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

LIST OF TABLES

CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY[a, b]
NONDUAL BENEFICIARIES, MARYLAND, 2005

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown
All	**292,319**	**5,223**	**27,270**	**134,234**	**125,188**	**404**	**1,491,936**	**52,150**	**164,631**	**989,013**	**282,198**	**3,944**
Age												
5 and younger	50,471	1	749	1	49,720	0	95,908	12	3,527	1	92,368	0
6-14	48,305	5	1,199	19	47,082	0	97,393	37	6,391	47	90,918	0
15-20	32,786	2	1,662	3,372	27,750	0	113,909	13	9,227	7,839	96,830	0
21-44	121,199	11	8,975	111,546	625	42	891,427	96	49,938	838,996	2,031	366
45-64	32,163	50	12,515	19,240	0	358	218,502	389	72,776	141,785	0	3,552
65-74	4,064	2,457	1,559	44	0	4	40,211	24,016	15,920	249	0	26
75-84	2,463	1,943	511	9	0	0	26,059	20,184	5,794	81	0	0
85 and older	857	754	100	3	0	0	8,476	7,403	1,058	15	0	0
Unknown	11	0	0	0	11	0	51	0	0	0	51	0
Gender												
Female	194,658	3,593	12,707	112,190	65,764	404	1,123,964	36,439	79,667	842,344	161,570	3,944
Male	97,661	1,630	14,563	22,044	59,424	0	367,972	15,711	84,964	146,669	120,628	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	94,255	1,203	9,674	51,337	31,820	221	543,235	11,932	55,829	395,763	77,565	2,146
African American	151,982	1,847	14,584	68,927	66,510	114	742,761	18,610	90,214	481,686	151,123	1,128
Other/unknown	46,082	2,173	3,012	13,970	26,858	69	205,940	21,608	18,588	111,564	53,510	670
Use of Nursing Facilities[c]												
Entire year	1,879	545	1,331	2	1	0	18,864	5,416	13,433	3	12	0
Part year	1,632	258	1,328	39	5	2	13,027	2,380	10,309	286	35	17
None	288,808	4,420	24,611	134,193	125,182	402	1,460,045	44,354	140,889	988,724	282,151	3,927
Maintenance Assistance Status												
Cash	48,041	2,451	13,754	14,952	16,884	0	199,989	27,439	93,372	42,303	36,875	0
Medically needy	34,145	2,140	12,891	10,195	8,919	0	144,530	18,891	66,643	32,773	26,223	0
Poverty-related	104,189	10	46	14,632	89,097	404	212,577	70	281	47,706	160,576	3,944
Other/unknown	105,944	622	579	94,455	10,288	0	934,840	5,750	4,335	866,231	58,524	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	124,186	5,164	13,476	89,372	15,772	402	1,045,387	51,783	106,275	813,738	69,661	3,930
FFS part year, with Rx claims	42,445	50	8,771	16,968	16,654	2	147,181	319	37,428	70,703	38,717	14
FFS part year, no Rx claims	125,688	9	5,023	27,894	92,762	0	299,368	48	20,928	104,572	173,820	0

Source: Data for this table are from the MAX 2005 file for Maryland, released by CMS in 1/2009. This table was produced on 04/23/2009.
a. Table ND.2 includes the beneficiaries represented by Cell K 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.
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.

Nondual Beneficiaries

ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC[a, b]
NONDUAL BENEFICIARIES, MARYLAND, 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	**22.1**	**2.9**	**$210**	**$72**	**$4,616**	**4.5**	**292,319**
Age							
5 and younger	12.1	0.3	20	63	2,890	0.7	50,471
6-14	14.6	1.2	125	107	2,425	5.2	48,305
15-20	23.8	2.2	216	99	5,472	4.0	32,786
21-44	23.7	1.8	141	77	3,880	3.6	121,199
45-64	30.1	8.4	567	68	10,355	5.5	32,163
65-74	72.3	29.0	1,657	57	14,133	11.7	4,064
75-84	74.0	29.2	1,630	56	12,612	12.9	2,463
85 and older	72.9	29.4	1,363	46	17,647	7.7	857
Unknown	9.1	0.1	1	8	1,001	0.1	11
Basis of Eligibility[e]							
Aged	70.8	27.1	1,504	55	13,958	10.8	5,223
Disabled	54.6	16.6	1,275	77	22,932	5.6	27,270
Adults	20.2	1.0	57	56	2,304	2.5	134,234
Children	15.0	0.9	83	91	2,696	3.1	125,188
Unknown	84.7	24.5	1,798	73	10,853	16.6	404
Gender							
Female	23.5	2.7	176	65	3,996	4.4	194,658
Male	19.5	3.3	277	83	5,853	4.7	97,661
Unknown	0.0	0.0	0	0	0	0.0	0
Race							
White	27.6	3.7	265	71	4,926	5.4	94,255
African American	19.9	2.6	192	75	4,657	4.1	151,982
Other/unknown	18.5	2.4	155	65	3,849	4.0	46,082
Use of Nursing Facilities[f]							
Entire year	95.5	90.9	5,522	61	73,596	7.5	1,879
Part year	96.1	59.4	3,959	67	67,221	5.9	1,632
None	21.3	2.0	154	76	3,814	4.0	288,808
Maintenance Assistance Status							
Cash	37.2	8.7	630	73	9,852	6.4	48,041
Medically needy	38.8	7.8	565	72	12,506	4.5	34,145
Poverty related	15.7	0.6	43	74	2,270	1.9	104,189
Other/unknown	16.3	1.0	69	67	2,006	3.4	105,944

