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

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TABLE D.2
CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a, b}
DUAL ELIGIBLE BENEFICIARIES, NEW JERSEY, 2005

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown
All	140,537	71,722	68,425	350	22	18	1,483,796	733,035	748,990	1,404	187	180
Age												
5 and younger	8	0	5	0	3	0	83	0	53	0	30	0
6-14	13	0	10	0	3	0	120	0	95	0	25	0
15-20	182	0	170	1	11	0	1,787	0	1,694	1	92	0
21-44	16,867	0	16,609	253	4	1	178,789	0	177,720	1,027	30	12
45-64	26,613	15	26,502	82	1	13	289,477	128	288,886	314	10	139
65-74	35,886	19,068	16,801	13	0	4	382,626	195,450	187,086	61	0	29
75-84	35,419	28,411	7,007	1	0	0	379,374	300,234	79,139	1	0	0
85 and older	25,549	24,228	1,321	0	0	0	251,540	237,223	14,317	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	92,938	52,954	39,705	249	12	18	983,465	544,993	437,186	1,009	97	180
Male	47,599	18,768	28,720	101	10	0	500,331	188,042	311,804	395	90	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	71,699	38,075	33,426	171	14	13	746,779	378,606	367,265	653	122	133
African American	27,149	9,749	17,270	122	4	4	291,827	102,818	188,472	469	33	35
Other/unknown	41,689	23,898	17,729	57	4	1	445,190	251,611	193,253	282	32	12
Use of Nursing Facilities^c												
Entire year	21,823	17,170	4,653	0	0	0	221,054	169,447	51,607	0	0	0
Part year	11,534	8,992	2,540	2	0	0	110,750	84,354	26,388	8	0	0
None	107,180	45,560	61,232	348	22	18	1,151,992	479,234	670,995	1,396	187	180
Maintenance Assistance Status												
Cash	67,550	29,322	38,095	131	2	0	737,015	317,775	418,750	487	3	0
Medically needy	20	11	9	0	0	0	172	93	79	0	0	0
Poverty-related	33,609	14,489	19,026	69	7	18	361,879	153,922	207,426	299	52	180
Other/unknown	39,358	27,900	11,295	150	13	0	384,730	261,245	122,735	618	132	0
Dual Medicare Status^d												
Full dual, all year	139,345	70,839	68,127	340	21	18	1,472,287	724,493	746,113	1,324	177	180
Full dual, part year	1,192	883	298	10	1	0	11,509	8,542	2,877	80	10	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	138,308	71,269	66,903	105	14	17	1,474,741	731,040	742,776	622	133	170
FFS part year, with Rx claims	2,011	428	1,415	160	7	1	8,288	1,897	5,808	529	44	10
FFS part year, no Rx claims	218	25	107	85	1	0	767	98	406	253	10	0

Source: Data for this table are from the MAX 2005 file for New Jersey, released by CMS in 2/2009. This table was produced on 04/23/2009.

a. Table D.2 includes the beneficiaries represented by Cell G of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

b. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services. The total includes some beneficiaries with unknown basis of eligibility and some whose age categories are not consistent with basis of eligibility.

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

d. The "Full dual, all year" group contains beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefits during all months of Medicaid enrollment in 2005. The "Full dual, part year" group contains beneficiaries who had such benefits for some, but not all, months of their enrollment. Refer to footnote g of Table 1 for more information about how we determined dual eligibility status.

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

TABLE D.3
ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC^{a, b}
DUAL ELIGIBLE BENEFICIARIES, NEW JERSEY, 2005

Beneficiary Characteristics	Percentage with at Least One Rx	Mean Number of Rx	Mean Rx \$	\$ per Rx	Mean \$, All Medicaid FFS \$ ^c	Rx \$ as a Percentage of All Medicaid FFS \$ ^d	Number of Beneficiaries
All	90.7	58.8	\$4,412	\$75	\$22,055	20.0	140,537
Age							
5 and younger	87.5	40.4	5,494	136	52,921	10.4	8
6-14	76.9	50.7	14,219	281	22,899	62.1	13
15-20	75.3	19.7	2,259	115	13,530	16.7	182
21-44	84.2	45.4	4,795	106	18,552	25.8	16,867
45-64	91.7	70.0	6,048	86	25,606	23.6	26,613
65-74	89.8	54.3	3,972	73	14,321	27.7	35,886
75-84	92.3	60.6	4,117	68	21,475	19.2	35,419
85 and older	93.4	59.9	3,489	58	32,386	10.8	25,549
Unknown	0.0	0.0	0	0	0	0.0	0
Basis of Eligibility^e							
Aged	90.8	54.5	3,547	65	22,120	16.0	71,722
Disabled	90.9	63.5	5,334	84	22,076	24.2	68,425
Adults	59.7	10.0	1,055	106	3,894	27.1	350
Children	68.2	27.1	3,966	146	28,794	13.8	22
Unknown	100.0	53.6	6,310	118	25,224	25.0	18
Gender							
Female	92.3	60.8	4,370	72	22,099	19.8	92,938
Male	87.7	54.9	4,493	82	21,968	20.5	47,599
Unknown	0.0	0.0	0	0	0	0.0	0
Race							
White	91.5	65.2	4,605	71	28,791	16.0	71,699
African American	89.5	54.0	4,514	84	19,061	23.7	27,149
Other/unknown	90.3	50.8	4,012	79	12,419	32.3	41,689
Use of Nursing Facilities^f							
Entire year	97.4	86.7	4,981	57	54,887	9.1	21,823
Part year	96.2	68.4	4,348	64	35,914	12.1	11,534
None	88.8	52.0	4,302	83	13,878	31.0	107,180
Maintenance Assistance Status							
Cash	89.7	51.1	4,273	84	12,304	34.7	67,550
Medically needy	80.0	26.7	2,308	87	19,764	11.7	20
Poverty related	90.8	51.4	4,683	91	11,305	41.4	33,609
Other/unknown	92.5	78.2	4,419	57	47,971	9.2	39,358

Source: Data for this table are from the MAX 2005 file for New Jersey, released by CMS in 2/2009. This table was produced on 04/23/2009.

a. Table D.3 includes beneficiaries represented by Cell G of Table 1.

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

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

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

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

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

Bene(s) = beneficiary (or beneficiaries); CMS = Centers for Medicare & Medicaid Services; FFS = fee-for-service; MAX = Medicaid Analytic Extract; OTC = over-the-counter; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.4
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a, b}
DUAL ELIGIBLE BENEFICIARIES, NEW JERSEY, 2005

Beneficiary Characteristics	Number of Rx, Percentage with:										Number	
	Mean Number of Rx	Mean Rx \$	Rx \$ as a Percentage of All Medicaid FFS \$ ^c	None						Mean \$, All Medicaid FFS \$ ^d	Beneficiaries	Benefit Months
				More than 0, but 1 or Less	More than 1, but 2 or Less	More than 2, but 5 or Less	More than 5, but 10 or Less	More than 10				
All	5.6	\$418	20.0	9.3	12.6	9.7	28.4	27.5	12.6	\$2,089	140,537	1,483,796
Age												
5 and younger	3.9	530	10.4	12.5	12.5	0.0	37.5	25.0	12.5	5,101	8	83
6-14	5.5	1,540	62.1	23.1	7.7	7.7	7.7	46.2	7.7	2,481	13	120
15-20	2.0	230	16.7	24.7	34.6	7.7	20.9	9.3	2.7	1,378	182	1,787
21-44	4.3	452	25.8	15.8	22.4	11.3	24.5	16.7	9.4	1,750	16,867	178,789
45-64	6.4	556	23.6	8.3	11.7	8.8	26.5	27.7	17.0	2,354	26,613	289,477
65-74	5.1	373	27.7	10.2	13.3	10.8	29.5	25.8	10.2	1,343	35,886	382,626
75-84	5.7	384	19.2	7.7	10.5	9.3	29.7	30.1	12.8	2,005	35,419	379,374
85 and older	6.1	354	10.8	6.6	8.5	8.4	29.5	33.4	13.6	3,289	25,549	251,540
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Basis of Eligibility^e												
Aged	5.3	347	16.0	9.2	11.8	10.1	29.6	28.1	11.2	2,164	71,722	733,035
Disabled	5.8	487	24.2	9.1	13.3	9.2	27.1	27.0	14.2	2,017	68,425	748,990
Adults	2.5	263	27.1	40.3	18.0	9.1	15.1	8.6	8.9	971	350	1,404
Children	3.2	467	13.8	31.8	18.2	0.0	22.7	22.7	4.5	3,388	22	187
Unknown	5.4	631	25.0	0.0	33.3	5.6	22.2	33.3	5.6	2,522	18	180
Gender												
Female	5.7	413	19.8	7.7	11.2	9.6	29.3	29.1	13.1	2,088	92,938	983,465
Male	5.2	427	20.5	12.3	15.2	9.9	26.5	24.4	11.7	2,090	47,599	500,331
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	6.3	442	16.0	8.5	10.8	8.5	26.7	29.4	15.9	2,764	71,699	746,779
African American	5.0	420	23.7	10.5	14.2	10.2	28.6	26.2	10.4	1,773	27,149	291,827
Other/unknown	4.8	376	32.3	9.7	14.5	11.3	31.0	25.1	8.5	1,163	41,689	445,190
Use of Nursing Facilities^f												
Entire year	8.6	492	9.1	2.6	3.6	4.7	22.5	39.6	27.1	5,419	21,823	221,054
Part year	7.1	453	12.1	3.8	6.3	6.8	27.5	37.0	18.7	3,740	11,534	110,750
None	4.8	400	31.0	11.2	15.1	11.0	29.6	24.0	9.1	1,291	107,180	1,151,992
Maintenance Assistance Status												
Cash	4.7	392	34.7	10.3	15.1	11.0	29.8	24.9	8.8	1,128	67,550	737,015
Medically needy	3.1	268	11.7	20.0	30.0	5.0	25.0	20.0	0.0	2,298	20	172
Poverty related	4.8	435	41.4	9.2	14.8	11.2	31.2	25.4	8.3	1,050	33,609	361,879
Other/unknown	8.0	452	9.2	7.5	6.3	6.0	23.4	33.8	23.0	4,907	39,358	384,730

