	94.2	35,057	0.7	42
65-74	1,187	103,066	9	28.1	99	0.8	227	20	62.5	220	0.8	35
75-84	233	13,852	4	57.1	48	0.8	127	3	42.9	36	1.1	49
85 and older	107	4,343	2	33.3	24	0.5	43	1	16.7	10	0.5	1
<b>Female, Other Eligibles</b>												
All Ages	253,219	17,993,715	3,010	31.7	31,558	0.8	98	6,635	69.8	70,223	0.8	38
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	12	96	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	30	2,017	1	25.0	6	0.2	2	4	100.0	36	0.4	17
21-44	14,523	1,240,044	222	32.7	2,449	0.5	93	649	95.6	6,943	0.5	35
45-64	5,218	429,431	48	30.0	525	0.6	96	199	124.4	2,154	0.5	36
65-74	57,903	4,465,485	527	25.1	5,860	0.8	129	1,205	57.4	13,284	0.7	40
75-84	82,985	5,862,296	919	31.7	9,581	0.8	104	1,964	67.7	20,809	0.8	38
85 and older	92,548	5,994,346	1,293	35.3	13,137	0.8	80	2,614	71.4	26,997	0.9	39
<b>Male</b>												
All Males	190,912	19,452,080	3,663	46.7	40,834	0.9	188	4,296	54.8	46,467	0.7	40
<b>Male, Disabled</b>												
All Ages	123,904	14,377,251	2,748	55.5	31,544	1.0	208	2,720	55.0	30,688	0.7	41
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	566	56,309	12	52.2	144	1.0	171	9	39.1	103	0.9	30
21-44	48,826	6,117,472	1,357	57.1	15,574	0.9	203	1,220	51.3	13,808	0.6	41
45-64	73,909	8,145,242	1,369	54.5	15,722	1.0	213	1,478	58.8	16,642	0.7	42
65-74	444	48,441	10	33.3	104	0.7	243	12	40.0	123	0.7	20
75-84	121	8,662	0	0.0	0	0.0	0	1	25.0	12	1.1	99
85 and older	38	1,125	0	0.0	0	0.0	0	0	0.0	0	0.0	0

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, NEW HAMPSHIRE, 2005

Beneficiary Characteristics	All Top 10 Drug Groups		ANTIPSYCHOTICS					ANTIDEPRESSANTS				
	Number of Rx	Rx \$	Number of Users	Users as % of Dual Benes	Mean		Mean	Number of Users	Users as % of Dual Benes	Mean		Mean
					Number of Months Among Users	of Rx per Rx \$ per Month				Number of Months Among Users	of Rx per Rx \$ per Month	
<b>Male, Other Eligibles</b>												
All Ages	67,008	5,074,829	915	31.6	9,290	0.9	120	1,576	54.4	15,779	0.8	37
5 and younger	2	77	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	1	12	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	58	2,731	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	2,027	206,996	25	15.2	243	0.6	209	78	47.6	759	0.4	28
45-64	2,016	214,102	12	14.8	128	0.5	54	49	60.5	514	0.6	41
65-74	25,993	2,125,766	301	27.4	3,256	1.0	157	488	44.5	5,268	0.8	38
75-84	21,887	1,535,137	318	35.0	3,196	0.9	105	532	58.6	5,172	0.8	33
85 and older	15,024	990,008	259	40.3	2,467	0.8	87	429	66.7	4,066	0.8	42
<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 New Hampshire, released by CMS in 10/2008. 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.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.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, NEW HAMPSHIRE, 2005

Beneficiary Characteristics	ANTICONVULSANT					ANALGESICS - Narcotic					ANTIHYPERLIPIDEMIC				
	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>7,532</b>	<b>33.1</b>	<b>83,074</b>	<b>0.8</b>	<b>\$74</b>	<b>13,976</b>	<b>61.4</b>	<b>150,637</b>	<b>0.5</b>	<b>\$36</b>	<b>6,560</b>	<b>28.8</b>	<b>72,830</b>	<b>0.7</b>	<b>\$64</b>
<b>Female</b>															
All Females	4,919	33.0	54,200	0.8	68	10,030	67.3	108,964	0.5	34	4,312	28.9	48,101	0.7	64
<b>Female, Disabled</b>															
All Ages	2,809	51.9	31,709	0.8	82	4,330	80.0	48,863	0.5	39	1,588	29.3	18,160	0.6	62
5 and younger	1	100.0	12	1.0	23	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	9	45.0	104	0.6	46	12	60.0	134	0.1	1	1	5.0	12	0.8	129
21-44	1,113	54.2	12,416	0.7	85	1,688	82.2	18,841	0.4	29	272	13.2	3,094	0.6	55
45-64	1,678	51.0	19,081	0.8	80	2,602	79.1	29,567	0.6	47	1,295	39.3	14,825	0.6	64
65-74	6	18.8	72	0.6	25	20	62.5	231	0.7	31	18	56.3	205	0.7	71
75-84	2	28.6	24	1.3	22	4	57.1	48	0.7	10	2	28.6	24	0.6	77
85 and older	0	0.0	0	0.0	0	4	66.7	42	1.0	20	0	0.0	0	0.0	0
<b>Female, Other Eligibles</b>															
All Ages	2,110	22.2	22,491	0.8	49	5,700	60.0	60,101	0.5	29	2,724	28.7	29,941	0.7	65
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	50.0	12	0.5	100	3	75.0	24	0.1	0	0	0.0	0	0.0	0
21-44	316	46.5	3,399	0.6	64	806	118.7	8,847	0.5	26	66	9.7	716	0.4	47
45-64	75	46.9	841	0.7	55	180	112.5	1,960	0.7	64	61	38.1	676	0.6	54
65-74	539	25.7	6,021	0.9	62	1,242	59.2	13,710	0.5	27	964	45.9	10,837	0.7	66
75-84	597	20.6	6,254	0.9	44	1,538	53.0	16,449	0.6	29	1,079	37.2	11,897	0.7	67
85 and older	581	15.9	5,964	0.8	34	1,931	52.8	19,111	0.6	27	554	15.1	5,815	0.7	62
<b>Male</b>															
All Males	2,613	33.3	28,874	0.9	85	3,946	50.3	41,673	0.5	40	2,248	28.7	24,729	0.7	64
<b>Male, Disabled</b>															
All Ages	1,932	39.0	21,900	0.9	95	2,550	51.5	28,202	0.5	42	1,392	28.1	15,828	0.7	63
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	12	52.2	144	1.2	74	10	43.5	115	0.3	4	3	13.0	36	0.7	75
21-44	892	37.5	10,166	0.8	96	1,151	48.4	12,779	0.4	32	397	16.7	4,552	0.6	54
45-64	1,020	40.6	11,514	0.9	95	1,375	54.7	15,170	0.6	51	977	38.9	11,102	0.7	67
65-74	7	23.3	64	0.5	35	12	40.0	114	0.3	11	11	36.7	94	0.4	32
75-84	1	25.0	12	0.7	21	2	50.0	24	0.4	4	3	75.0	36	0.8	68
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	100.0	8	1.1	41