Source: Data for this table are from the MAX 2005 file for Maryland, released by CMS in 1/2009. This table was produced on 04/23/2009.
a. Table ND.3 includes beneficiaries represented by Cell K 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 fost 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.

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC[a, b]
NONDUAL BENEFICIARIES, MARYLAND, 2005

Beneficiary Characteristics	Mean Number of Rx	Mean Rx $	Rx $ as a Percentage of All Medicaid FFS $[c]	Number of Rx, Percentage with:						Mean $, All Medicaid FFS $[d]	Number	
				None	More than 0, but 1 or Less	More than 1, but 2 or Less	More than 2, but 5 or Less	More than 5, but 10 or Less	More than 10		Beneficiaries	Benefit Months
All	**0.6**	**$41**	**4.5**	**77.9**	**13.4**	**2.7**	**3.1**	**1.8**	**1.2**	**$905**	**292,319**	**1,491,936**
Age												
5 and younger	0.2	10	0.7	87.9	8.9	2.0	1.0	0.2	0.1	1,521	50,471	95,908
6-14	0.6	62	5.2	85.4	6.8	2.3	2.7	1.7	1.2	1,203	48,305	97,393
15-20	0.6	62	4.0	76.2	15.1	2.8	3.2	1.6	1.0	1,575	32,786	113,909
21-44	0.2	19	3.6	76.3	17.6	2.1	2.1	1.1	0.8	528	121,199	891,427
45-64	1.2	83	5.5	69.9	11.0	4.3	6.4	4.7	3.7	1,524	32,163	218,502
65-74	2.9	168	11.7	27.7	21.4	12.3	22.1	12.4	4.2	1,428	4,064	40,211
75-84	2.8	154	12.9	26.0	21.2	12.4	25.1	12.1	3.3	1,192	2,463	26,059
85 and older	3.0	138	7.7	27.1	18.0	10.6	24.2	16.3	3.9	1,784	857	8,476
Unknown	0.0	0	0.1	90.9	9.1	0.0	0.0	0.0	0.0	216	11	51
Basis of Eligibility[e]												
Aged	2.7	151	10.8	29.2	22.0	11.9	21.6	11.8	3.5	1,398	5,223	52,150
Disabled	2.7	211	5.6	45.4	18.4	7.3	12.2	9.3	7.3	3,799	27,270	164,631
Adults	0.1	8	2.5	79.8	15.8	1.8	1.6	0.6	0.3	313	134,234	989,013
Children	0.4	37	3.1	85.0	9.2	2.2	2.0	1.0	0.6	1,196	125,188	282,198
Unknown	2.5	184	16.6	15.3	29.7	18.8	27.2	8.2	0.7	1,112	404	3,944
Gender												
Female	0.5	31	4.4	76.5	15.6	2.6	2.8	1.5	1.0	692	194,658	1,123,964
Male	0.9	73	4.7	80.5	8.9	2.9	3.8	2.3	1.6	1,553	97,661	367,972
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	0.6	46	5.4	72.4	15.8	3.1	4.2	2.6	1.9	855	94,255	543,235
African American	0.5	39	4.1	80.1	12.3	2.5	2.7	1.5	0.9	953	151,982	742,761
Other/unknown	0.5	35	4.0	81.5	12.0	2.4	2.6	1.0	0.5	861	46,082	205,940
Use of Nursing Facilities[f]												
Entire year	9.1	550	7.5	4.5	3.0	3.5	18.1	37.3	33.6	7,331	1,879	18,864
Part year	7.4	496	5.9	3.9	8.5	7.7	23.8	30.3	25.8	8,421	1,632	13,027
None	0.4	31	4.0	78.7	13.5	2.7	2.9	1.4	0.8	754	288,808	1,460,045
Maintenance Assistance Status												
Cash	2.1	151	6.4	62.8	15.3	5.5	7.8	5.0	3.6	2,367	48,041	199,989
Medically needy	1.8	134	4.5	61.2	16.7	5.9	8.3	5.0	2.9	2,955	34,145	144,530
Poverty related	0.3	21	1.9	84.3	10.3	2.4	1.9	0.7	0.4	1,113	104,189	212,577
Other/unknown	0.1	8	3.4	83.7	14.5	0.7	0.6	0.3	0.2	227	105,944	934,840