Source: Data for this table are from the MAX 2005 file for New Jersey, released by CMS in 2/2009. This table was produced on 04/23/2009.

a. Table D.4 includes the beneficiaries represented by Cell G of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

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

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

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

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

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

TABLE D.5
AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC^{a, b, c}
DUAL ELIGIBLE BENEFICIARIES, NEW JERSEY, 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
All	5.6	\$418	\$75	2.7	\$322	\$121	0.2	\$15	\$72	2.7	\$81	\$30
Age												
5 and younger	3.9	530	136	2.2	481	219	0.3	19	61	1.3	29	22
6-14	5.5	1,540	281	2.8	1,470	517	0.2	15	86	2.5	56	23
15-20	2.0	230	115	0.9	197	208	0.1	4	51	1.0	29	30
21-44	4.3	452	106	2.1	353	172	0.2	24	109	2.0	75	38
45-64	6.4	556	86	3.1	426	139	0.3	26	95	3.1	104	34
65-74	5.1	373	73	2.6	292	113	0.2	11	59	2.3	69	30
75-84	5.7	384	68	2.8	298	107	0.2	10	52	2.7	77	29
85 and older	6.1	354	58	2.6	260	99	0.2	9	48	3.3	86	26
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility^d												
Aged	5.3	347	65	2.5	266	105	0.2	9	51	2.6	72	28
Disabled	5.8	487	84	2.8	376	135	0.2	21	86	2.8	90	33
Adults	2.5	263	106	1.2	216	181	0.1	10	111	1.2	37	31
Children	3.2	467	146	1.9	421	225	0.1	2	20	1.2	44	36
Unknown	5.4	631	118	2.4	520	220	0.1	9	65	2.9	101	36
Gender												
Female	5.7	413	72	2.7	316	116	0.2	14	67	2.8	83	30
Male	5.2	427	82	2.6	333	130	0.2	16	81	2.5	78	32
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Race												
White	6.3	442	71	2.9	331	116	0.2	17	75	3.2	94	30
African American	5.0	420	84	2.4	329	136	0.2	15	78	2.4	76	32
Other/unknown	4.8	376	79	2.5	300	121	0.2	12	61	2.1	64	31
Use of Nursing Facilities^e												
Entire year	8.6	492	57	3.6	353	99	0.2	11	49	4.8	128	27
Part year	7.1	453	64	3.0	332	109	0.2	10	56	3.9	111	28
None	4.8	400	83	2.5	315	128	0.2	16	77	2.2	69	32
Maintenance Assistance Status												
Cash	4.7	392	84	2.4	310	129	0.2	14	73	2.1	67	32
Medically needy	3.1	268	87	1.8	229	124	0.1	6	75	1.2	34	29
Poverty related	4.8	435	91	2.3	336	143	0.2	19	97	2.2	80	36
Other/unknown	8.0	452	57	3.5	331	95	0.2	13	50	4.3	109	26

Source: Data for this table are from the MAX 2005 file for New Jersey, released by CMS in 2/2009. This table was produced on 04/23/2009.

a. Table D.5 includes the beneficiaries represented by Cell G of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

c. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies combined. For information about this classification method, see Wolters Kluwer Health, <http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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

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

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

TABLE D.6
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d}
DUAL ELIGIBLE BENEFICIARIES, NEW JERSEY, 2005

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per Rx				Users ^e				
	Patented Brand-Name		Off-Patent Brand-Name		Patented Brand-Name		Off-Patent Brand-Name		Patented Brand-Name		Off-Patent Brand-Name		Total Number of Rx	Total Rx \$	Number	As a Percentage of Dual Benes	Number of Benefit Months
	Total	Generic	Total	Generic	Total	Generic	Total	Generic	Total	Generic	Total	Generic					
Anti-infective Agents	0.4	0.1	0.1	0.2	\$49	\$39	\$4	\$6	\$132	\$264	\$70	\$38	323,917	\$42,859,353	79,224	56.4	879,168
Biologicals	0.1	0.1	0.0	0.0	21	2	3	17	192	25	2,011	404	6,565	1,258,739	5,228	3.7	59,579
Antineoplastic Agents	0.5	0.1	0.0	0.4	111	68	0	42	220	632	314	107	46,459	10,218,384	8,864	6.3	92,115
Endocrine/Metabolic Drugs	1.1	0.4	0.1	0.6	65	49	4	12	60	110	51	21	790,793	47,447,048	66,619	47.4	732,184
Cardiovascular Agents	1.9	1.0	0.0	0.9	96	75	0	21	50	77	52	23	2,047,107	103,284,107	98,296	69.9	1,071,526
Respiratory Agents	0.8	0.5	0.0	0.3	52	43	2	6	69	94	63	23	537,164	36,801,812	64,037	45.6	712,687
Gastrointestinal Agents	0.9	0.5	0.0	0.3	78	67	0	11	92	130	55	33	669,854	61,573,337	71,889	51.2	786,960
Genitourinary Agents	0.5	0.4	0.0	0.1	37	33	1	4	70	82	70	32	145,742	10,226,421	24,652	17.5	272,968
CNS Drugs	1.5	0.8	0.0	0.7	136	110	4	22	92	143	156	32	1,181,461	108,728,506	73,361	52.2	799,014
Stimulants/Anti-obesity/Anorexia	0.5	0.4	0.0	0.1	77	72	1	4	155	191	146	32	13,078	2,026,867	2,387	1.7	26,400
Miscellaneous Psychological/Neurological Agents	0.8	0.8	0.0	0.0	120	118	0	2	146	147	58	100	148,382	21,654,580	16,776	11.9	179,856
Analgesics and Anesthetics	0.7	0.2	0.0	0.5	61	29	7	24	83	152	167	49	575,960	47,902,377	71,872	51.1	791,454
Neuromuscular Agents	1.2	0.5	0.1	0.7	76	44	4	28	63	96	68	40	529,687	33,326,572	39,785	28.3	439,559
Nutritional Products	0.6	0.0	0.1	0.4	9	1	2	6	15	24	16	14	283,239	4,323,288	44,027	31.3	484,324
Hematological Agents	0.9	0.4	0.0	0.4	104	95	1	8	121	239	42	18	373,301	45,116,502	39,981	28.4	433,810
Topical Products	0.7	0.3	0.0	0.3	45	34	1	10	68	100	68	33	563,451	38,528,664	77,402	55.1	861,821
Miscellaneous Products	0.4	0.2	0.0	0.2	103	84	8	12	280	443	263	79	16,252	4,546,403	4,020	2.9	43,961
Unknown Therapeutic Category	0.4	0.0	0.0	0.0	9	0	0	0	25	0	0	0	6,172	151,748	1,497	1.1	16,904
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.	8,258,584	619,974,708	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for New Jersey, released by CMS in 2/2009. This table was produced on 04/23/2009.

a. Table D.6 includes the beneficiaries represented by Cell G of Table 1. A beneficiary who used drugs from two or more categories was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

c. For information about these therapeutic categories, see Wolters Kluwer Health, <http://www.medspan.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 Jersey, 1.2 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, <http://www.medspan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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

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

Dual Eligible Beneficiaries

TABLE D.7
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, NEW JERSEY, 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	\$66,560,330	37,921	27.0	419,461	0.9	\$171	\$159
ULCER DRUGS	49,313,967	71,600	50.9	792,583	0.6	104	62
ANTIHYPERLIPIDEMIC	37,405,544	54,785	39.0	620,112	0.6	100	60
ANTIDIABETIC	29,190,663	58,043	41.3	650,197	0.6	70	45
ANTIDEPRESSANTS	27,927,604	55,474	39.5	607,844	0.7	65	46
ANTIHYPERTENSIVE	26,221,598	75,429	53.7	842,259	0.6	50	31
ANTICONVULSANT	25,635,532	32,995	23.5	367,127	1.1	66	70
ANTIVIRAL	25,034,618	9,378	6.7	105,211	0.5	513	238
ANALGESICS - Narcotic	24,663,027	70,987	50.5	788,350	0.4	78	31
DERMATOLOGICAL	24,579,879	114,103	81.2	1,296,559	0.2	76	19
Total	336,532,762	580,715		6,489,703	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for New Jersey, released by CMS in 2/2009. This table was produced on 04/23/2009.

a. Table D.7 includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2005. A beneficiary who used drugs from two or more groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2005. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispain.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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

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^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, NEW JERSEY, 2005