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, NEW HAMPSHIRE, 2005

Beneficiary Characteristics	ANTICONVULSANT					ANALGESICS - Narcotic					ANTIHYPERLIPIDEMIC					
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean		Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean		Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean		
				Rx per Benefit Month	Rx \$ per Benefit Month				Rx per Benefit Month	Rx \$ per Benefit Month				Rx per Benefit Month	Rx \$ per Benefit Month	
<b>Male, Other Eligibles</b>																
All Ages	681	23.5	6,974	0.9	56	1,396	48.2	13,471	0.5	37	856	29.5	8,901	0.7	66	
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	100.0	12	0.9	43	1	100.0	12	0.1	1	1	100.0	12	1.9	165	
21-44	36	22.0	355	0.5	33	149	90.9	1,398	0.6	60	15	9.1	150	0.4	45	
45-64	26	32.1	280	0.7	71	75	92.6	792	0.9	132	23	28.4	237	0.7	71	
65-74	273	24.9	2,992	0.9	72	508	46.3	5,350	0.5	30	432	39.4	4,676	0.7	65	
75-84	239	26.3	2,352	0.9	44	350	38.5	3,298	0.5	26	286	31.5	2,905	0.7	70	
85 and older	106	16.5	983	0.9	41	313	48.7	2,621	0.6	23	99	15.4	921	0.7	59	
<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 New Hampshire, released by CMS in 10/2008. 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, NEW HAMPSHIRE, 2005

Beneficiary Characteristics	ULCER DRUGS					MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL					ANTIASTHMATIC				
	Number of Users	Users as % of Dual Benes	Number of Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month
<b>All</b>	<b>9,173</b>	<b>40.3</b>	<b>100,653</b>	<b>0.6</b>	<b>\$43</b>	<b>3,244</b>	<b>14.3</b>	<b>34,421</b>	<b>0.6</b>	<b>\$97</b>	<b>9,136</b>	<b>40.1</b>	<b>99,516</b>	<b>0.5</b>	<b>\$33</b>
<b>Female</b>															
All Females	6,594	44.2	72,537	0.6	43	2,445	16.4	26,044	0.7	97	6,748	45.2	74,225	0.5	33
<b>Female, Disabled</b>															
All Ages	2,403	44.4	27,483	0.5	41	514	9.5	5,860	0.3	123	2,773	51.2	31,415	0.4	32
5 and younger	1	100.0	12	0.1	2	0	0.0	0	0.0	0	2	200.0	24	0.3	6
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	6	30.0	67	0.3	19	0	0.0	0	0.0	0	6	30.0	72	0.1	5
21-44	741	36.1	8,480	0.4	37	174	8.5	1,952	0.2	101	868	42.3	9,847	0.4	25
45-64	1,633	49.6	18,673	0.5	42	336	10.2	3,860	0.4	134	1,866	56.7	21,120	0.4	35
65-74	13	40.6	145	0.6	40	3	9.4	36	0.6	74	30	93.8	340	0.6	61
75-84	7	100.0	84	0.6	18	1	14.3	12	0.2	15	1	14.3	12	0.3	50
85 and older	2	33.3	22	1.0	67	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Female, Other Eligibles</b>															
All Ages	4,191	44.1	45,054	0.6	45	1,931	20.3	20,184	0.7	89	3,975	41.8	42,810	0.5	34
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	1	100.0	12	1.0	8	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	3	75.0	30	0.1	2	0	0.0	0	0.0	0	2	50.0	12	0.2	12
21-44	205	30.2	2,216	0.3	21	51	7.5	567	0.2	86	328	48.3	3,628	0.3	19
45-64	92	57.5	1,014	0.4	34	17	10.6	190	0.2	36	100	62.5	1,094	0.4	25
65-74	928	44.2	10,469	0.6	45	219	10.4	2,328	0.6	83	1,047	49.9	11,603	0.5	36
75-84	1,348	46.5	14,666	0.6	44	630	21.7	6,493	0.8	90	1,232	42.5	13,222	0.5	38
85 and older	1,614	44.1	16,647	0.7	50	1,014	27.7	10,606	0.8	91	1,266	34.6	13,251	0.5	32
<b>Male</b>															
All Males	2,579	32.9	28,116	0.6	42	799	10.2	8,377	0.6	100	2,388	30.4	25,291	0.5	33
<b>Male, Disabled</b>															
All Ages	1,486	30.0	16,852	0.5	40	303	6.1	3,452	0.3	113	1,261	25.5	13,895	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	0	0.0	0	0.0	0
15-20	6	26.1	72	0.8	38	1	4.3	12	0.1	7	9	39.1	108	0.2	109
21-44	551	23.2	6,247	0.5	37	119	5.0	1,374	0.3	148	445	18.7	5,009	0.3	20
45-64	915	36.4	10,399	0.6	42	181	7.2	2,051	0.4	90	793	31.6	8,674	0.5	33
65-74	10	33.3	86	0.8	63	1	3.3	3	0.3	27	14	46.7	104	0.4	36
75-84	4	100.0	48	0.6	11	1	25.0	12	1.1	166	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

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, NEW HAMPSHIRE, 2005

Beneficiary Characteristics	ULCER DRUGS					MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL					ANTIASTHMATIC				
	Number of Users	Users as % of Dual Benes	Number of Months Among Users	Mean		Number of Users	Users as % of Dual Benes	Number of Months Among Users	Mean		Number of Users	Users as % of Dual Benes	Number of Months Among Users	Mean	
				Rx per Benefit Month	Rx \$ per Benefit Month				Rx per Benefit Month	Rx \$ per Benefit Month				Rx per Benefit Month	Rx \$ per Benefit Month
<b>Male, Other Eligibles</b>															
All Ages	1,093	37.7	11,264	0.6	44	496	17.1	4,925	0.8	90	1,127	38.9	11,396	0.5	37
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	100.0	24	0.1	3
6-14	1	50.0	12	0.1	1	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	3	300.0	36	0.6	6	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	22	13.4	234	0.5	28	6	3.7	67	0.3	27	35	21.3	373	0.4	30
45-64	41	50.6	471	0.4	34	8	9.9	92	0.3	125	32	39.5	339	0.4	29
65-74	396	36.1	4,370	0.6	43	109	9.9	1,148	0.7	83	416	37.9	4,506	0.5	41
75-84	355	39.1	3,611	0.7	49	197	21.7	1,867	0.8	92	363	40.0	3,547	0.6	38
85 and older	275	42.8	2,530	0.7	43	176	27.4	1,751	0.8	94	279	43.4	2,607	0.5	34
<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 New Hampshire, released by CMS in 10/2008. 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, NEW HAMPSHIRE, 2005