Source: Data for this table are from the MAX 2005 file for Maryland, released by CMS in 1/2009. This table was produced on 04/23/2009.
a. Table ND.4 includes the beneficiaries represented by Cell K 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 ND.5
AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC[a, b, c]
NONDUAL BENEFICIARIES, MARYLAND, 2005

Beneficiary Characteristics	All Rx			Patented Brand-Name Drugs			Off-Patent Brand-Name Drugs			Generic Drugs		
	Number of Rx	Rx $	$ per Rx	Number of Rx	Rx $	$ per Rx	Number of Rx	Rx $	$ per Rx	Number of Rx	Rx $	$ per Rx
All	**0.6**	**$41**	**$72**	**0.2**	**$34**	**$138**	**0.0**	**$2**	**$71**	**0.3**	**$6**	**$19**
Age												
5 and younger	0.2	10	63	0.0	9	182	0.0	0	80	0.1	2	14
6-14	0.6	62	107	0.4	57	152	0.0	1	110	0.2	4	21
15-20	0.6	62	99	0.4	55	151	0.0	2	82	0.2	5	22
21-44	0.2	19	77	0.1	15	144	0.0	1	83	0.1	3	23
45-64	1.2	83	68	0.5	66	146	0.1	4	68	0.7	14	19
65-74	2.9	168	57	1.2	138	112	0.1	4	53	1.6	25	16
75-84	2.8	154	56	1.2	128	105	0.1	5	47	1.4	22	15
85 and older	3.0	138	46	1.2	107	92	0.2	8	48	1.6	23	14
Unknown	0.0	0	8	0.0	0	0	0.0	0	0	0.0	0	8
Basis of Eligibility[d]												
Aged	2.7	151	55	1.2	124	105	0.1	5	51	1.4	22	15
Disabled	2.7	211	77	1.1	172	160	0.1	9	76	1.5	30	19
Adults	0.1	8	56	0.1	6	96	0.0	0	66	0.1	2	24
Children	0.4	37	91	0.2	33	142	0.0	1	79	0.2	3	19
Unknown	2.5	184	73	1.0	155	160	0.1	5	82	1.5	23	16
Gender												
Female	0.5	31	65	0.2	25	124	0.0	1	67	0.3	5	19
Male	0.9	73	83	0.4	62	158	0.0	3	76	0.5	9	20
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Race												
White	0.6	46	71	0.3	37	133	0.0	2	72	0.3	7	21
African American	0.5	39	75	0.2	32	147	0.0	2	73	0.3	5	19
Other/unknown	0.5	35	65	0.2	29	120	0.0	1	59	0.3	5	18
Use of Nursing Facilities[e]												
Entire year	9.1	550	61	3.3	424	129	0.6	33	57	5.2	93	18
Part year	7.4	496	67	2.6	387	150	0.4	26	62	4.4	83	19
None	0.4	31	76	0.2	26	138	0.0	1	84	0.2	4	20
Maintenance Assistance Status												
Cash	2.1	151	73	0.8	124	147	0.1	6	73	1.2	22	19
Medically needy	1.8	134	72	0.8	110	142	0.1	5	70	1.0	18	18
Poverty related	0.3	21	74	0.1	18	137	0.0	0	74	0.1	2	17
Other/unknown	0.1	8	67	0.1	6	101	0.0	0	64	0.1	1	27

Source: Data for this table are from the MAX 2005 file for Maryland, released by CMS in 1/2009. This table was produced on 04/23/2009.
a. Table ND.5 includes the beneficiaries represented by Cell K of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
b. The Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
c. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In Maryland, 0.1 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, http://www.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.