Beneficiary Characteristics	All Top 10 Drug Groups			ANTIPSYCHOTICS					ULCER DRUGS				
	Number of Rx	Rx \$	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean \$ 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 \$ per Benefit Month	
All	3,687,261	\$336,532,762	37,921	27.0	419,461	0.9	\$159	71,600	50.9	792,583	0.6	\$62	
Female													
All Females	2,429,478	210,232,090	22,726	24.5	249,608	0.8	134	51,061	54.9	566,052	0.6	63	
Female, Disabled													
All Ages	1,242,291	120,855,383	12,955	32.6	147,912	0.9	164	22,709	57.2	260,322	0.6	63	
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
6-14	4	528	0	0.0	0	0.0	0	2	100.0	12	0.2	16	
15-20	474	52,249	13	19.7	156	0.3	33	21	31.8	237	0.3	25	
21-44	190,827	22,799,681	3,689	50.7	41,890	0.9	172	2,599	35.8	29,616	0.5	56	
45-64	519,445	52,540,530	5,809	40.1	66,528	1.0	177	8,355	57.7	95,293	0.6	64	
65-74	348,181	30,308,134	2,070	18.2	23,768	0.9	139	7,409	65.2	85,522	0.5	63	
75-84	155,626	13,041,070	1,095	20.3	12,486	0.8	132	3,590	66.7	41,453	0.6	64	
85 and older	27,734	2,113,191	279	24.2	3,084	0.7	99	733	63.6	8,189	0.6	64	
Female, Other Eligibles													
All Ages	1,187,187	89,376,707	9,771	18.4	101,696	0.7	89	28,352	53.3	305,730	0.6	63	
5 and younger	27	2,716	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
6-14	42	11,491	0	0.0	0	0.0	0	2	66.7	24	0.3	9	
15-20	87	12,863	1	16.7	12	1.6	466	0	0.0	0	0.0	0	
21-44	778	83,858	28	14.4	176	0.6	103	20	10.3	95	0.5	64	
45-64	1,003	100,438	9	11.7	80	0.7	169	28	36.4	234	0.6	88	
65-74	232,595	19,505,068	1,033	8.4	11,098	0.7	108	5,898	48.0	65,547	0.5	58	
75-84	497,346	38,535,105	3,579	17.6	38,077	0.7	93	11,428	56.3	126,493	0.6	63	
85 and older	455,309	31,125,168	5,121	25.2	52,253	0.7	83	10,976	53.9	113,337	0.7	65	
Male													
All Males	1,257,783	126,300,672	15,195	31.9	169,853	1.1	196	20,539	43.2	226,531	0.6	61	
Male, Disabled													
All Ages	887,571	97,978,640	12,436	43.3	141,875	1.1	215	11,711	40.8	132,712	0.7	62	
5 and younger	8	169	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
6-14	103	8,908	1	12.5	12	0.2	28	2	25.0	24	0.6	107	
15-20	903	122,076	33	31.7	358	0.6	125	17	16.3	189	0.4	29	
21-44	234,970	30,894,866	5,146	55.1	58,555	1.0	214	2,459	26.3	28,020	0.7	59	
45-64	439,794	49,465,107	5,799	48.2	66,386	1.2	229	5,221	43.4	59,004	0.7	63	
65-74	162,116	13,529,377	1,091	20.1	12,393	1.0	174	2,922	53.7	33,204	0.6	63	
75-84	45,742	3,669,393	330	20.3	3,791	0.9	140	996	61.3	11,281	0.6	67	
85 and older	3,935	288,744	36	21.3	380	0.9	140	94	55.6	990	0.7	68	

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^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, NEW JERSEY, 2005

All Top 10 Drug Groups				ANTIPSYCHOTICS				ULCER DRUGS				
Beneficiary Characteristics	Number of Rx	Rx \$	Number of Users	Users as % of Dual Benes	Number of	Mean	Mean \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of	Mean	Mean \$ per Benefit Month
					Benefit Months Among Users	of Rx per Benefit Month				Benefit Months Among Users	of Rx per Benefit Month	
Male, Other Eligibles												
All Ages	370,212	28,322,032	2,759	14.6	27,978	0.7	97	8,828	46.8	93,819	0.6	59
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	45	5,444	3	50.0	36	0.4	58	0	0.0	0	0.0	0
21-44	109	18,262	6	9.5	20	0.8	261	5	7.9	30	0.5	71
45-64	257	24,003	2	5.9	6	1.0	284	7	20.6	62	0.6	60
65-74	119,504	9,698,898	620	9.1	6,532	0.8	112	2,813	41.3	30,475	0.5	55
75-84	177,334	13,541,266	1,269	15.7	13,141	0.7	99	4,019	49.6	43,369	0.6	62
85 and older	72,963	5,034,159	859	22.2	8,243	0.7	80	1,984	51.2	19,883	0.6	61
Unknown	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2005 file for New Jersey, released by CMS in 2/2009. This table was produced on 04/23/2009.

a. Table D.7A includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2005. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2005. For information about these drug groups, see Wolters Kluwer Health, <http://www.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^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, NEW JERSEY, 2005

Beneficiary Characteristics	ANTIHYPERTENSIVE					ANTIDIABETIC					ANTIDEPRESSANTS				
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	54,785	39.0	620,112	0.6	\$60	58,043	41.3	650,197	0.6	\$45	55,474	39.5	607,844	0.7	\$46
Female															
All Females	37,451	40.3	425,044	0.6	60	39,530	42.5	444,292	0.6	45	39,367	42.4	430,819	0.7	46
Female, Disabled															
All Ages	17,615	44.4	203,686	0.6	60	19,739	49.7	226,273	0.6	47	19,540	49.2	222,190	0.7	46
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	5	7.6	60	0.3	13	7	10.6	72	0.2	12	9	13.6	108	0.3	21
21-44	1,018	14.0	11,648	0.6	53	1,240	17.1	13,960	0.6	48	4,169	57.4	46,943	0.7	49
45-64	6,381	44.1	73,270	0.6	58	6,925	47.8	78,962	0.6	49	8,932	61.7	101,252	0.7	48
65-74	7,041	62.0	81,653	0.6	61	8,040	70.8	92,584	0.6	48	4,241	37.3	48,743	0.6	43
75-84	2,843	52.8	33,301	0.6	63	3,082	57.3	35,730	0.6	43	1,836	34.1	21,120	0.6	41
85 and older	327	28.4	3,754	0.6	62	445	38.6	4,965	0.7	42	353	30.6	4,024	0.7	42
Female, Other Eligibles															
All Ages	19,836	37.3	221,358	0.6	61	19,791	37.2	218,019	0.7	42	19,827	37.2	208,629	0.7	46
5 and younger	3	100.0	30	0.5	59	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	1	33.3	1	1.0	75	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	4	66.7	37	1.0	112
21-44	14	7.2	74	0.6	57	29	14.9	183	0.8	42	54	27.7	264	0.5	35
45-64	27	35.1	226	0.5	48	23	29.9	193	0.6	53	27	35.1	222	0.6	33
65-74	6,267	51.0	69,961	0.5	56	5,800	47.2	64,236	0.6	44	2,929	23.9	31,974	0.6	41
75-84	9,350	46.0	105,914	0.6	62	8,923	43.9	99,932	0.7	43	7,404	36.4	79,785	0.7	45
85 and older	4,174	20.5	45,152	0.7	65	5,016	24.6	53,475	0.7	37	9,409	46.2	96,347	0.8	48
Male															
All Males	17,334	36.4	195,068	0.6	61	18,513	38.9	205,905	0.6	46	16,107	33.8	177,025	0.7	46
Male, Disabled															
All Ages	9,980	34.7	114,164	0.7	60	10,411	36.3	117,957	0.7	48	11,015	38.4	124,408	0.7	47
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	2	25.0	24	0.4	33
15-20	7	6.7	81	0.2	23	3	2.9	36	0.8	94	14	13.5	156	0.6	37
21-44	1,777	19.0	20,353	0.6	52	1,457	15.6	16,462	0.7	50	3,773	40.4	42,562	0.7	48
45-64	4,577	38.0	52,112	0.7	60	4,697	39.0	52,870	0.7	49	5,187	43.1	58,597	0.8	49
65-74	2,864	52.6	32,946	0.6	64	3,331	61.2	38,070	0.7	48	1,547	28.4	17,537	0.7	42
75-84	722	44.4	8,312	0.7	64	877	53.9	10,007	0.6	44	449	27.6	5,096	0.7	43
85 and older	33	19.5	360	0.7	64	46	27.2	512	0.7	40	43	25.4	436	0.7	51

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^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, NEW JERSEY, 2005

Beneficiary Characteristics	ANTIHYPERLIPIDEMIC					ANTIDIABETIC					ANTIDEPRESSANTS				
	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	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
Male, Other Eligibles															
All Ages	7,354	39.0	80,904	0.6	62	8,102	42.9	87,948	0.6	42	5,092	27.0	52,617	0.7	43
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	16.7	2	0.5	38	0	0.0	0	0.0	0	1	16.7	12	0.3	18
21-44	6	9.5	32	0.4	28	5	7.9	14	0.6	41	5	7.9	14	0.8	48
45-64	4	11.8	28	0.4	33	10	29.4	98	0.6	55	5	14.7	14	0.6	29
65-74	3,048	44.8	33,482	0.6	59	3,290	48.3	35,654	0.6	44	1,259	18.5	13,552	0.6	40
75-84	3,430	42.4	38,261	0.6	64	3,719	45.9	41,229	0.6	41	2,316	28.6	24,381	0.7	43
85 and older	865	22.3	9,099	0.6	63	1,078	27.8	10,953	0.7	39	1,506	38.9	14,644	0.7	45
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2005 file for New Jersey, released by CMS in 2/2009. This table was produced on 04/23/2009.

a. Table D.7B includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2005. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2005. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispn.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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

Dual Eligible Beneficiaries

TABLE D.7C
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR SIXTH TO EIGHTH TOP DRUG GROUPS
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, NEW JERSEY, 2005