Beneficiary Characteristics	ANTIDIABETIC					ANALGESICS - ANTI-INFLAMMATORY					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 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 Month	Mean Rx \$ per Benefit Month		
<b>All</b>	<b>6,541</b>	<b>28.7</b>	<b>70,966</b>	<b>0.8</b>	<b>\$43</b>	<b>5,906</b>	<b>25.9</b>	<b>65,909</b>	<b>0.4</b>	<b>\$29</b>	<b>22,760</b>	<b>233,568</b>
<b>Female</b>												
All Females	4,446	29.8	48,702	0.8	41	4,311	28.9	48,270	0.4	33	14,914	153,962
<b>Female, Disabled</b>												
All Ages	1,421	26.3	16,054	0.7	49	1,903	35.2	21,737	0.4	31	5,411	58,724
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	0	0
15-20	0	0.0	0	0.0	0	4	20.0	48	0.1	1	20	229
21-44	274	13.3	3,100	0.7	45	674	32.8	7,678	0.3	11	2,054	22,332
45-64	1,125	34.2	12,701	0.7	50	1,216	36.9	13,905	0.4	42	3,291	35,678
65-74	17	53.1	193	1.0	88	7	21.9	84	0.7	41	32	328
75-84	3	42.9	36	0.6	16	1	14.3	12	0.2	14	7	75
85 and older	2	33.3	24	1.0	39	1	16.7	10	0.3	4	6	70
<b>Female, Other Eligibles</b>												
All Ages	3,025	31.8	32,648	0.8	38	2,408	25.3	26,533	0.5	35	9,503	95,238
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	1	12
15-20	0	0.0	0	0.0	0	2	50.0	24	0.1	0	4	37
21-44	73	10.8	775	0.6	36	283	41.7	3,046	0.3	32	679	6,662
45-64	49	30.6	561	0.4	31	71	44.4	777	0.3	11	160	1,645
65-74	953	45.4	10,473	0.7	40	576	27.4	6,525	0.4	35	2,099	21,836
75-84	1,149	39.6	12,376	0.8	38	684	23.6	7,630	0.5	42	2,900	29,403
85 and older	801	21.9	8,463	0.9	35	792	21.6	8,531	0.5	32	3,660	35,643
<b>Male</b>												
All Males	2,095	26.7	22,264	0.8	46	1,595	20.3	17,639	0.3	19	7,846	79,606
<b>Male, Disabled</b>												
All Ages	1,110	22.4	12,342	0.7	49	1,076	21.7	12,161	0.3	18	4,948	53,120
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
15-20	2	8.7	24	0.1	10	2	8.7	24	0.5	3	23	265
21-44	274	11.5	3,049	0.7	46	487	20.5	5,491	0.2	16	2,378	25,782
45-64	822	32.7	9,151	0.8	51	581	23.1	6,582	0.4	20	2,512	26,768
65-74	7	23.3	70	0.4	47	5	16.7	52	0.8	31	30	249
75-84	2	50.0	24	0.6	67	1	25.0	12	0.6	48	4	48
85 and older	3	300.0	24	1.2	33	0	0.0	0	0.0	0	1	8

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, NEW HAMPSHIRE, 2005

Beneficiary Characteristics	ANTIDIABETIC					ANALGESICS - ANTI-INFLAMMATORY					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 Month	Mean Benefit \$ per Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Month	Mean Benefit \$ per Month		
<b>Male, Other Eligibles</b>												
All Ages	985	34.0	9,922	0.8	42	519	17.9	5,478	0.4	22	2,898	26,486
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	18
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	24
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12
21-44	10	6.1	96	0.8	110	34	20.7	350	0.2	6	164	1,403
45-64	14	17.3	126	0.7	36	24	29.6	274	0.4	10	81	729
65-74	455	41.5	4,854	0.8	48	194	17.7	2,135	0.4	20	1,097	10,612
75-84	336	37.0	3,253	0.8	37	153	16.9	1,589	0.5	23	908	8,223
85 and older	170	26.4	1,593	0.9	31	114	17.7	1,130	0.6	33	643	5,465
<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 New Hampshire, released by CMS in 10/2008. 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).

Benef(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, NEW HAMPSHIRE, 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>\$375</b>	<b>7.6</b>	<b>4,461</b>	<b>45,732</b>
<b>Age</b>				
0-64	618	9.2	220	2,429
65-74	519	9.0	425	4,470
75-84	399	8.1	1,348	13,667
85 and older	312	7.0	2,468	25,166
Unknown	0	0.0	0	0
<b>Gender</b>				
Female	361	7.5	3,512	36,580
Male	430	8.1	949	9,152
Unknown	0	0.0	0	0
<b>Race</b>				
White	375	7.6	4,389	44,938
African American	336	8.6	10	110
Other/unknown	353	7.6	62	684
<b>Basis of Eligibility<sup>c</sup></b>				
Aged	361	7.6	4,230	43,177
Disabled	607	9.2	231	2,555
Adults	0	0.0	0	0
Children	0	0.0	0	0
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 2005 file for New Hampshire, released by CMS in 10/2008. 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 2,303 beneficiaries who were in nursing facilities for part of their enrollment and their 19,887 benefit months were excluded from the analysis. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