Therapeutic Category	Number of Rx per Benefit Month Among Users — Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	$ per Benefit Month Among Users — Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	$ per Rx — Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total Number of Rx	Total Rx $	Number of Users	As a Percentage of All Benes	Number of Benefit Months
Anti-infective Agents	0.5	0.2	0.0	0.3	$67	$57	$5	$6	$135	$320	$96	$21	56,598	$7,613,340	18,424	6.3	113,086
Biologicals	0.2	0.2	0.0	0.0	186	168	8	11	783	805	5,055	387	473	370,421	244	0.1	1,993
Antineoplastic Agents	0.5	0.2	0.0	0.3	131	108	2	21	259	533	472	69	4,027	1,042,330	926	0.3	7,953
Endocrine/Metabolic Drugs	0.6	0.3	0.0	0.3	27	19	2	6	49	71	58	26	105,878	5,237,310	22,027	7.5	190,886
Cardiovascular Agents	1.3	0.5	0.0	0.8	52	42	0	10	39	78	23	13	137,843	5,349,460	12,757	4.4	102,522
Respiratory Agents	0.6	0.3	0.0	0.3	31	27	0	3	50	101	57	10	44,471	2,221,254	11,672	4.0	71,997
Gastrointestinal Agents	0.7	0.4	0.0	0.3	50	45	0	4	71	123	69	14	46,392	3,303,255	8,178	2.8	65,930
Genitourinary Agents	0.4	0.2	0.0	0.2	20	15	1	4	49	77	59	20	9,701	478,662	3,437	1.2	23,446
CNS Drugs	1.6	0.8	0.0	0.7	150	138	1	12	96	162	61	17	187,303	17,972,904	22,139	7.6	119,557
Stimulants/Anti-obesity/Anorexia	1.8	1.4	0.0	0.3	169	156	0	12	96	110	64	35	28,772	2,753,226	5,029	1.7	16,337
Miscellaneous Psychological/ Neurological Agents	0.6	0.5	0.0	0.1	104	98	0	6	172	179	123	106	4,136	712,941	822	0.3	6,877
Analgesics and Anesthetics	0.7	0.1	0.0	0.6	28	9	6	12	39	122	141	21	69,451	2,732,167	14,554	5.0	98,981
Neuromuscular Agents	1.1	0.4	0.1	0.6	82	60	3	19	73	137	51	31	69,972	5,136,306	9,344	3.2	62,602
Nutritional Products	0.4	0.0	0.0	0.4	8	2	0	6	19	46	31	16	21,205	396,123	7,916	2.7	47,770
Hematological Agents	0.8	0.3	0.1	0.4	108	102	2	4	135	304	15	11	27,744	3,735,492	4,192	1.4	34,521
Topical Products	0.5	0.2	0.0	0.3	21	14	1	5	44	84	54	19	34,743	1,532,276	10,922	3.7	73,457
Miscellaneous Products	0.4	0.2	0.0	0.2	101	79	7	16	242	461	393	69	3,048	738,353	777	0.3	7,288
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	6	0	0	0	22	0	0	0	475	10,463	182	0.1	1,623
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.	852,232	61,336,283	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for Maryland, released by CMS in 1/2009. This table was produced on 04/23/2009.
a. Table ND.6 includes the beneficiaries represented by Cell K of Table 1. A beneficiary who used drugs from two or more categories was counted as a user for each category. Therefore, the sum of users across categories may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
c. For information about these therapeutic categories, see Wolters Kluwer Health, http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615 (October 26, 2007).
d. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In Maryland, 0.1 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615 (October 26, 2007).
e. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 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.

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP[a, b, c]
NONDUAL BENEFICIARIES, MARYLAND, 2005

		Users			Among Users		
Top 10 Drug Groups	Total Medicaid Rx $	Number of Users	As a Percentage of All Beneficiaries	Number of Benefit Months	Number of Rx per Benefit Month	$ per Rx	Rx $ per Benefit Month
ANTIPSYCHOTICS	$7,691,263	6,222	2.1	55,355	0.8	$175	$139
ANTIVIRAL	4,161,061	2,277	0.8	18,193	0.5	464	229
ANTICONVULSANT	3,701,252	5,618	1.9	49,239	0.8	89	75
CONTRACEPTIVES	2,543,960	14,967	5.1	144,174	0.4	47	18
ULCER DRUGS	2,431,277	6,541	2.2	58,945	0.5	82	41
ANTIHYPERLIPIDEMIC	2,131,910	4,635	1.6	45,004	0.5	91	47
ANTIDEPRESSANTS	1,975,079	8,003	2.7	67,568	0.6	50	29
ANALGESICS - Narcotic	1,662,567	11,185	3.8	87,627	0.5	38	19
ANTIDIABETIC	1,655,108	6,241	2.1	56,578	0.6	49	29
HEMATOPOIETIC AGENTS	1,646,709	2,571	0.9	22,129	0.5	163	74
Total	29,600,186	68,260		604,812	n.a.	n.a.	n.a.

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

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

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

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

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

Nondual Beneficiaries

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]
NONDUAL BENEFICIARIES, MARYLAND, 2005