Beneficiary Characteristics	ANTIHYPERTENSIVE					ANTICONVULSANT					ANTIVIRAL				
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	75,429	53.7	842,259	0.6	\$31	32,995	23.5	367,127	1.1	\$70	9,378	6.7	105,211	0.5	\$238
Female															
All Females	51,925	55.9	580,819	0.6	32	20,874	22.5	231,824	1.0	64	5,033	5.4	56,870	0.4	162
Female, Disabled															
All Ages	21,593	54.4	248,017	0.6	32	12,902	32.5	146,845	1.1	79	3,230	8.1	36,901	0.5	233
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	50.0	6	0.2	49
15-20	7	10.6	78	0.3	16	24	36.4	248	0.6	82	4	6.1	39	0.4	299
21-44	1,271	17.5	14,319	0.6	23	3,167	43.6	35,797	1.2	104	927	12.8	10,454	0.5	267
45-64	7,161	49.5	81,661	0.6	30	5,824	40.2	66,117	1.2	85	1,598	11.0	18,287	0.5	273
65-74	8,447	74.4	97,495	0.6	33	2,573	22.6	29,620	0.8	50	494	4.3	5,701	0.3	118
75-84	3,996	74.3	46,419	0.6	33	1,146	21.3	13,131	0.8	47	177	3.3	2,084	0.2	52
85 and older	711	61.7	8,045	0.6	31	168	14.6	1,932	0.8	37	29	2.5	330	0.1	13
Female, Other Eligibles															
All Ages	30,332	57.0	332,802	0.6	32	7,972	15.0	84,979	0.7	38	1,803	3.4	19,969	0.1	31
5 and younger	1	33.3	10	0.5	64	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	1	33.3	12	1.2	43	0	0.0	0	0.0	0	3	100.0	36	0.5	295
15-20	1	16.7	1	1.0	66	3	50.0	36	0.7	79	0	0.0	0	0.0	0
21-44	19	9.7	87	0.5	25	23	11.8	99	0.8	96	9	4.6	56	0.7	264
45-64	28	36.4	268	0.5	28	13	16.9	121	0.4	53	7	9.1	55	0.5	162
65-74	7,575	61.7	83,792	0.6	32	1,586	12.9	17,294	0.6	40	381	3.1	4,319	0.2	75
75-84	13,071	64.3	146,715	0.6	33	3,392	16.7	36,859	0.7	39	682	3.4	7,746	0.1	23
85 and older	9,636	47.3	101,917	0.7	31	2,955	14.5	30,570	0.8	37	721	3.5	7,757	0.1	12
Male															
All Males	23,504	49.4	261,440	0.6	30	12,121	25.5	135,303	1.3	80	4,345	9.1	48,341	0.6	328
Male, Disabled															
All Ages	12,404	43.2	140,587	0.6	29	9,531	33.2	107,990	1.4	90	3,771	13.1	42,048	0.6	364
5 and younger	1	25.0	12	0.5	13	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	5	62.5	60	0.3	12	2	25.0	24	0.3	6	2	25.0	24	0.6	141
15-20	17	16.3	193	0.4	11	28	26.9	271	0.8	88	8	7.7	89	0.5	309
21-44	1,886	20.2	21,164	0.6	26	3,293	35.3	37,341	1.3	104	1,370	14.7	15,162	0.6	349
45-64	5,522	45.9	62,339	0.7	29	4,536	37.7	51,411	1.6	93	2,037	16.9	22,769	0.7	408
65-74	3,797	69.8	43,356	0.6	31	1,267	23.3	14,402	1.0	57	283	5.2	3,207	0.4	203
75-84	1,080	66.4	12,380	0.6	32	367	22.6	4,179	1.0	51	68	4.2	761	0.2	65
85 and older	96	56.8	1,083	0.6	32	38	22.5	362	0.9	46	3	1.8	36	0.3	18

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^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, NEW JERSEY, 2005

Beneficiary Characteristics	ANTIHYPERTENSIVE					ANTICONVULSANT					ANTIVIRAL				
	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
Male, Other Eligibles															
All Ages	11,100	58.8	120,853	0.6	30	2,590	13.7	27,313	0.8	41	574	3.0	6,293	0.2	82
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	3	50.0	36	0.4	59	0	0.0	0	0.0	0
21-44	4	6.3	9	0.4	22	4	6.3	11	0.5	37	3	4.8	9	0.4	636
45-64	13	38.2	59	0.6	15	6	17.6	38	0.7	38	4	11.8	17	0.4	308
65-74	4,131	60.7	44,778	0.6	30	793	11.7	8,547	0.7	43	183	2.7	2,027	0.4	175
75-84	5,187	64.1	57,648	0.6	30	1,180	14.6	12,722	0.8	41	263	3.2	2,947	0.2	45
85 and older	1,765	45.6	18,359	0.7	28	604	15.6	5,959	0.8	38	121	3.1	1,293	0.1	11
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2005 file for New Jersey, released by CMS in 2/2009. This table was produced on 04/23/2009.

a. Table D.7C includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2005. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2005. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispn.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

Ben(e)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^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, NEW JERSEY, 2005

Beneficiary Characteristics	ANALGESICS - Narcotic					DERMATOLOGICAL					Number of Beneficiaries	Number of Benefit Months
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month		
All	70,987	50.5	788,350	0.4	\$31	114,103	81.2	1,296,559	0.2	\$19	140,537	1,483,796
Female												
All Females	50,570	54.4	561,771	0.4	29	80,317	86.4	913,076	0.2	19	92,938	983,465
Female, Disabled												
All Ages	27,063	68.2	310,345	0.4	36	36,640	92.3	426,543	0.2	19	39,705	437,186
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	1	50.0	6	0.2	7	2	12
15-20	19	28.8	227	0.2	7	18	27.3	211	0.2	11	66	620
21-44	4,537	62.4	51,127	0.4	49	5,021	69.1	58,052	0.2	17	7,269	77,343
45-64	11,278	77.9	128,958	0.4	44	13,406	92.6	155,734	0.2	19	14,473	158,642
65-74	7,426	65.4	86,076	0.3	24	11,748	103.4	137,519	0.2	20	11,361	127,096
75-84	3,257	60.5	37,793	0.3	19	5,413	100.6	63,188	0.2	20	5,381	60,911
85 and older	546	47.4	6,164	0.4	19	1,033	89.7	11,833	0.3	19	1,152	12,550
Female, Other Eligibles												
All Ages	23,507	44.2	251,426	0.4	20	43,677	82.0	486,533	0.3	19	53,233	546,279
5 and younger	0	0.0	0	0.0	0	3	100.0	30	0.2	10	3	30
6-14	1	33.3	12	0.1	2	1	33.3	12	0.1	3	3	25
15-20	0	0.0	0	0.0	0	3	50.0	25	0.2	9	6	33
21-44	56	28.7	331	0.3	27	28	14.4	188	0.2	16	195	804
45-64	45	58.4	458	0.4	25	30	39.0	300	0.2	13	77	457
65-74	5,048	41.1	56,519	0.3	15	8,465	68.9	96,078	0.2	20	12,280	127,593
75-84	9,597	47.2	105,625	0.4	19	18,067	88.9	205,395	0.2	20	20,314	216,377
85 and older	8,760	43.0	88,481	0.5	24	17,080	83.9	184,505	0.3	18	20,355	200,960
Male												
All Males	20,417	42.9	226,579	0.4	38	33,786	71.0	383,483	0.3	18	47,599	500,331
Male, Disabled												
All Ages	13,994	48.7	158,651	0.4	47	19,582	68.2	226,641	0.3	18	28,720	311,804
5 and younger	1	25.0	12	0.2	2	0	0.0	0	0.0	0	4	41
6-14	0	0.0	0	0.0	0	9	112.5	104	0.3	10	8	83
15-20	18	17.3	183	0.1	1	43	41.3	509	0.3	15	104	1,074
21-44	3,967	42.5	44,990	0.4	49	4,438	47.5	51,391	0.2	17	9,340	100,377
45-64	6,548	54.4	74,060	0.4	60	8,457	70.3	97,600	0.3	18	12,029	130,244
65-74	2,614	48.1	29,838	0.4	24	4,877	89.7	56,586	0.3	20	5,440	59,990
75-84	778	47.8	8,866	0.3	18	1,588	97.7	18,498	0.3	21	1,626	18,228
85 and older	68	40.2	702	0.5	24	170	100.6	1,953	0.3	17	169	1,767

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^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, NEW JERSEY, 2005

Beneficiary Characteristics	ANALGESICS - Narcotic						DERMATOLOGICAL					
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Beneficiaries	Number of Benefit Months
Male, Other Eligibles												
All Ages	6,423	34.0	67,928	0.3	16	14,204	75.2	156,842	0.3	18	18,879	188,527
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	0	0.0	0	0.0	0	1	16.7	12	1.0	79	6	60
21-44	13	20.6	46	0.5	40	8	12.7	34	0.3	18	63	265
45-64	12	35.3	57	0.8	33	8	23.5	49	0.5	49	34	134
65-74	2,214	32.5	23,860	0.3	15	4,176	61.4	46,299	0.2	18	6,805	67,947
75-84	2,920	36.1	31,574	0.3	17	6,822	84.2	76,733	0.3	19	8,098	83,858
85 and older	1,264	32.6	12,391	0.4	16	3,189	82.3	33,715	0.3	17	3,873	36,263
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0

Source: Data for this table are from the MAX 2005 file for New Jersey, released by CMS in 2/2009. This table was produced on 04/23/2009.

a. Table D.7D includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2005. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2005. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispn.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

Ben(e)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^{a, b}
 DUAL ELIGIBLE BENEFICIARIES, NEW JERSEY, 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
All	\$492	8.6	21,823	221,054
Age				
0-64	747	11.0	1,874	20,644
65-74	600	10.1	2,603	27,750
75-84	511	8.8	6,534	66,564
85 and older	402	7.6	10,812	106,096
Unknown	0	0.0	0	0
Gender				
Female	470	8.4	16,609	168,716
Male	561	9.0	5,214	52,338
Unknown	0	0.0	0	0
Race				
White	480	8.6	16,988	170,294
African American	522	8.2	2,873	30,451
Other/unknown	543	8.6	1,962	20,309
Basis of Eligibility^c				
Aged	448	8.1	17,170	169,447
Disabled	636	10.0	4,653	51,607
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 Jersey, released by CMS in 2/2009. This table was produced on 04/23/2009.

a. Table D.8 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their 2005 Medicaid enrollment. A total of 11,534 beneficiaries who were in nursing facilities for part of their enrollment and their 110,750 benefit months were excluded from the analysis. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

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

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

Dual Eligible Beneficiaries

TABLE D.9
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d, e}
 DUAL ELIGIBLE BENEFICIARIES, NEW JERSEY, 2005

	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per Rx				Users			

TABLE D.10
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS,
 BY TOP-10 DRUG GROUP^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, NEW JERSEY, 2005