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

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

TABLE D.9  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,  
 BY BRAND STATUS AND THERAPEUTIC CATEGORY<sup>a, b, c, d, e</sup>  
 DUAL ELIGIBLE BENEFICIARIES, NEW HAMPSHIRE, 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	0.3	\$16	\$8	\$2	\$5	\$40	\$96	\$56	\$20	12,619	\$507,643	2,971	66.6	32,519
Biologicals	0.1	0.0	0.0	0.0	2	1	0	1	20	13	0	28	875	17,546	797	17.9	8,973
Antineoplastic Agents	0.6	0.1	0.0	0.5	70	36	1	33	108	299	24	66	1,132	122,546	163	3.7	1,753
Endocrine/Metabolic Drugs	1.4	0.4	0.3	0.7	48	29	9	10	35	75	35	14	31,376	1,110,464	2,175	48.8	23,173
Cardiovascular Agents	2.3	0.5	0.0	1.8	61	31	0	29	26	68	42	16	78,502	2,065,950	3,225	72.3	34,019
Respiratory Agents	0.8	0.5	0.0	0.2	45	40	0	4	59	74	51	21	13,971	822,906	1,726	38.7	18,492
Gastrointestinal Agents	1.0	0.4	0.0	0.6	53	40	0	13	54	114	35	20	25,755	1,399,366	2,436	54.6	26,407
Genitourinary Agents	0.7	0.5	0.0	0.2	38	33	0	5	56	68	39	25	6,883	386,198	927	20.8	10,116
CNS Drugs	2.0	1.0	0.0	1.0	124	97	0	27	64	98	38	28	71,860	4,570,926	3,465	77.7	36,759
Stimulants/Anti-obesity/Aorexia	0.7	0.3	0.0	0.4	68	63	0	5	97	233	0	12	273	26,397	34	0.8	388
Miscellaneous Psychological/ Neurological Agents	1.0	1.0	0.0	0.0	124	124	0	0	123	123	0	82	13,164	1,622,906	1,233	27.6	13,107
Analgesics and Anesthetics	1.1	0.2	0.2	0.6	56	20	24	12	53	85	116	19	26,329	1,403,503	2,346	52.6	24,905
Neuromuscular Agents	1.4	0.4	0.0	1.0	85	42	2	42	63	110	86	43	19,305	1,210,408	1,330	29.8	14,191
Nutritional Products	0.8	0.0	0.0	0.8	11	0	0	11	15	21	14	14	9,173	133,636	1,105	24.8	11,647
Hematological Agents	1.3	0.3	0.0	1.0	68	59	1	9	52	202	19	9	17,424	903,659	1,257	28.2	13,244
Topical Products	0.6	0.2	0.0	0.4	25	17	1	7	39	73	34	19	20,145	794,167	2,845	63.8	31,241
Miscellaneous Products	0.3	0.2	0.0	0.1	9	7	0	2	30	32	361	22	834	24,767	240	5.4	2,647
Unknown Therapeutic Category	0.4	0.0	0.0	0.0	5	0	0	0	13	0	0	0	120	1,542	27	0.6	307
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.	349,740	17,124,530	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for New Hampshire, released by CMS in 10/2008. 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 2,303 beneficiaries who were in nursing facilities for part of their enrollment and their 19,887 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 New Hampshire, 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, NEW HAMPSHIRE, 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	Number of Rx per Benefit Month	\$ per Rx	Rx \$ per Benefit Month
ANTIPSYCHOTICS	\$2,539,608	2,172	48.7	23,524	0.9	\$119	\$108
ANTIDEPRESSANTS	1,856,663	3,879	87.0	41,959	0.9	47	44
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	1,623,857	1,437	32.2	15,362	0.9	123	106
ULCER DRUGS	1,230,863	1,993	44.7	21,571	0.8	72	57
ANALGESICS - Narcotic	878,337	2,206	49.5	23,232	0.7	52	38
ANTICONVULSANT	791,655	1,162	26.0	12,511	1.1	59	63
ANTIASTHMATIC	730,936	1,817	40.7	19,545	0.6	66	37
ANTIDIABETIC	656,844	1,410	31.6	15,190	1.1	40	43
ANTIHYPERTENSIVE	646,233	841	18.9	8,998	0.8	85	72
DERMATOLOGICAL	541,407	5,957	133.5	66,747	0.3	30	8
<b>Total</b>	<b>11,496,403</b>	<b>22,874</b>		<b>248,639</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 New Hampshire, released by CMS in 10/2008. 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 2,303 beneficiaries who were in nursing facilities for part of their enrollment and their 19,887 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.medispn.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, NEW HAMPSHIRE, 2005

Beneficiary Characteristics	All Top 10 Drug Groups			ANTIPSYCHOTICS				ANTIDEPRESSANTS				
	Number of Rx	Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
<b>All</b>	<b>174,546</b>	<b>\$11,496,403</b>	<b>2,172</b>	<b>48.7</b>	<b>23,524</b>	<b>0.9</b>	<b>\$108</b>	<b>3,879</b>	<b>87.0</b>	<b>41,959</b>	<b>0.9</b>	<b>\$44</b>
<b>Female</b>												
All Females	135,955	8,837,069	1,643	46.8	17,892	0.9	102	3,103	88.4	33,731	0.9	44
<b>Female, Disabled</b>												
All Ages	7,878	714,268	85	67.5	978	1.2	179	126	100.0	1,441	1.0	49
64 or younger	7,432	691,973	81	68.1	930	1.2	183	122	102.5	1,395	1.0	50
65-74	278	12,375	0	0.0	0	0.0	0	2	66.7	24	1.1	17
75-84	62	5,610	2	200.0	24	1.0	171	1	100.0	12	1.2	37
85 and older	106	4,310	2	66.7	24	0.5	43	1	33.3	10	0.5	1
<b>Female, Other Eligibles</b>												
All Ages	128,077	8,122,801	1,558	46.0	16,914	0.9	97	2,977	87.9	32,290	0.9	44
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	13,348	972,593	168	66.4	1,887	1.0	127	241	95.3	2,643	0.9	50
75-84	44,469	2,799,004	513	50.7	5,575	0.9	105	964	95.4	10,427	1.0	45
85 and older	70,260	4,351,204	877	41.3	9,452	0.8	87	1,772	83.5	19,220	0.9	43
<b>Male</b>												
All Males	38,591	2,659,334	529	55.7	5,632	1.0	128	776	81.8	8,228	0.9	45
<b>Male, Disabled</b>												
All Ages	5,727	463,489	72	68.6	804	1.2	166	95	90.5	1,079	1.0	49
64 or younger	5,578	453,224	70	69.3	780	1.2	164	93	92.1	1,055	1.0	49
65-74	111	9,140	2	66.7	24	1.1	232	2	66.7	24	1.1	22
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	38	1,125	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Male, Other Eligibles</b>												
All Ages	32,864	2,195,845	457	54.1	4,828	1.0	122	681	80.7	7,149	0.9	44
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	8,629	647,077	105	63.3	1,191	1.1	172	143	86.1	1,641	1.0	46
75-84	13,233	860,771	187	55.7	1,954	1.0	114	275	81.8	2,772	0.9	40
85 and older	11,002	687,997	165	48.2	1,683	0.9	95	263	76.9	2,736	0.9	47
<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 New Hampshire, released by CMS in 10/2008. 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 2,303 beneficiaries who were in nursing facilities for part of their enrollment and their 19,887 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.medispans.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, NEW HAMPSHIRE, 2005