Beneficiary Characteristics	All Top 10 Drug Groups		ANTIPSYCHOTICS					ANTIVIRAL				
	Number of Rx	Rx $	Number of Users	Users as % of All 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 All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx $ per Benefit Month
All	328,686	$29,600,186	6,222	2.1	55,355	0.8	$139	2,277	0.8	18,193	0.5	$229
Female												
All Females	211,287	16,960,124	3,055	1.6	27,120	0.8	128	1,202	0.6	9,716	0.5	205
Female, Disabled												
All Ages	91,315	8,757,601	1,573	12.4	14,128	0.8	134	702	5.5	5,956	0.6	271
5 and younger	61	2,848	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	1,160	233,613	20	5.3	192	0.9	194	6	1.6	64	0.8	234
15-20	1,834	274,290	88	13.6	853	0.8	169	8	1.2	65	0.6	293
21-44	18,799	2,490,196	510	13.7	3,960	0.7	115	374	10.1	2,968	0.7	319
45-64	49,098	4,173,257	760	12.6	6,974	0.8	131	291	4.8	2,593	0.5	233
65-74	15,672	1,232,220	156	13.9	1,775	1.0	162	16	1.4	183	0.3	148
75-84	4,087	308,838	29	7.3	265	0.9	185	5	1.3	60	0.1	6
85 and older	604	42,339	10	13.5	109	0.6	49	2	2.7	23	0.1	6
Female, Other Eligibles												
All Ages	119,972	8,202,523	1,482	0.8	12,992	0.7	121	500	0.3	3,760	0.3	101
5 and younger	197	13,941	2	0.0	2	2.0	291	9	0.0	48	0.3	49
6-14	3,509	477,688	180	0.8	1,587	1.1	188	19	0.1	169	0.3	118
15-20	14,288	1,254,167	434	2.1	3,836	0.9	153	46	0.2	243	0.4	64
21-44	58,734	3,139,538	345	0.4	2,347	0.3	57	281	0.3	1,780	0.3	122
45-64	7,211	594,545	125	1.1	954	0.3	45	51	0.4	479	0.3	153
65-74	16,092	1,286,996	153	9.0	1,716	0.9	149	38	2.2	437	0.2	51
75-84	14,258	1,074,235	154	11.4	1,683	0.7	123	38	2.8	412	0.3	64
85 and older	5,683	361,413	89	16.4	867	0.6	58	18	3.3	192	0.1	5
Male												
All Males	117,399	12,640,062	3,167	3.2	28,235	0.8	150	1,075	1.1	8,477	0.5	256
Male, Disabled												
All Ages	81,891	8,858,517	1,802	12.4	15,903	0.8	146	918	6.3	7,280	0.6	275
5 and younger	193	16,095	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	2,719	405,692	140	17.0	1,381	1.0	198	2	0.2	24	0.1	5
15-20	3,643	582,658	199	19.6	1,867	0.8	189	6	0.6	26	0.6	219
21-44	20,410	2,646,151	629	12.0	4,810	0.7	136	358	6.8	2,693	0.6	290
45-64	48,055	4,642,627	748	11.6	6,843	0.7	128	536	8.3	4,405	0.6	271
65-74	5,643	452,993	74	17.1	858	1.0	158	15	3.5	120	0.4	185
75-84	1,034	100,836	11	9.8	132	0.7	187	1	0.9	12	0.1	6
85 and older	194	11,465	1	3.8	12	0.3	22	0	0.0	0	0.0	0

Nondual Beneficiaries

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]
NONDUAL BENEFICIARIES, MARYLAND, 2005

Beneficiary Characteristics	All Top 10 Drug Groups		ANTIPSYCHOTICS					ANTIVIRAL				
	Number of Rx	Rx $	Number of Users	Users as % of All 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 All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx $ per Benefit Month
Male, Other Eligibles												
All Ages	35,508	3,781,545	1,365	1.6	12,332	0.9	155	157	0.2	1,197	0.4	140
5 and younger	282	24,983	1	0.0	1	1.0	115	9	0.0	49	0.9	223
6-14	5,435	822,640	352	1.5	3,079	1.1	206	8	0.0	25	0.3	77
15-20	12,249	1,508,952	741	7.0	6,738	0.9	152	18	0.2	147	0.4	177
21-44	2,096	199,982	67	0.5	424	0.5	75	49	0.3	293	0.3	118
45-64	2,138	160,627	30	0.4	225	0.3	43	33	0.4	269	0.2	107
65-74	6,634	566,122	81	10.0	908	0.8	125	24	3.0	250	0.5	221
75-84	5,255	418,608	75	12.4	790	0.7	103	11	1.8	112	0.3	87
85 and older	1,419	79,631	18	8.4	167	0.8	73	5	2.3	52	0.1	7
Unknown	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2005 file for Maryland, released by CMS in 1/2009. This table was produced on 04/23/2009.
a. Table ND.7A includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2005. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2005. For information about these drug groups, see Wolters Kluwer Health, http://www.medispan. com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615 (October 26, 2007).
Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription (s) or pharmacy benefit; $ = Medicaid reimbursement.