Top 10 Drug Groups in Nursing Facilities	Total Medicaid Rx \$	Users			Among Users		
		Number of Users	As a Percentage of All-Year Nursing Facility Residents	Number of Benefit Months per	Number of Rx per Benefit Month	\$ per Rx	Rx \$ per Benefit Month
ANTIPSYCHOTICS	\$13,593,403	9,276	42.5	99,584	1.0	\$142	\$137
ULCER DRUGS	9,811,566	12,558	57.5	130,877	0.9	85	75
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	9,308,733	7,634	35.0	79,270	0.9	126	117
ANTIDEPRESSANTS	8,296,503	13,548	62.1	142,840	1.0	60	58
HEMATOPOIETIC AGENTS	5,789,809	4,693	21.5	49,158	0.9	136	118
ANTICONVULSANT	4,873,366	6,945	31.8	75,490	1.2	52	65
DERMATOLOGICAL	4,048,136	21,853	100.1	239,677	0.3	54	17
ANTIASTHMATIC	3,657,185	9,836	45.1	102,404	0.6	59	36
ANALGESICS - Narcotic	3,628,275	8,811	40.4	90,175	0.8	48	40
MISC. HEMATOLOGICAL	3,451,804	3,621	16.6	38,123	0.9	97	91
Total	66,458,780	98,775		1,047,598	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for New Jersey, released by CMS in 2/2009. This table was produced on 04/23/2009.

a. Table D.10 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2005. A total of 11,534 beneficiaries who were in nursing facilities for part of their enrollment and their 110,750 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); 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^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, NEW JERSEY, 2005

All Top 10 Drug Groups				ANTIPSYCHOTICS					ULCER DRUGS			
Beneficiary Characteristics	Number of Rx	Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
All	808,647	\$66,458,780	9,276	42.5	99,584	1.0	\$137	12,558	57.5	130,877	0.9	\$75
Female												
All Females	598,803	48,867,948	6,800	40.9	72,897	0.9	126	9,548	57.5	99,514	0.9	75
Female, Disabled												
All Ages	136,187	12,048,241	1,627	60.0	18,604	1.2	187	1,691	62.4	18,745	0.9	77
64 or younger	49,989	4,563,325	514	60.7	5,790	1.3	213	504	59.5	5,569	1.0	81
65-74	44,852	3,812,237	519	62.5	6,048	1.2	195	517	62.2	5,865	0.9	74
75-84	31,365	2,776,808	458	62.9	5,243	1.1	168	467	64.1	5,112	0.9	78
85 and older	9,981	895,871	136	44.4	1,523	0.9	128	203	66.3	2,199	0.9	72
Female, Other Eligibles												
All Ages	462,616	36,819,707	5,173	37.2	54,293	0.8	105	7,857	56.5	80,769	0.9	74
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	32,502	2,642,884	349	51.9	3,654	1.0	158	433	64.4	4,478	0.9	74
75-84	157,356	12,695,327	1,784	43.1	19,069	0.9	112	2,453	59.2	25,637	0.9	75
85 and older	272,758	21,481,496	3,040	33.5	31,570	0.8	94	4,971	54.7	50,654	0.9	74
Male												
All Males	209,844	17,590,832	2,476	47.5	26,687	1.1	166	3,010	57.7	31,363	0.9	76
Male, Disabled												
All Ages	100,841	8,667,156	1,198	61.7	13,550	1.3	207	1,190	61.3	13,279	0.9	80
64 or younger	58,354	5,039,719	641	62.5	7,161	1.4	213	625	61.0	6,993	1.0	81
65-74	29,783	2,505,531	387	65.0	4,429	1.3	214	362	60.8	4,017	0.9	79
75-84	10,808	943,158	147	56.5	1,714	1.1	171	171	65.8	1,903	0.9	79
85 and older	1,896	178,748	23	37.7	246	1.1	160	32	52.5	366	0.9	87
Male, Other Eligibles												
All Ages	109,003	8,923,676	1,278	39.0	13,137	0.9	123	1,820	55.6	18,084	0.9	73
64 or younger	27	2,178	0	0.0	0	0.0	0	1	50.0	12	0.3	50
65-74	19,258	1,520,630	229	45.3	2,385	1.1	150	309	61.2	3,212	0.8	71
75-84	51,231	4,213,187	606	43.1	6,414	0.9	129	779	55.4	7,859	0.9	76
85 and older	38,487	3,187,681	443	32.5	4,338	0.8	99	731	53.7	7,001	0.8	70
Unknown	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2005 file for New Jersey, released by CMS in 2/2009. This table was produced on 04/23/2009.

a. Table D.10A includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2005. A total of 11,534 beneficiaries who were in nursing facilities for part of their enrollment and their 110,750 benefit months were excluded from the analysis.

b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2005. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

d. The top 10 drug groups were determined based on total 2005 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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

TABLE D.10B
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY
 AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, NEW JERSEY, 2005

Beneficiary Characteristics	MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL					ANTIDEPRESSANTS					HEMATOPOIETIC AGENTS				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
All	7,634	35.0	79,270	0.9	\$117	13,548	62.1	142,840	1.0	\$58	4,693	21.5	49,158	0.9	\$118
Female															
All Females	5,996	36.1	62,517	0.9	116	10,455	62.9	110,507	1.0	58	3,465	20.9	36,640	0.9	116
Female, Disabled															
All Ages	530	19.5	6,060	0.9	189	1,711	63.1	19,282	1.1	64	578	21.3	6,438	0.9	133
64 or younger	118	13.9	1,354	1.1	446	623	73.6	6,878	1.1	70	147	17.4	1,616	0.9	132
65-74	154	18.5	1,754	0.9	115	554	66.7	6,393	1.1	65	182	21.9	2,069	0.9	138
75-84	182	25.0	2,109	0.9	119	399	54.8	4,479	1.0	59	167	22.9	1,832	0.9	110
85 and older	76	24.8	843	0.9	107	135	44.1	1,532	0.9	52	82	26.8	921	0.9	170
Female, Other Eligibles															
All Ages	5,466	39.3	56,457	0.9	108	8,744	62.9	91,225	0.9	56	2,887	20.8	30,202	0.9	112
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	259	38.5	2,568	0.9	125	504	75.0	5,232	1.0	63	155	23.1	1,586	1.0	129
75-84	1,829	44.2	19,039	0.9	107	2,803	67.7	29,684	1.0	57	900	21.7	9,474	0.8	126
85 and older	3,378	37.2	34,850	0.9	108	5,437	59.9	56,309	0.9	55	1,832	20.2	19,142	0.8	104
Male															
All Males	1,638	31.4	16,753	1.0	123	3,093	59.3	32,333	1.0	59	1,228	23.6	12,518	0.9	123
Male, Disabled															
All Ages	301	15.5	3,452	1.0	175	1,129	58.2	12,791	1.1	63	408	21.0	4,430	0.9	115
64 or younger	143	14.0	1,607	1.0	246	619	60.4	6,985	1.1	65	220	21.5	2,348	0.9	124
65-74	85	14.3	998	1.0	107	356	59.8	4,043	1.0	59	119	20.0	1,305	0.9	93
75-84	60	23.1	702	1.1	122	136	52.3	1,579	1.0	61	56	21.5	628	0.8	113
85 and older	13	21.3	145	0.9	112	18	29.5	184	0.9	73	13	21.3	149	1.0	175
Male, Other Eligibles															
All Ages	1,337	40.8	13,301	0.9	109	1,964	60.0	19,542	0.9	57	820	25.1	8,088	0.9	128
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	147	29.1	1,512	0.9	108	307	60.8	3,189	1.0	59	124	24.6	1,204	0.9	118
75-84	612	43.6	6,293	1.0	109	894	63.6	9,056	1.0	58	376	26.8	3,826	0.9	120
85 and older	578	42.5	5,496	0.9	110	763	56.1	7,297	0.9	55	320	23.5	3,058	0.9	142
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2005 file for New Jersey, released by CMS in 2/2009. This table was produced on 04/23/2009.

a. Table D.10B includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2005. A total of 11,534 beneficiaries who were in nursing facilities for part of their enrollment and their 110,750 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.10C
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY
 AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, NEW JERSEY, 2005

	ANTICONVULSANT						DERMATOLOGICAL						ANTIASTHMATIC					
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$			
Beneficiary Characteristics																		
All	6,945	31.8	75,490	1.2	\$65	21,853	100.1	239,677	0.3	\$17	9,836	45.1	102,404	0.6	\$36			
Female																		
All Females	4,713	28.4	51,061	1.2	59	16,545	99.6	181,827	0.3	17	7,478	45.0	78,054	0.6	35			
Female, Disabled																		
All Ages	1,580	58.3	17,969	1.4	80	3,224	118.9	36,986	0.3	17	1,271	46.9	13,886	0.7	41			
64 or younger	705	83.2	7,938	1.5	95	1,150	135.8	13,174	0.3	17	413	48.8	4,494	0.8	42			
65-74	500	60.2	5,744	1.5	75	1,016	122.3	11,846	0.3	17	383	46.1	4,322	0.8	45			
75-84	313	43.0	3,568	1.2	63	765	105.1	8,615	0.3	16	323	44.4	3,492	0.7	40			
85 and older	62	20.3	719	1.1	46	293	95.8	3,351	0.3	17	152	49.7	1,578	0.5	26			
Female, Other Eligibles																		
All Ages	3,133	22.5	33,092	1.0	47	13,321	95.9	144,841	0.3	17	6,207	44.7	64,168	0.6	34			
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	313	46.6	3,352	1.2	66	736	109.5	7,990	0.3	20	380	56.5	4,085	0.7	47			
75-84	1,228	29.7	13,132	1.1	50	4,245	102.5	46,771	0.3	17	1,940	46.8	20,054	0.6	39			
85 and older	1,592	17.5	16,608	1.0	41	8,340	91.8	90,080	0.3	17	3,887	42.8	40,029	0.5	30			
Male																		
All Males	2,232	42.8	24,429	1.4	77	5,308	101.8	57,850	0.3	16	2,358	45.2	24,350	0.7	38			
Male, Disabled																		
All Ages	1,350	69.6	15,366	1.5	91	2,287	117.8	26,407	0.3	17	804	41.4	8,930	0.8	42			
64 or younger	829	80.9	9,470	1.6	104	1,267	123.6	14,564	0.3	17	409	39.9	4,552	0.9	45			
65-74	369	62.0	4,177	1.5	75	689	115.8	7,967	0.3	16	267	44.9	2,982	0.8	42			
75-84	137	52.7	1,573	1.2	58	265	101.9	3,090	0.3	15	105	40.4	1,136	0.5	32			
85 and older	15	24.6	146	1.1	74	66	108.2	786	0.3	16	23	37.7	260	0.8	56			
Male, Other Eligibles																		
All Ages	882	26.9	9,063	1.1	52	3,021	92.3	31,443	0.3	15	1,554	47.5	15,420	0.6	36			
64 or younger	1	50.0	2	2.0	62	1	50.0	2	2.0	104	0	0.0	0	0.0	0			
65-74	206	40.8	2,138	1.3	65	497	98.4	5,236	0.3	16	244	48.3	2,405	0.6	35			
75-84	394	28.0	4,224	1.1	51	1,321	94.0	14,165	0.3	16	641	45.6	6,524	0.6	36			
85 and older	281	20.6	2,699	1.0	46	1,202	88.3	12,040	0.3	14	669	49.2	6,491	0.6	36			
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0			