Beneficiary Characteristics	MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL					ULCER DRUGS					ANALGESICS - Narcotic				
	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>1,437</b>	<b>32.2</b>	<b>15,362</b>	<b>0.9</b>	<b>\$106</b>	<b>1,993</b>	<b>44.7</b>	<b>21,571</b>	<b>0.8</b>	<b>\$57</b>	<b>2,206</b>	<b>49.5</b>	<b>23,232</b>	<b>0.7</b>	<b>\$38</b>
<b>Female</b>															
All Females	1,164	33.1	12,534	0.9	106	1,551	44.2	16,917	0.8	57	1,790	51.0	19,073	0.7	38
<b>Female, Disabled</b>															
All Ages	27	21.4	312	0.8	351	51	40.5	585	0.8	72	73	57.9	839	1.1	75
64 or younger	26	21.8	300	0.8	364	47	39.5	539	0.8	74	65	54.6	749	1.0	76
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	100.0	36	3.1	142
75-84	1	100.0	12	0.2	15	2	200.0	24	0.6	15	1	100.0	12	0.2	1
85 and older	0	0.0	0	0.0	0	2	66.7	22	1.0	67	4	133.3	42	1.0	20
<b>Female, Other Eligibles</b>															
All Ages	1,137	33.6	12,222	0.9	99	1,500	44.3	16,332	0.8	57	1,717	50.7	18,234	0.7	36
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	76	30.0	811	0.8	112	109	43.1	1,242	0.9	66	141	55.7	1,503	0.9	50
75-84	362	35.8	3,828	0.9	101	451	44.6	4,898	0.8	52	534	52.8	5,820	0.8	39
85 and older	699	32.9	7,583	0.9	97	940	44.3	10,192	0.8	58	1,042	49.1	10,911	0.7	33
<b>Male</b>															
All Males	273	28.8	2,828	0.9	107	442	46.6	4,654	0.8	56	416	43.8	4,159	0.7	38
<b>Male, Disabled</b>															
All Ages	15	14.3	148	0.9	210	56	53.3	633	0.9	62	51	48.6	563	1.3	85
64 or younger	15	14.9	148	0.9	210	54	53.5	609	0.9	61	50	49.5	551	1.3	86
65-74	0	0.0	0	0.0	0	2	66.7	24	1.0	81	1	33.3	12	1.1	39
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Male, Other Eligibles</b>															
All Ages	258	30.6	2,680	0.9	101	386	45.7	4,021	0.8	55	365	43.2	3,596	0.6	31
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	37	22.3	427	0.9	93	79	47.6	904	0.8	61	91	54.8	967	0.7	37
75-84	115	34.2	1,116	0.9	101	157	46.7	1,637	0.8	57	124	36.9	1,232	0.5	26
85 and older	106	31.0	1,137	0.9	104	150	43.9	1,480	0.8	49	150	43.9	1,397	0.6	30
<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 New Hampshire, released by CMS in 10/2008. 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 2,303 beneficiaries who were in nursing facilities for part of their enrollment and their 19,887 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, NEW HAMPSHIRE, 2005

Beneficiary Characteristics	ANTICONVULSANT					ANTIASTHMATIC					ANTIDIABETIC				
	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>1,162</b>	<b>26.0</b>	<b>12,511</b>	<b>1.1</b>	<b>\$63</b>	<b>1,817</b>	<b>40.7</b>	<b>19,545</b>	<b>0.6</b>	<b>\$37</b>	<b>1,410</b>	<b>31.6</b>	<b>15,190</b>	<b>1.1</b>	<b>\$43</b>
<b>Female</b>															
All Females	855	24.3	9,279	1.0	58	1,411	40.2	15,419	0.6	37	1,079	30.7	11,710	1.1	42
<b>Female, Disabled</b>															
All Ages	84	66.7	959	1.3	117	58	46.0	635	0.8	58	59	46.8	684	1.3	77
64 or younger	81	68.1	923	1.3	121	55	46.2	599	0.8	58	56	47.1	648	1.2	76
65-74	2	66.7	24	0.6	31	3	100.0	36	1.0	58	1	33.3	12	3.1	168
75-84	1	100.0	12	0.3	30	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	66.7	24	1.0	39
<b>Female, Other Eligibles</b>															
All Ages	771	22.8	8,320	1.0	52	1,353	40.0	14,784	0.6	37	1,020	30.1	11,026	1.1	40
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	132	52.2	1,493	1.2	88	126	49.8	1,408	0.6	46	115	45.5	1,257	1.1	46
75-84	283	28.0	3,038	1.1	53	453	44.8	4,893	0.6	41	407	40.3	4,312	1.1	41
85 and older	356	16.8	3,789	0.9	36	774	36.5	8,483	0.5	32	498	23.5	5,457	1.0	38
<b>Male</b>															
All Males	307	32.3	3,232	1.1	78	406	42.8	4,126	0.6	37	331	34.9	3,480	1.1	47
<b>Male, Disabled</b>															
All Ages	68	64.8	729	1.3	120	20	19.0	218	0.5	38	34	32.4	372	1.2	73
64 or younger	67	66.3	717	1.3	122	20	19.8	218	0.5	38	31	30.7	348	1.2	76
65-74	1	33.3	12	1.1	28	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	300.0	24	1.2	33
<b>Male, Other Eligibles</b>															
All Ages	239	28.3	2,503	1.1	65	386	45.7	3,908	0.6	37	297	35.2	3,108	1.1	44
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	73	44.0	808	1.2	99	81	48.8	903	0.6	41	72	43.4	844	1.2	58
75-84	108	32.1	1,134	1.0	52	160	47.6	1,575	0.6	37	138	41.1	1,349	1.0	41
85 and older	58	17.0	561	1.0	44	145	42.4	1,430	0.6	35	87	25.4	915	1.1	35
<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 New Hampshire, released by CMS in 10/2008. 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 2,303 beneficiaries who were in nursing facilities for part of their enrollment and their 19,887 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.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, NEW HAMPSHIRE, 2005