	ANTICONVULSANT					CONTRACEPTIVES					ULCER DRUGS				
Beneficiary Characteristics	Number of Users	Users as % of All 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 All 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 All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx $ per Benefit Month
All	**5,618**	**1.9**	**49,239**	**0.8**	**$75**	**14,967**	**5.1**	**144,174**	**0.4**	**$18**	**6,541**	**2.2**	**58,945**	**0.5**	**$41**
Female															
All Females	3,064	1.6	26,462	0.8	68	14,967	7.7	144,174	0.4	18	4,051	2.1	36,799	0.5	40
Female, Disabled															
All Ages	1,780	14.0	15,840	0.9	74	137	1.1	1,113	0.4	15	2,077	16.3	19,128	0.5	44
5 and younger	1	0.3	5	0.4	9	0	0.0	0	0.0	0	21	6.5	168	0.3	16
6-14	58	15.5	610	0.9	217	1	0.3	12	0.1	4	41	10.9	450	0.6	81
15-20	49	7.6	416	0.9	131	40	6.2	354	0.2	12	27	4.2	265	0.5	84
21-44	500	13.5	4,025	0.9	91	83	2.2	637	0.4	17	370	10.0	3,050	0.5	41
45-64	960	15.9	8,443	0.9	59	12	0.2	98	0.5	19	1,077	17.8	9,123	0.6	43
65-74	168	14.9	1,852	0.8	50	0	0.0	0	0.0	0	405	36.0	4,502	0.5	43
75-84	38	9.5	427	0.6	41	1	0.3	12	0.1	4	115	28.8	1,324	0.4	37
85 and older	6	8.1	62	0.7	20	0	0.0	0	0.0	0	21	28.4	246	0.6	51
Female, Other Eligibles															
All Ages	1,284	0.7	10,622	0.7	60	14,830	8.2	143,061	0.4	18	1,974	1.1	17,671	0.4	37
5 and younger	5	0.0	23	0.7	103	1	0.0	5	0.6	16	76	0.3	346	0.4	22
6-14	100	0.4	755	1.2	155	26	0.1	159	0.3	11	26	0.1	139	0.5	19
15-20	227	1.1	1,808	1.1	142	2,192	10.7	17,939	0.3	16	78	0.4	553	0.5	18
21-44	455	0.5	2,983	0.4	33	12,584	12.8	124,734	0.4	18	410	0.4	2,392	0.3	23
45-64	139	1.2	1,165	0.4	31	27	0.2	224	0.4	20	307	2.7	2,514	0.3	36
65-74	172	10.1	1,916	0.7	38	0	0.0	0	0.0	0	478	28.1	5,199	0.4	40
75-84	128	9.5	1,374	0.7	27	0	0.0	0	0.0	0	422	31.4	4,738	0.5	41
85 and older	58	10.7	598	0.7	29	0	0.0	0	0.0	0	177	32.6	1,790	0.6	45
Male															
All Males	2,554	2.6	22,777	0.9	83	0	0.0	0	0.0	0	2,490	2.5	22,146	0.5	43
Male, Disabled															
All Ages	1,787	12.3	16,142	0.9	82	0	0.0	0	0.0	0	1,759	12.1	15,898	0.6	46
5 and younger	10	2.3	101	0.5	85	0	0.0	0	0.0	0	34	7.9	278	0.5	27
6-14	80	9.7	782	0.9	109	0	0.0	0	0.0	0	45	5.5	522	0.6	63
15-20	126	12.4	1,207	0.9	103	0	0.0	0	0.0	0	56	5.5	601	0.7	98
21-44	617	11.7	5,336	0.9	90	0	0.0	0	0.0	0	407	7.7	3,688	0.6	46
45-64	876	13.6	7,856	1.0	72	0	0.0	0	0.0	0	1,054	16.3	9,013	0.6	43
65-74	69	15.9	752	0.9	67	0	0.0	0	0.0	0	121	27.9	1,308	0.5	39
75-84	7	6.3	84	0.6	56	0	0.0	0	0.0	0	35	31.3	406	0.5	42
85 and older	2	7.7	24	0.4	59	0	0.0	0	0.0	0	7	26.9	82	0.5	46

Nondual Beneficiaries

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY,
BY SEX, BASIS OF ELIGIBILITY, AND AGE[a, b, c]
NONDUAL BENEFICIARIES, MARYLAND, 2005

Beneficiary Characteristics	ANTICONVULSANT					CONTRACEPTIVES					ULCER DRUGS				
	Number of Users	Users as % of All 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 All 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 All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx $ per Benefit Month
Male, Other Eligibles															
All Ages	767	0.9	6,635	0.9	86	0	0.0	0	0.0	0	731	0.9	6,248	0.5	36
5 and younger	11	0.0	31	0.6	78	0	0.0	0	0.0	0	94	0.4	436	0.4	24
6-14	139	0.6	1,107	1.1	123	0	0.0	0	0.0	0	28	0.1	142	0.6	45
15-20	301	2.9	2,770	1.0	109	0	0.0	0	0.0	0	77	0.7	615	0.5	21
21-44	97	0.7	577	0.3	29	0	0.0	0	0.0	0	70	0.5	407	0.3	27
45-64	53	0.6	404	0.5	30	0	0.0	0	0.0	0	86	1.1	632	0.4	37
65-74	68	8.4	748	0.9	63	0	0.0	0	0.0	0	184	22.8	2,005	0.5	36
75-84	71	11.7	772	0.9	63	0	0.0	0	0.0	0	139	22.9	1,508	0.5	42
85 and older	27	12.6	226	0.7	29	0	0.0	0	0.0	0	53	24.8	503	0.5	47
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2005 file for Maryland, released by CMS in 1/2009. This table was produced on 04/23/2009.
a. Table ND.7B includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2005. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2005. For information about these drug groups, see Wolters Kluwer Health, http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615 (October 26, 2007).
Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription (s) or pharmacy benefit; $ = Medicaid reimbursement.