Source: Data for this table are from the MAX 2005 file for New Jersey, released by CMS in 2/2009. This table was produced on 04/23/2009.

a. Table D.10C includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2005. A total of 11,534 beneficiaries who were in nursing facilities for part of their enrollment and their 110,750 benefit months were excluded from the analysis.

b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2005. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

d. The top 10 drug groups were determined based on total 2005 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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

TABLE D.10D
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR NINTH AND TENTH TOP DRUG GROUPS
 SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, NEW JERSEY, 2005

Beneficiary Characteristics	ANALGESICS - Narcotic						MISC. HEMATOLOGICAL					
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	All-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents
All	8,811	40.4	90,175	0.8	\$40	3,621	16.6	38,123	0.9	\$91	21,823	221,054
Female												
All Females	6,970	42.0	71,572	0.9	41	2,687	16.2	28,434	0.9	91	16,609	168,716
Female, Disabled												
All Ages	1,291	47.6	14,211	1.0	59	396	14.6	4,496	0.9	92	2,712	30,120
64 or younger	457	54.0	4,986	1.1	65	91	10.7	1,035	1.1	95	847	9,340
65-74	408	49.1	4,661	1.1	67	143	17.2	1,672	0.9	93	831	9,480
75-84	326	44.8	3,485	0.9	47	114	15.7	1,274	0.9	92	728	7,964
85 and older	100	32.7	1,079	0.7	41	48	15.7	515	0.9	84	306	3,336
Female, Other Eligibles												
All Ages	5,679	40.9	57,361	0.8	37	2,291	16.5	23,938	0.9	90	13,897	138,596
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	342	50.9	3,634	1.1	50	123	18.3	1,308	1.1	97	672	6,689
75-84	1,849	44.7	18,951	0.8	40	722	17.4	7,725	0.9	91	4,141	42,029
85 and older	3,488	38.4	34,776	0.8	34	1,446	15.9	14,905	0.9	90	9,084	89,878
Male												
All Males	1,841	35.3	18,603	0.8	37	934	17.9	9,689	0.9	91	5,214	52,338
Male, Disabled												
All Ages	729	37.6	7,994	0.9	48	276	14.2	3,133	1.0	92	1,941	21,487
64 or younger	439	42.8	4,824	1.0	53	116	11.3	1,283	1.1	92	1,025	11,290
65-74	191	32.1	2,069	0.8	38	120	20.2	1,398	1.0	95	595	6,650
75-84	82	31.5	918	0.8	44	31	11.9	363	0.8	87	260	2,904
85 and older	17	27.9	183	0.9	39	9	14.8	89	0.7	76	61	643
Male, Other Eligibles												
All Ages	1,112	34.0	10,609	0.7	28	658	20.1	6,556	0.9	90	3,273	30,851
64 or younger	2	100.0	4	4.0	312	0	0.0	0	0.0	0	2	14
65-74	181	35.8	1,699	0.8	28	103	20.4	1,034	0.9	86	505	4,931
75-84	491	34.9	4,890	0.8	34	303	21.6	3,105	0.9	91	1,405	13,667
85 and older	438	32.2	4,016	0.6	21	252	18.5	2,417	0.9	90	1,361	12,239
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0

Source: Data for this table are from the MAX 2005 file for New Jersey, released by CMS in 2/2009. This table was produced on 04/23/2009.

a. Table D.10D includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2005. A total of 11,534 beneficiaries who were in nursing facilities for part of their enrollment and their 110,750 benefit months were excluded from the analysis.

b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2005. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

d. The top 10 drug groups were determined based on total 2005 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispain.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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

TABLE D.11
USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
AMONG DUALS, BY BENEFICIARY CHARACTERISTIC^{a,b}
NEW JERSEY, 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
All	77,897	55.4	4.7	662,501	\$110	\$15,392,841	\$23	2.5	140,537
Age									
5 and younger	5	62.5	8.5	68	454	3,633	53	8.3	8
6-14	6	46.2	7.3	95	123	1,602	17	0.9	13
15-20	76	41.8	3.0	544	127	23,099	42	5.6	182
21-44	7,931	47.0	4.0	68,067	129	2,168,116	32	2.7	16,867
45-64	15,991	60.1	6.2	164,461	152	4,047,533	25	2.5	26,613
65-74	19,517	54.4	4.2	150,376	93	3,335,433	22	2.3	35,886
75-84	20,304	57.3	4.6	163,822	99	3,512,889	21	2.4	35,419
85 and older	14,067	55.1	4.5	115,068	90	2,300,536	20	2.6	25,549
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Basis of Eligibility^c									
Aged	38,048	53.0	4.0	284,789	81	5,794,506	20	2.3	71,722
Disabled	39,745	58.1	5.5	377,320	140	9,586,814	25	2.6	68,425
Adults	85	24.3	0.8	265	24	8,401	32	2.3	350
Children	9	40.9	2.5	56	84	1,838	33	2.1	22
Unknown	10	55.6	3.9	71	71	1,282	18	1.1	18
Gender									
Female	54,120	58.2	4.9	459,276	113	10,524,291	23	2.6	92,938
Male	23,777	50.0	4.3	203,225	102	4,868,550	24	2.3	47,599
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Race									
White	39,152	54.6	5.1	363,629	104	7,480,402	21	2.3	71,699
African American	14,668	54.0	4.3	116,023	116	3,145,611	27	2.6	27,149
Other/unknown	24,077	57.8	4.4	182,849	114	4,766,828	26	2.9	41,689
Use of Nursing Facilities^d									
Entire year	11,997	55.0	6.2	134,487	77	1,683,992	13	1.5	21,823
Part year	7,480	64.9	5.1	58,273	79	907,960	16	1.8	11,534
None	58,420	54.5	4.4	469,741	119	12,800,889	27	2.8	107,180
Maintenance Assistance Status									
Cash	38,178	56.5	4.5	304,799	120	8,092,651	27	2.8	67,550
Medically needy	4	20.0	0.4	7	5	98	14	0.2	20
Poverty related	18,313	54.5	4.3	143,222	126	4,231,734	30	2.7	33,609
Other/unknown	21,402	54.4	5.4	214,473	78	3,068,358	14	1.8	39,358

Source: Data for this table are from the MAX 2005 file for New Jersey, released by CMS in 2/2009. This table was produced on 04/23/2009.

a. Table D.11 includes the beneficiaries represented by Cell G of Table 1. Beneficiaries include all dual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2005.

b. The statute establishing the Medicare Part D prescription program that started in 2006 excludes several types of drugs from coverage. State Medicaid programs have been allowed to exclude these drugs since 1990, but many states have chosen to cover them, and if states cover them for any Medicaid beneficiaries they must also cover them for dual eligibles, who as of 2006 receive the remainder of their prescription drug coverage through Part D. Excluded drugs include benzodiazepines; barbiturates; nonprescription (OTC) medications; prescription vitamins and minerals (not including prenatal vitamins and fluoride preparations); and drugs used for anorexia, weight loss, or weight gain. Other excluded drugs include those that promote fertility; those used for cosmetic purposes or hair growth, for symptomatic relief of coughs and colds; or drugs for which the manufacturer requires that associated tests or monitoring services be purchased exclusively from the manufacturer.

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

d. Please refer to footnote f on Table 1 for methodology used to determine use of nursing facilities.

Bene(s) = beneficiary (or beneficiaries); CMS = Centers for Medicare & Medicaid Services; Excl = excluded; MAX = Medicaid Analytic Extract; OTC = over-the-counter; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.12
USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
AMONG DUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a,b}
NEW JERSEY, 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
All	0.4	\$10	\$23	\$0	\$3	1,483,796
Age						
5 and younger	0.8	44	53	0	2	83
6-14	0.8	13	17	4	0	120
15-20	0.3	13	42	0	6	1,787
21-44	0.4	12	32	0	4	178,789
45-64	0.6	14	25	0	5	289,477
65-74	0.4	9	22	0	2	382,626
75-84	0.4	9	21	0	2	379,374
85 and older	0.5	9	20	0	2	251,540
Unknown	0.0	0	0	0	0	0
Basis of Eligibility^c						
Aged	0.4	8	20	0	2	733,035
Disabled	0.5	13	25	0	4	748,990
Adults	0.2	6	32	0	1	1,404
Children	0.3	10	33	0	1	187
Unknown	0.4	7	18	0	4	180
Gender						
Female	0.5	11	23	0	3	983,465
Male	0.4	10	24	0	3	500,331
Unknown	0.0	0	0	0	0	0
Race						
White	0.5	10	21	0	4	746,779
African American	0.4	11	27	0	2	291,827
Other/unknown	0.4	11	26	0	2	445,190
Use of Nursing Facilities^d						
Entire year	0.6	8	13	0	3	221,054
Part year	0.5	8	16	0	3	110,750
None	0.4	11	27	0	3	1,151,992
Maintenance Assistance Status						
Cash	0.4	11	27	0	3	737,015
Medically needy	0.0	1	14	0	0	172
Poverty related	0.4	12	30	0	3	361,879
Other/unknown	0.6	8	14	0	3	384,730

Source: Data for this table are from the MAX 2005 file for New Jersey, released by CMS in 2/2009. This table was produced on 04/23/2009.

a. Table D.12 includes the beneficiaries represented by Cell G of Table 1. Beneficiaries include all dual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2005.

b. The statute establishing the Medicare Part D prescription program that started in 2006 excludes several types of drugs from coverage. State Medicaid programs have been allowed to exclude these drugs since 1990, but many states have chosen to cover them, and if states cover them for any Medicaid beneficiaries they must also cover them for dual eligibles, who as of 2006 receive the remainder of their prescription drug coverage through Part D. Excluded drugs include benzodiazepines; barbiturates; nonprescription (OTC) medications; prescription vitamins and minerals (not including prenatal vitamins and fluoride preparations); and drugs used for anorexia, weight loss, or weight gain. Other excluded drugs include those that promote fertility; those used for cosmetic purposes or hair growth, for symptomatic relief of coughs and colds; or drugs for which the manufacturer requires that associated tests or monitoring services be purchased exclusively from the manufacturer.