Beneficiary Characteristics	ANTIHYPERTENSIVE					DERMATOLOGICAL					All-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$		
<b>All</b>	<b>841</b>	<b>18.9</b>	<b>8,998</b>	<b>0.8</b>	<b>\$72</b>	<b>5,957</b>	<b>133.5</b>	<b>66,747</b>	<b>0.3</b>	<b>\$8</b>	<b>4,461</b>	<b>45,732</b>
<b>Female</b>												
All Females	625	17.8	6,777	0.8	70	4,549	129.5	51,283	0.3	8	3,512	36,580
<b>Female, Disabled</b>												
All Ages	30	23.8	351	1.0	91	209	165.9	2,421	0.3	8	126	1,417
64 or younger	29	24.4	339	1.0	91	191	160.5	2,205	0.3	9	119	1,335
65-74	1	33.3	12	1.1	104	14	466.7	168	0.2	4	3	36
75-84	0	0.0	0	0.0	0	2	200.0	24	0.1	7	1	12
85 and older	0	0.0	0	0.0	0	2	66.7	24	0.1	0	3	34
<b>Female, Other Eligibles</b>												
All Ages	595	17.6	6,426	0.8	69	4,340	128.2	48,862	0.3	8	3,386	35,163
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	68	26.9	770	0.9	80	385	152.2	4,411	0.3	9	253	2,689
75-84	257	25.4	2,760	0.8	70	1,324	131.0	14,954	0.3	10	1,011	10,495
85 and older	270	12.7	2,896	0.8	65	2,631	124.0	29,497	0.3	7	2,122	21,979
<b>Male</b>												
All Males	216	22.8	2,221	0.9	78	1,408	148.4	15,464	0.3	7	949	9,152
<b>Male, Disabled</b>												
All Ages	28	26.7	291	0.9	85	182	173.3	2,045	0.2	6	105	1,138
64 or younger	27	26.7	283	0.9	86	177	175.2	1,985	0.3	6	101	1,094
65-74	0	0.0	0	0.0	0	5	166.7	60	0.1	5	3	36
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	1	100.0	8	1.1	41	0	0.0	0	0.0	0	1	8
<b>Male, Other Eligibles</b>												
All Ages	188	22.3	1,930	0.9	77	1,226	145.3	13,419	0.3	7	844	8,014
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	47	28.3	528	0.8	81	275	165.7	3,095	0.3	9	166	1,709
75-84	102	30.4	1,026	0.9	78	475	141.4	5,181	0.3	7	336	3,160
85 and older	39	11.4	376	0.8	68	476	139.2	5,143	0.3	6	342	3,145
<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 New Hampshire, released by CMS in 10/2008. 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 2,303 beneficiaries who were in nursing facilities for part of their enrollment and their 19,887 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.medspan.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>  
 NEW HAMPSHIRE, 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>15,570</b>	<b>68.4</b>	<b>13.5</b>	<b>308,209</b>	<b>\$117</b>	<b>\$2,656,995</b>	<b>\$9</b>	<b>3.4</b>	<b>22,760</b>
<b>Age</b>									
5 and younger	3	100.0	24.3	73	693	2,080	28	16.4	3
6-14	2	66.7	8.7	26	65	196	8	0.8	3
15-20	19	39.6	4.9	236	53	2,545	11	1.5	48
21-44	2,850	54.0	5.5	29,076	74	392,972	14	2.2	5,275
45-64	4,035	66.8	10.4	62,719	124	746,576	12	2.7	6,044
65-74	2,027	62.2	11.9	38,648	98	317,718	8	3.2	3,258
75-84	2,857	74.8	18.1	69,220	142	543,541	8	4.7	3,819
85 and older	3,777	87.6	25.1	108,211	151	651,367	6	5.7	4,310
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
<b>Basis of Eligibility<sup>c</sup></b>									
Aged	8,604	76.1	19.0	215,037	133	1,503,917	7	4.6	11,299
Disabled	6,326	61.1	8.5	87,961	103	1,066,658	12	2.5	10,359
Adults	632	57.9	4.7	5,112	77	84,460	17	2.8	1,092
Children	8	80.0	9.9	99	196	1,960	20	2.9	10
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
<b>Gender</b>									
Female	10,986	73.7	15.5	231,883	134	2,004,566	9	3.9	14,914
Male	4,584	58.4	9.7	76,326	83	652,429	9	2.5	7,846
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
<b>Race</b>									
White	15,193	68.8	13.7	302,396	118	2,597,910	9	3.4	22,075
African American	105	55.6	7.5	1,425	120	22,722	16	3.8	189
Other/unknown	272	54.8	8.8	4,388	73	36,363	8	2.7	496
<b>Use of Nursing Facilities<sup>d</sup></b>									
Entire year	4,217	94.5	33.0	147,413	210	938,514	6	5.5	4,461
Part year	2,091	90.8	19.3	44,339	131	300,657	7	4.8	2,303
None	9,262	57.9	7.3	116,457	89	1,417,824	12	2.6	15,996
<b>Maintenance Assistance Status</b>									
Cash	2,322	64.5	9.3	33,463	90	323,681	10	2.5	3,602
Medically needy	5,851	72.6	15.4	123,848	126	1,016,491	8	3.7	8,059
Poverty related	616	42.9	3.4	4,944	31	44,034	9	2.5	1,437
Other/unknown	6,781	70.2	15.1	145,954	132	1,272,789	9	3.5	9,662

Source: Data for this table are from the MAX 2005 file for New Hampshire, released by CMS in 10/2008. 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>  
 NEW HAMPSHIRE, 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>1.3</b>	<b>\$11</b>	<b>\$9</b>	<b>\$0</b>	<b>\$3</b>	<b>233,568</b>
<b>Age</b>						
5 and younger	2.4	69	28	0	9	30
6-14	0.7	5	8	0	0	36
15-20	0.4	5	11	0	3	543
21-44	0.5	7	14	0	3	56,179
45-64	1.0	12	12	0	4	64,820
65-74	1.2	10	8	0	3	33,025
75-84	1.8	14	8	0	2	37,749
85 and older	2.6	16	6	0	2	41,186
Unknown	0.0	0	0	0	0	0
<b>Basis of Eligibility<sup>c</sup></b>						
Aged	1.9	14	7	0	2	111,115
Disabled	0.8	10	12	0	3	111,844
Adults	0.5	8	17	0	4	10,506
Children	1.0	19	20	0	0	103
Unknown	0.0	0	0	0	0	0
<b>Gender</b>						
Female	1.5	13	9	0	3	153,962
Male	1.0	8	9	0	3	79,606
Unknown	0.0	0	0	0	0	0
<b>Race</b>						
White	1.3	11	9	0	3	226,662
African American	0.7	12	16	0	2	1,929
Other/unknown	0.9	7	8	0	1	4,977
<b>Use of Nursing Facilities<sup>d</sup></b>						
Entire year	3.2	21	6	0	3	45,732
Part year	2.2	15	7	0	2	19,887
None	0.7	8	12	0	3	167,949
<b>Maintenance Assistance Status</b>						
Cash	0.8	8	10	0	3	40,679
Medically needy	1.6	13	8	0	3	76,682
Poverty related	0.4	3	9	0	1	12,998
Other/unknown	1.4	12	9	0	3	103,209

Source: Data for this table are from the MAX 2005 file for New Hampshire, released by CMS in 10/2008. 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>  
 NEW HAMPSHIRE, 2005

Drug Category	Number of Users	Rx \$ per User	Total Rx \$	Rx \$ as a Percentage of All Part D		Number Rx as a Percentage of All Part D	
				Excluded Rx \$	Total Number Rx. \$ per Rx	Excluded Rx	
<b>All</b>	<b>24,618</b>	<b>\$108</b>	<b>\$2,656,995</b>	<b>100.0</b>	<b>308,209</b>	<b>\$9</b>	<b>100.0</b>
Anorexia or weight loss/gain	9	277	2,490	0.1	35	71	0.0
Fertility drugs	0	0	0	0.0	0	0	0.0
Drugs for cosmetic purposes	20	13	262	0.0	34	8	0.0
Cough and cold medications	1,548	67	103,140	3.9	3,718	28	1.2
Vitamins and minerals	3,303	103	339,658	12.8	21,812	16	7.1
Non-prescription drugs	11,913	109	1,295,960	48.8	223,677	6	72.6
Barbiturates	199	88	17,488	0.7	2,251	8	0.7
Benzodiazepines	7,163	92	658,494	24.8	54,866	12	17.8
Other Part D Excl Rx Drugs	463	517	239,503	9.0	1,816	132	0.6

Source: Data for this table are from the MAX 2005 file for New Hampshire, released by CMS in 10/2008. 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.