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY,
BY SEX, BASIS OF ELIGIBILITY, AND AGE[a, b, c]
NONDUAL BENEFICIARIES, MARYLAND, 2005

Beneficiary Characteristics	ANTIHYPERLIPIDEMIC					ANTIDEPRESSANTS					ANALGESICS - Narcotic				
	Number of Users	Users as % of All 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 All 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 All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx $ per Benefit Month
All	**4,635**	**1.6**	**45,004**	**0.5**	**$47**	**8,003**	**2.7**	**67,568**	**0.6**	**$29**	**11,185**	**3.8**	**87,627**	**0.5**	**$19**
Female															
All Females	3,104	1.6	30,969	0.5	47	4,977	2.6	42,004	0.6	29	7,297	3.7	57,467	0.4	16
Female, Disabled															
All Ages	1,529	12.0	14,646	0.5	48	2,376	18.7	20,640	0.6	32	2,983	23.5	25,337	0.6	24
5 and younger	0	0.0	0	0.0	0	1	0.3	12	0.1	7	7	2.2	67	0.1	1
6-14	1	0.3	12	0.7	43	5	1.3	59	0.3	9	7	1.9	82	0.1	1
15-20	0	0.0	0	0.0	0	51	7.9	482	0.8	53	20	3.1	168	0.2	10
21-44	102	2.7	808	0.5	37	659	17.7	5,054	0.5	26	784	21.1	5,970	0.7	27
45-64	756	12.5	6,242	0.5	47	1,353	22.3	11,531	0.7	35	1,606	26.5	12,782	0.8	30
65-74	507	45.1	5,685	0.5	50	226	20.1	2,571	0.7	31	420	37.3	4,654	0.4	11
75-84	148	37.1	1,719	0.5	52	72	18.0	823	0.5	23	119	29.8	1,381	0.3	6
85 and older	15	20.3	180	0.6	58	9	12.2	108	0.7	55	20	27.0	233	0.3	12
Female, Other Eligibles															
All Ages	1,575	0.9	16,323	0.5	46	2,601	1.4	21,364	0.5	26	4,314	2.4	32,130	0.3	10
5 and younger	0	0.0	0	0.0	0	1	0.0	3	0.3	2	11	0.0	43	0.3	2
6-14	0	0.0	0	0.0	0	92	0.4	696	0.8	30	35	0.1	186	0.2	2
15-20	1	0.0	12	0.1	3	314	1.5	2,293	0.8	40	247	1.2	1,277	0.3	3
21-44	124	0.1	780	0.3	32	1,094	1.1	7,426	0.3	21	2,322	2.4	14,051	0.3	11
45-64	264	2.3	2,230	0.4	37	451	3.9	3,814	0.4	28	674	5.9	5,507	0.3	13
65-74	597	35.1	6,571	0.5	48	267	15.7	2,952	0.6	26	474	27.9	5,180	0.3	10
75-84	496	36.9	5,687	0.5	49	242	18.0	2,726	0.6	24	375	27.9	4,150	0.3	6
85 and older	93	17.1	1,043	0.6	51	140	25.8	1,454	0.7	30	176	32.4	1,736	0.4	14
Male															
All Males	1,531	1.6	14,035	0.5	47	3,026	3.1	25,564	0.6	30	3,888	4.0	30,160	0.6	24
Male, Disabled															
All Ages	945	6.5	8,287	0.6	49	1,974	13.6	17,070	0.6	29	2,703	18.6	21,876	0.7	28
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	5	1.2	46	0.1	2
6-14	0	0.0	0	0.0	0	39	4.7	387	0.8	34	20	2.4	202	0.1	1
15-20	3	0.3	30	0.3	24	91	8.9	827	0.7	41	28	2.8	293	0.2	1
21-44	134	2.5	1,103	0.6	47	613	11.6	4,880	0.5	24	830	15.8	6,307	0.7	31
45-64	616	9.5	4,954	0.6	47	1,138	17.6	9,925	0.6	30	1,660	25.7	13,366	0.8	31
65-74	149	34.3	1,699	0.6	56	79	18.2	887	0.7	26	113	26.0	1,108	0.4	8
75-84	38	33.9	451	0.5	51	13	11.6	156	0.5	34	38	33.9	452	0.2	4
85 and older	5	19.2	50	0.5	49	1	3.8	8	1.0	94	9	34.6	102	0.2	4