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

d. Please refer to footnote f on Table 1 for methodology used to determine use of nursing facilities.

Bene(s) = beneficiary (or beneficiaries); CMS = Centers for Medicare & Medicaid Services; Excl = excluded; MAX = Medicaid Analytic Extract; OTC = over-the-counter; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.13
USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D FOR SELECTED DRUG CATEGORIES AMONG DUALS^{a,b,c}
NEW JERSEY, 2005

Drug Category	Number of Users	Rx \$ per User	Total Rx \$	Rx \$ as a	Total Number Rx.	\$ per Rx	Number Rx as a
				Percentage of All Part D Excluded Rx \$			Percentage of All Part D Excluded Rx
All	118,538	\$130	\$15,392,841	100.0	662,501	\$23	100.0
Anorexia or weight loss/gain	0	0	0	0.0	0	0	0.0
Fertility drugs	0	0	0	0.0	0	0	0.0
Drugs for cosmetic purposes	73	20	1,489	0.0	113	13	0.0
Cough and cold medications	31,314	89	2,772,992	18.0	85,584	32	12.9
Vitamins and minerals	42,551	96	4,074,492	26.5	271,921	15	41.0
Non-prescription drugs	6,889	362	2,491,701	16.2	25,387	98	3.8
Barbiturates	1,472	54	79,449	0.5	19,944	4	3.0
Benzodiazepines	32,396	135	4,372,360	28.4	246,002	18	37.1
Other Part D Excl Rx Drugs	3,843	416	1,600,358	10.4	13,550	118	2.0

Source: Data for this table are from the MAX 2005 file for New Jersey, released by CMS in 2/2009. This table was produced on 04/23/2009.

a. Table D.13 includes the beneficiaries represented by Cell G of Table 1. Beneficiaries include all dual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2005.

A user is a beneficiary who had at least one prescription filled for a Part D excluded drug in 2005. A beneficiary who used drugs from two or more Part D excluded categories was counted as a user for each category. Therefore, the sum of users across drug categories may exceed the total number of individual users as noted on Table D11.

b. Includes OTC drugs as well as prescription drugs.

c. The statute establishing the Medicare Part D prescription program that started in 2006 excludes several types of drugs from coverage. State Medicaid programs have been allowed to exclude these drugs since 1990, but many states have chosen to cover them, and if states cover them for any Medicaid beneficiaries they must also cover them for dual eligibles, who as of 2006 receive the remainder of their prescription drug coverage through Part D. Excluded drugs include benzodiazepines; barbiturates; nonprescription (OTC) medications; prescription vitamins and minerals (not including prenatal vitamins and fluoride preparations); and drugs used for anorexia, weight loss, or weight gain. Other excluded drugs include those that promote fertility; those used for cosmetic purposes or hair growth, for symptomatic relief of coughs and colds; or drugs for which the manufacturer requires that associated tests or monitoring services be purchased exclusively from the manufacturer.

Bene(s) = beneficiary (or beneficiaries); CMS = Centers for Medicare & Medicaid Services; Excl = excluded; MAX = Medicaid Analytic Extract; OTC = over-the-counter; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

Dual Eligible Beneficiaries

SUPPLEMENTAL TABLE 1
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES^{a, b}
 NEW JERSEY, 2005

Total Number of Dual Eligible Beneficiaries: 140,537
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries: \$619,974,708
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary: \$4,411

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	13,005	9.3	\$0	0.0
1-500	13,787	9.8	3,064,620	0.5
501-1,000	10,361	7.4	7,724,889	1.2
1,001-1,500	9,103	6.5	11,348,408	1.8
1,501-2,000	8,597	6.1	15,001,814	2.4
2,001-2,500	8,240	5.9	18,537,213	3.0
2,501-3,000	7,621	5.4	20,920,815	3.4
3,001-3,500	7,157	5.1	23,248,483	3.7
3,501-4,000	6,477	4.6	24,263,873	3.9
4,001-4,500	5,994	4.3	25,442,148	4.1
4,501-5,000	5,485	3.9	26,041,862	4.2
5,001-5,500	4,953	3.5	25,989,207	4.2
5,501-6,000	4,427	3.2	25,438,560	4.1
6,001-6,500	3,795	2.7	23,711,215	3.8
6,501-7,000	3,571	2.5	24,091,662	3.9
7,001-7,500	3,043	2.2	22,058,130	3.6
7,501-8,000	2,874	2.0	22,255,139	3.6
8,001-8,500	2,388	1.7	19,683,996	3.2
8,501-9,000	2,069	1.5	18,090,108	2.9
9,001-9,500	1,872	1.3	17,300,315	2.8
9,501-10,000	1,656	1.2	16,136,542	2.6
10,001+	14,062	10.0	229,625,709	37.0

Source: Data for this table are from the MAX 2005 file for New Jersey, released by CMS in 2/2009. This table was produced on 04/23/2009.

a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2005.

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

SUPPLEMENTAL TABLE 1A
 MEDICAID PHARMACY REIMBURSEMENT FOR DISABLED DUAL ELIGIBLE BENEFICIARIES UNDER AGE 65^{a, b, c}
 NEW JERSEY, 2005

Total Number of Disabled Dual Eligible Beneficiaries, Age < 65: 43,296
 Total Pharmacy Reimbursement for Disabled Dual Eligible Beneficiaries, Age < 65: \$241,882,682
 Mean Pharmacy Reimbursement per Disabled Dual Eligible Beneficiary, Age < 65: \$5,586

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Disabled Dual Beneficiaries,		Percent of Total Pharmacy Reimbursement
		Age < 65	Pharmacy Reimbursement	
\$0	4,776	11.0	0	0.0
1-500	4,975	11.5	1,016,763	0.4
501-1,000	2,838	6.6	2,100,954	0.9
1,001-1,500	2,393	5.5	2,977,501	1.2
1,501-2,000	2,116	4.9	3,686,205	1.5
2,001-2,500	1,968	4.5	4,430,482	1.8
2,501-3,000	1,750	4.0	4,808,022	2.0
3,001-3,500	1,612	3.7	5,225,199	2.2
3,501-4,000	1,533	3.5	5,745,142	2.4
4,001-4,500	1,374	3.2	5,830,078	2.4
4,501-5,000	1,359	3.1	6,458,382	2.7
5,001-5,500	1,228	2.8	6,446,058	2.7
5,501-6,000	1,183	2.7	6,803,168	2.8
6,001-6,500	1,081	2.5	6,757,944	2.8
6,501-7,000	1,015	2.3	6,851,127	2.8
7,001-7,500	913	2.1	6,616,198	2.7
7,501-8,000	889	2.1	6,886,293	2.8
8,001-8,500	810	1.9	6,681,654	2.8
8,501-9,000	694	1.6	6,072,348	2.5
9,001-9,500	660	1.5	6,103,974	2.5
9,501-10,000	617	1.4	6,012,318	2.5
10,001+	7,512	17.4	134,372,872	55.6

Source: Data for this table are from the MAX 2005 file for New Jersey, released by CMS in 2/2009. This table was produced on 04/23/2009.

a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2005.

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

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

SUPPLEMENTAL TABLE 1B
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 AND OLDER^{a, b}
 NEW JERSEY, 2005

Total Number of Dual Eligible Beneficiaries, Age 65+: 96,854
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65+: \$377,496,514
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65+: \$3,897

Annual Pharmacy Reimbursement per Beneficiary	Percent of Dual Beneficiaries, Age 65		Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
	Number of Beneficiaries	+		
\$0	8,083	8.3	0	0.0
1-500	8,712	9.0	2,028,267	0.5
501-1,000	7,489	7.7	5,598,329	1.5
1,001-1,500	6,689	6.9	8,345,291	2.2
1,501-2,000	6,471	6.7	11,298,450	3.0
2,001-2,500	6,259	6.5	14,078,281	3.7
2,501-3,000	5,862	6.1	16,088,631	4.3
3,001-3,500	5,541	5.7	18,010,025	4.8
3,501-4,000	4,940	5.1	18,503,351	4.9
4,001-4,500	4,618	4.8	19,603,813	5.2
4,501-5,000	4,119	4.3	19,550,267	5.2
5,001-5,500	3,722	3.8	19,527,883	5.2
5,501-6,000	3,240	3.3	18,612,678	4.9
6,001-6,500	2,712	2.8	16,941,101	4.5
6,501-7,000	2,552	2.6	17,214,058	4.6
7,001-7,500	2,127	2.2	15,420,275	4.1
7,501-8,000	1,984	2.0	15,360,968	4.1
8,001-8,500	1,575	1.6	12,977,262	3.4
8,501-9,000	1,372	1.4	11,991,372	3.2
9,001-9,500	1,212	1.3	11,196,341	3.0
9,501-10,000	1,035	1.1	10,085,418	2.7
10,001+	6,540	6.8	95,064,453	25.2

Source: Data for this table are from the MAX 2005 file for New Jersey, released by CMS in 2/2009. This table was produced on 04/23/2009.

a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2005.