Benef(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>  
 NEW HAMPSHIRE, 2005

Total Number of Dual Eligible Beneficiaries: 22,760  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries: \$78,305,307  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary: \$3,440

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	2,266	10.0	\$0	0.0
1-500	3,836	16.9	769,570	1.0
501-1,000	2,102	9.2	1,565,205	2.0
1,001-1,500	1,691	7.4	2,098,549	2.7
1,501-2,000	1,422	6.2	2,483,944	3.2
2,001-2,500	1,250	5.5	2,810,078	3.6
2,501-3,000	1,190	5.2	3,259,278	4.2
3,001-3,500	1,037	4.6	3,364,328	4.3
3,501-4,000	957	4.2	3,594,277	4.6
4,001-4,500	815	3.6	3,462,836	4.4
4,501-5,000	747	3.3	3,540,225	4.5
5,001-5,500	627	2.8	3,286,556	4.2
5,501-6,000	571	2.5	3,277,681	4.2
6,001-6,500	493	2.2	3,083,621	3.9
6,501-7,000	476	2.1	3,207,297	4.1
7,001-7,500	374	1.6	2,714,408	3.5
7,501-8,000	321	1.4	2,486,724	3.2
8,001-8,500	296	1.3	2,438,496	3.1
8,501-9,000	259	1.1	2,258,912	2.9
9,001-9,500	246	1.1	2,275,599	2.9
9,501-10,000	188	0.8	1,830,624	2.3
10,001+	1,596	7.0	24,497,099	31.3

Source: Data for this table are from the MAX 2005 file for New Hampshire, released by CMS in 10/2008. 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>  
 NEW HAMPSHIRE, 2005

Total Number of Disabled Dual Eligible Beneficiaries, Age < 65: 10,279  
 Total Pharmacy Reimbursement for Disabled Dual Eligible Beneficiaries, Age < 65: \$42,243,191  
 Mean Pharmacy Reimbursement per Disabled Dual Eligible Beneficiary, Age < 65: \$4,109

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Disabled Dual Beneficiaries,		Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
		Age < 65	Pharmacy Reimbursement		
\$0	1,118	10.9	0	0	0.0
1-500	1,704	16.6	321,358	0.8	
501-1,000	836	8.1	623,446	1.5	
1,001-1,500	657	6.4	817,329	1.9	
1,501-2,000	558	5.4	974,715	2.3	
2,001-2,500	464	4.5	1,040,564	2.5	
2,501-3,000	445	4.3	1,216,396	2.9	
3,001-3,500	392	3.8	1,270,949	3.0	
3,501-4,000	397	3.9	1,492,553	3.5	
4,001-4,500	314	3.1	1,336,488	3.2	
4,501-5,000	321	3.1	1,522,630	3.6	
5,001-5,500	251	2.4	1,317,574	3.1	
5,501-6,000	274	2.7	1,572,233	3.7	
6,001-6,500	235	2.3	1,473,662	3.5	
6,501-7,000	229	2.2	1,541,154	3.6	
7,001-7,500	198	1.9	1,436,154	3.4	
7,501-8,000	177	1.7	1,369,801	3.2	
8,001-8,500	153	1.5	1,261,547	3.0	
8,501-9,000	151	1.5	1,316,034	3.1	
9,001-9,500	135	1.3	1,248,855	3.0	
9,501-10,000	121	1.2	1,178,467	2.8	
10,001+	1,149	11.2	17,911,282	42.4	

Source: Data for this table are from the MAX 2005 file for New Hampshire, released by CMS in 10/2008. 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>  
 NEW HAMPSHIRE, 2005

Total Number of Dual Eligible Beneficiaries, Age 65+: 11,387  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65+: \$32,943,558  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65+: \$2,893

Annual Pharmacy Reimbursement per Beneficiary	Percent of Dual Beneficiaries, Age 65		Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
	Number of Beneficiaries	+		
\$0	1,033	9.1	0	0.0
1-500	1,835	16.1	397,396	1.2
501-1,000	1,137	10.0	845,818	2.6
1,001-1,500	961	8.4	1,190,254	3.6
1,501-2,000	795	7.0	1,388,047	4.2
2,001-2,500	733	6.4	1,650,791	5.0
2,501-3,000	708	6.2	1,941,273	5.9
3,001-3,500	608	5.3	1,973,135	6.0
3,501-4,000	528	4.6	1,981,906	6.0
4,001-4,500	471	4.1	1,998,884	6.1
4,501-5,000	394	3.5	1,866,033	5.7
5,001-5,500	358	3.1	1,874,153	5.7
5,501-6,000	278	2.4	1,597,270	4.8
6,001-6,500	244	2.1	1,522,362	4.6
6,501-7,000	232	2.0	1,564,918	4.8
7,001-7,500	161	1.4	1,168,272	3.5
7,501-8,000	136	1.2	1,054,776	3.2
8,001-8,500	137	1.2	1,127,561	3.4
8,501-9,000	103	0.9	898,978	2.7
9,001-9,500	101	0.9	933,283	2.8
9,501-10,000	60	0.5	583,902	1.8
10,001+	374	3.3	5,384,546	16.3

Source: Data for this table are from the MAX 2005 file for New Hampshire, released by CMS in 10/2008. 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>  
 NEW HAMPSHIRE, 2005

Total Number of Dual Eligible Beneficiaries, Age 65-74: 3,258  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65-74: \$9,901,678  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65-74: \$3,039

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age		Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
		65-74			
\$0	464	14.2		0	0.0
1-500	507	15.6		106,228	1.1
501-1,000	277	8.5		209,234	2.1
1,001-1,500	226	6.9		276,830	2.8
1,501-2,000	188	5.8		326,166	3.3
2,001-2,500	201	6.2		454,246	4.6
2,501-3,000	174	5.3		473,425	4.8
3,001-3,500	164	5.0		531,449	5.4
3,501-4,000	131	4.0		492,475	5.0
4,001-4,500	130	4.0		549,982	5.6
4,501-5,000	112	3.4		530,437	5.4
5,001-5,500	92	2.8		481,580	4.9
5,501-6,000	71	2.2		406,480	4.1
6,001-6,500	64	2.0		400,698	4.0
6,501-7,000	60	1.8		404,700	4.1
7,001-7,500	46	1.4		332,893	3.4
7,501-8,000	52	1.6		404,774	4.1
8,001-8,500	53	1.6		437,142	4.4
8,501-9,000	30	0.9		261,992	2.6
9,001-9,500	35	1.1		323,707	3.3
9,501-10,000	25	0.8		242,617	2.5
10,001+	156	4.8		2,254,623	22.8