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

SUPPLEMENTAL TABLE 1C
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 TO 74^{a, b}
 NEW JERSEY, 2005

Total Number of Dual Eligible Beneficiaries, Age 65-74: 35,886
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65-74: \$142,554,744
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65-74: \$3,972

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age		Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
		65-74			
\$0	3,674	10.2		0	0.0
1-500	3,385	9.4		775,498	0.5
501-1,000	2,666	7.4		1,987,011	1.4
1,001-1,500	2,429	6.8		3,039,680	2.1
1,501-2,000	2,319	6.5		4,047,268	2.8
2,001-2,500	2,251	6.3		5,063,001	3.6
2,501-3,000	2,018	5.6		5,540,645	3.9
3,001-3,500	1,949	5.4		6,335,671	4.4
3,501-4,000	1,756	4.9		6,582,113	4.6
4,001-4,500	1,645	4.6		6,981,171	4.9
4,501-5,000	1,424	4.0		6,761,602	4.7
5,001-5,500	1,228	3.4		6,443,241	4.5
5,501-6,000	1,113	3.1		6,397,949	4.5
6,001-6,500	935	2.6		5,837,341	4.1
6,501-7,000	887	2.5		5,981,258	4.2
7,001-7,500	735	2.0		5,326,794	3.7
7,501-8,000	715	2.0		5,531,891	3.9
8,001-8,500	591	1.6		4,868,707	3.4
8,501-9,000	521	1.5		4,558,359	3.2
9,001-9,500	472	1.3		4,358,772	3.1
9,501-10,000	380	1.1		3,702,440	2.6
10,001+	2,793	7.8		42,434,332	29.8

Source: Data for this table are from the MAX 2005 file for New Jersey, released by CMS in 2/2009. This table was produced on 04/23/2009.

a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2005.

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

SUPPLEMENTAL TABLE 1D
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 75 TO 84^{a, b}
 NEW JERSEY, 2005

Total Number of Dual Eligible Beneficiaries, Age 75-84: 35,419
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 75-84: \$145,811,058
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 75-84: \$4,116

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 75-84	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	2,717	7.7	0	0.0
1-500	2,705	7.6	641,265	0.4
501-1,000	2,536	7.2	1,908,421	1.3
1,001-1,500	2,245	6.3	2,793,674	1.9
1,501-2,000	2,254	6.4	3,930,330	2.7
2,001-2,500	2,276	6.4	5,120,938	3.5
2,501-3,000	2,179	6.2	5,978,516	4.1
3,001-3,500	2,048	5.8	6,659,287	4.6
3,501-4,000	1,840	5.2	6,897,684	4.7
4,001-4,500	1,775	5.0	7,537,615	5.2
4,501-5,000	1,607	4.5	7,632,340	5.2
5,001-5,500	1,479	4.2	7,762,472	5.3
5,501-6,000	1,290	3.6	7,405,532	5.1
6,001-6,500	1,060	3.0	6,631,012	4.5
6,501-7,000	1,031	2.9	6,953,707	4.8
7,001-7,500	867	2.4	6,288,692	4.3
7,501-8,000	784	2.2	6,070,753	4.2
8,001-8,500	641	1.8	5,279,097	3.6
8,501-9,000	566	1.6	4,945,364	3.4
9,001-9,500	479	1.4	4,426,943	3.0
9,501-10,000	461	1.3	4,490,016	3.1
10,001+	2,579	7.3	36,457,400	25.0

Source: Data for this table are from the MAX 2005 file for New Jersey, released by CMS in 2/2009. This table was produced on 04/23/2009.

a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2005.

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

SUPPLEMENTAL TABLE 1E
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 85 AND OLDER^{a, b}
 NEW JERSEY, 2005

Total Number of Dual Eligible Beneficiaries, Age 85+: 25,549
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 85+: \$89,130,712
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 85+: \$3,488

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 85		Percent of Total Pharmacy Reimbursement
			+ Pharmacy Reimbursement	
\$0	1,692	6.6	0	0.0
1-500	2,622	10.3	611,504	0.7
501-1,000	2,287	9.0	1,702,897	1.9
1,001-1,500	2,015	7.9	2,511,937	2.8
1,501-2,000	1,898	7.4	3,320,852	3.7
2,001-2,500	1,732	6.8	3,894,342	4.4
2,501-3,000	1,665	6.5	4,569,470	5.1
3,001-3,500	1,544	6.0	5,015,067	5.6
3,501-4,000	1,344	5.3	5,023,554	5.6
4,001-4,500	1,198	4.7	5,085,027	5.7
4,501-5,000	1,088	4.3	5,156,325	5.8
5,001-5,500	1,015	4.0	5,322,170	6.0
5,501-6,000	837	3.3	4,809,197	5.4
6,001-6,500	717	2.8	4,472,748	5.0
6,501-7,000	634	2.5	4,279,093	4.8
7,001-7,500	525	2.1	3,804,789	4.3
7,501-8,000	485	1.9	3,758,324	4.2
8,001-8,500	343	1.3	2,829,458	3.2
8,501-9,000	285	1.1	2,487,649	2.8
9,001-9,500	261	1.0	2,410,626	2.7
9,501-10,000	194	0.8	1,892,962	2.1
10,001+	1,168	4.6	16,172,721	18.1

Source: Data for this table are from the MAX 2005 file for New Jersey, released by CMS in 2/2009. This table was produced on 04/23/2009.

a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2005.

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

APPENDIX TABLE A.3
CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY^{a, b}
DUAL ELIGIBLE BENEFICIARIES, NEW JERSEY, 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
All	152,524	74,401	77,025	1,052	28	18	1,635,629	766,358	859,172	9,647	270	182
Age												
5 and younger	13	0	10	0	3	0	147	0	111	0	36	0
6-14	17	0	11	0	6	0	171	0	118	0	53	0
15-20	252	0	235	4	13	0	2,778	0	2,612	30	136	0
21-44	20,258	0	19,633	619	5	1	222,838	0	217,165	5,628	33	12
45-64	29,400	16	29,031	339	1	13	325,083	140	321,669	3,121	12	141
65-74	39,821	20,185	19,546	86	0	4	431,460	209,378	221,213	840	0	29
75-84	36,868	29,637	7,227	4	0	0	397,270	315,462	81,780	28	0	0
85 and older	25,895	24,563	1,332	0	0	0	255,882	241,378	14,504	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	100,808	54,804	45,322	650	14	18	1,083,373	567,957	509,077	6,006	151	182
Male	51,716	19,597	31,703	402	14	0	552,256	198,401	350,095	3,641	119	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	76,025	38,615	36,885	495	17	13	801,529	385,462	411,351	4,395	186	135
African American	30,279	10,103	19,815	352	5	4	332,020	107,223	221,373	3,354	35	35
Other/unknown	46,220	25,683	20,325	205	6	1	502,080	273,673	226,448	1,898	49	12
Use of Nursing Facilities^c												
Entire year	21,824	17,170	4,654	0	0	0	221,059	169,448	51,611	0	0	0
Part year	11,554	8,996	2,556	2	0	0	111,655	84,581	27,059	15	0	0
None	119,146	48,235	69,815	1,050	28	18	1,302,915	512,329	780,502	9,632	270	182
Maintenance Assistance Status												
Cash	76,719	31,592	44,770	355	2	0	851,502	345,783	502,437	3,272	10	0
Medically needy	20	11	9	0	0	0	177	93	84	0	0	0
Poverty related	35,584	14,815	20,657	82	12	18	388,824	158,178	229,825	514	125	182
Other/unknown	40,201	27,983	11,589	615	14	0	395,126	262,304	126,826	5,861	135	0
Dual Status^d												
Full dual, all year	151,332	73,518	76,727	1,042	27	18	1,623,948	757,760	856,202	9,546	258	182
Full dual, part year	1,192	883	298	10	1	0	11,681	8,598	2,970	101	12	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	138,308	71,269	66,903	105	14	17	1,474,741	731,040	742,776	622	133	170
FFS part year, with Rx claims	2,011	428	1,415	160	7	1	22,271	4,598	16,076	1,504	81	12
FFS part year, no Rx claims	218	25	107	85	1	0	2,082	215	1,103	752	12	0
MC all year, with Rx claims	10,417	2,460	7,850	107	0	0	121,156	28,547	91,472	1,137	0	0
MC all year, no Rx claims	1,570	219	750	595	6	0	15,379	1,958	7,745	5,632	44	0

Source: Data for this table are from the MAX 2005 file for New Jersey, released by CMS in 2/2009. This table was produced on 04/23/2009.

a. Table A.3 includes the beneficiaries represented by Cell F of Table 1. Benefit months are months during which beneficiaries had pharmacy benefit coverage.

b. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services. The total includes some beneficiaries with unknown basis of eligibility and some whose age categories are not consistent with basis of eligibility.

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

d. The "Full dual, all year" group contains beneficiaries who had Medicare as well as Medicaid pharmacy benefits during all months of Medicaid enrollment in 2005. The "Full dual, part year" group contains beneficiaries who had such benefits for some, but not all, months of their enrollment. Refer to footnote g of Table 1 for more information about how we determined dual eligibility status. Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; FFS = fee-for-service pharmacy benefit; MAX = Medicaid Analytic Extract; MC = managed care; Rx = pharmacy benefit.

APPENDIX TABLE A.4
 MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS^a
 DUAL ELIGIBLE BENEFICIARIES, NEW JERSEY, 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
All	152,524	1,635,629	140,537	1,483,796	0	151,833
Fee-for-service (FFS) all year	138,308	1,474,741	138,308	1,474,741	0	0
FFS part year, with Rx claims	2,011	22,271	2,011	8,288	0	13,983
FFS part year, with no Rx claims	218	2,082	218	767	0	1,315
Managed care (MC) all year, with Rx claims	10,417	121,156	0	0	0	121,156
MC all year, with no Rx claims	1,570	15,379	0	0	0	15,379

Source: Data for this table are from the MAX 2005 file for New Jersey, released by CMS in 2/2009. This table was produced on 04/23/2009.

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

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

Dual Eligible Beneficiaries