Source: Data for this table are from the MAX 2005 file for New Hampshire, released by CMS in 10/2008. 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>  
 NEW HAMPSHIRE, 2005

Total Number of Dual Eligible Beneficiaries, Age 75-84: 3,819  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 75-84: \$11,621,425  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 75-84: \$3,043

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 75-84	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	349	9.1	0	0.0
1-500	549	14.4	115,349	1.0
501-1,000	360	9.4	270,839	2.3
1,001-1,500	297	7.8	369,645	3.2
1,501-2,000	265	6.9	462,740	4.0
2,001-2,500	247	6.5	552,195	4.8
2,501-3,000	254	6.7	699,053	6.0
3,001-3,500	209	5.5	679,498	5.8
3,501-4,000	190	5.0	713,416	6.1
4,001-4,500	178	4.7	757,245	6.5
4,501-5,000	137	3.6	650,256	5.6
5,001-5,500	131	3.4	685,620	5.9
5,501-6,000	93	2.4	536,138	4.6
6,001-6,500	87	2.3	540,855	4.7
6,501-7,000	84	2.2	565,476	4.9
7,001-7,500	64	1.7	464,538	4.0
7,501-8,000	42	1.1	325,047	2.8
8,001-8,500	50	1.3	410,718	3.5
8,501-9,000	36	0.9	314,567	2.7
9,001-9,500	46	1.2	424,944	3.7
9,501-10,000	24	0.6	234,122	2.0
10,001+	127	3.3	1,849,164	15.9

Source: Data for this table are from the MAX 2005 file for New Hampshire, released by CMS in 10/2008. 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>  
 NEW HAMPSHIRE, 2005

Total Number of Dual Eligible Beneficiaries, Age 85+: 4,310  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 85+: \$11,420,455  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 85+: \$2,649

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 85		Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
			+		
\$0	220		5.1	0	0.0
1-500	779		18.1	175,819	1.5
501-1,000	500		11.6	365,745	3.2
1,001-1,500	438		10.2	543,779	4.8
1,501-2,000	342		7.9	599,141	5.2
2,001-2,500	285		6.6	644,350	5.6
2,501-3,000	280		6.5	768,795	6.7
3,001-3,500	235		5.5	762,188	6.7
3,501-4,000	207		4.8	776,015	6.8
4,001-4,500	163		3.8	691,657	6.1
4,501-5,000	145		3.4	685,340	6.0
5,001-5,500	135		3.1	706,953	6.2
5,501-6,000	114		2.6	654,652	5.7
6,001-6,500	93		2.2	580,809	5.1
6,501-7,000	88		2.0	594,742	5.2
7,001-7,500	51		1.2	370,841	3.2
7,501-8,000	42		1.0	324,955	2.8
8,001-8,500	34		0.8	279,701	2.4
8,501-9,000	37		0.9	322,419	2.8
9,001-9,500	20		0.5	184,632	1.6
9,501-10,000	11		0.3	107,163	0.9
10,001+	91		2.1	1,280,759	11.2

Source: Data for this table are from the MAX 2005 file for New Hampshire, released by CMS in 10/2008. 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, NEW HAMPSHIRE, 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>22,760</b>	<b>11,299</b>	<b>10,359</b>	<b>1,092</b>	<b>10</b>	<b>0</b>	<b>233,568</b>	<b>111,115</b>	<b>111,844</b>	<b>10,506</b>	<b>103</b>	<b>0</b>
<b>Age</b>												
5 and younger	3	0	1	0	2	0	30	0	12	0	18	0
6-14	3	0	0	0	3	0	36	0	0	0	36	0
15-20	48	0	43	0	5	0	543	0	494	0	49	0
21-44	5,275	0	4,432	843	0	0	56,179	0	48,114	8,065	0	0
45-64	6,044	0	5,803	241	0	0	64,820	0	62,446	2,374	0	0
65-74	3,258	3,188	62	8	0	0	33,025	32,381	577	67	0	0
75-84	3,819	3,808	11	0	0	0	37,749	37,626	123	0	0	0
85 and older	4,310	4,303	7	0	0	0	41,186	41,108	78	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
<b>Gender</b>												
Female	14,914	8,653	5,411	845	5	0	153,962	86,837	58,724	8,352	49	0
Male	7,846	2,646	4,948	247	5	0	79,606	24,278	53,120	2,154	54	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
<b>Race</b>												
White	22,075	10,968	10,060	1,039	8	0	226,662	107,806	108,783	9,994	79	0
African American	189	46	127	16	0	0	1,929	458	1,314	157	0	0
Other/unknown	496	285	172	37	2	0	4,977	2,851	1,747	355	24	0
<b>Use of Nursing Facilities<sup>c</sup></b>												
Entire year	4,461	4,230	231	0	0	0	45,732	43,177	2,555	0	0	0
Part year	2,303	2,090	212	1	0	0	19,887	17,637	2,238	12	0	0
None	15,996	4,979	9,916	1,091	10	0	167,949	50,301	107,051	10,494	103	0
<b>Maintenance Assistance Status</b>												
Cash	3,602	1,055	2,490	56	1	0	40,679	11,964	28,237	471	7	0
Medically needy	8,059	4,824	2,583	652	0	0	76,682	43,999	26,248	6,435	0	0
Poverty related	1,437	603	769	62	3	0	12,998	5,353	7,164	451	30	0
Other/unknown	9,662	4,817	4,517	322	6	0	103,209	49,799	50,195	3,149	66	0
<b>Dual Status<sup>d</sup></b>												
Full dual, all year	20,450	10,399	9,050	991	10	0	211,094	102,586	98,933	9,472	103	0
Full dual, part year	2,310	900	1,309	101	0	0	22,474	8,529	12,911	1,034	0	0
<b>Managed Care (MC) Status</b>												
Fee-for-service (FFS) all year	22,760	11,299	10,359	1,092	10	0	233,568	111,115	111,844	10,506	103	0
FFS part year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
FFS part year, no Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
MC all year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
MC all year, no Rx claims	0	0	0	0	0	0	0	0	0	0	0	0

Source: Data for this table are from the MAX 2005 file for New Hampshire, released by CMS in 10/2008. 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, NEW HAMPSHIRE, 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>22,760</b>	<b>233,568</b>	<b>22,760</b>	<b>233,568</b>	<b>0</b>	<b>0</b>
Fee-for-service (FFS) all year	22,760	233,568	22,760	233,568	0	0
FFS part year, with Rx claims	0	0	0	0	0	0
FFS part year, with no Rx claims	0	0	0	0	0	0
Managed care (MC) all year, with Rx claims	0	0	0	0	0	0
MC all year, with no Rx claims	0	0	0	0	0	0

Source: Data for this table are from the MAX 2005 file for New Hampshire, released by CMS in 10/2008. 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