Nondual Beneficiaries

Beneficiary Characteristics	ANTIHYPERLIPIDEMIC					ANTIDEPRESSANTS					ANALGESICS - Narcotic				
	Number of Users	Users as % of All 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 All 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 All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx $ per Benefit Month
Male, Other Eligibles															
All Ages	586	0.7	5,748	0.5	45	1,052	1.3	8,494	0.6	32	1,185	1.4	8,284	0.3	13
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	16	0.1	70	0.2	1
6-14	0	0.0	0	0.0	0	123	0.5	938	0.8	44	43	0.2	199	0.2	2
15-20	4	0.0	41	0.8	51	477	4.5	3,712	0.7	36	124	1.2	628	0.3	4
21-44	55	0.4	350	0.3	28	136	1.0	825	0.4	21	418	3.0	2,039	0.4	22
45-64	114	1.4	789	0.3	30	96	1.2	704	0.4	23	196	2.4	1,266	0.5	22
65-74	235	29.2	2,598	0.5	48	91	11.3	1,024	0.5	25	192	23.8	2,050	0.2	7
75-84	152	25.0	1,713	0.5	49	94	15.5	965	0.6	29	144	23.7	1,573	0.3	10
85 and older	26	12.1	257	0.6	58	35	16.4	326	0.7	19	52	24.3	459	0.3	4
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2005 file for Maryland, released by CMS in 1/2009. This table was produced on 04/23/2009.
a. Table ND.7C includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2005. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2005. For information about these drug groups, see Wolters Kluwer Health, http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615 (October 26, 2007).
Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription (s) or pharmacy benefit; $ = Medicaid reimbursement.

Beneficiary Characteristics	ANTIDIABETIC					HEMATOPOIETIC AGENTS						
	Number of Users	Users as % of All 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 All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx $ per Benefit Month	Number of Beneficiaries	Number of Benefit Months
All	**6,241**	**2.1**	**56,578**	**0.6**	**$29**	**2,571**	**0.9**	**22,129**	**0.5**	**$74**	**292,319**	**1,491,936**
Female												
All Females	4,125	2.1	38,326	0.6	29	1,605	0.8	13,432	0.4	70	194,650	1,123,923
Female, Disabled												
All Ages	2,058	16.2	18,818	0.7	32	733	5.8	6,743	0.5	96	12,707	79,667
5 and younger	0	0.0	0	0.0	0	3	0.9	31	0.1	1	321	1,566
6-14	3	0.8	18	0.4	54	6	1.6	71	1.1	152	375	2,148
15-20	8	1.2	58	0.8	53	5	0.8	53	0.3	2	645	3,239
21-44	180	4.8	1,341	0.6	34	189	5.1	1,670	0.5	128	3,713	20,714
45-64	1,209	20.0	10,118	0.7	32	385	6.4	3,341	0.6	106	6,055	35,028
65-74	484	43.0	5,245	0.6	31	108	9.6	1,156	0.4	47	1,125	11,687
75-84	159	39.8	1,878	0.6	36	33	8.3	382	0.3	29	399	4,508
85 and older	15	20.3	160	0.6	24	4	5.4	39	0.3	5	74	777
Female, Other Eligibles												
All Ages	2,067	1.1	19,508	0.5	26	872	0.5	6,689	0.3	44	181,943	1,044,256
5 and younger	0	0.0	0	0.0	0	5	0.0	26	0.4	34	24,632	45,595
6-14	15	0.1	44	0.7	49	12	0.1	79	0.6	190	23,586	45,263
15-20	28	0.1	123	0.7	44	114	0.6	630	0.3	2	20,570	77,410
21-44	380	0.4	2,238	0.4	21	373	0.4	2,284	0.2	8	98,076	753,725
45-64	326	2.8	2,605	0.4	21	68	0.6	527	0.3	66	11,492	85,916
65-74	655	38.6	7,087	0.5	27	135	7.9	1,472	0.4	65	1,699	16,767
75-84	527	39.2	5,921	0.6	28	104	7.7	1,107	0.5	68	1,345	14,171
85 and older	136	25.0	1,490	0.7	24	61	11.2	564	0.7	97	543	5,409
Male												
All Males	2,116	2.2	18,252	0.6	30	966	1.0	8,697	0.5	81	97,658	367,962
Male, Disabled												
All Ages	1,456	10.0	12,355	0.6	31	778	5.3	6,858	0.5	86	14,563	84,964
5 and younger	0	0.0	0	0.0	0	1	0.2	7	0.1	1	428	1,961
6-14	0	0.0	0	0.0	0	5	0.6	49	0.5	12	824	4,243
15-20	4	0.4	40	1.1	76	9	0.9	76	0.5	28	1,017	5,988
21-44	231	4.4	1,783	0.6	32	149	2.8	1,270	0.4	106	5,262	29,224
45-64	1,013	15.7	8,227	0.7	31	559	8.7	4,829	0.6	89	6,460	37,748
65-74	153	35.3	1,679	0.6	33	40	9.2	454	0.5	21	434	4,233
75-84	44	39.3	522	0.5	24	10	8.9	117	0.5	99	112	1,286
85 and older	11	42.3	104	0.7	22	5	19.2	56	0.3	2	26	281

Nondual Beneficiaries

Beneficiary Characteristics	ANTIDIABETIC					HEMATOPOIETIC AGENTS						
	Number of Users	Users as % of All 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 All 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	660	0.8	5,897	0.5	27	188	0.2	1,839	0.4	64	83,095	282,998
5 and younger	0	0.0	0	0.0	0	5	0.0	40	0.2	18	25,090	46,786
6-14	14	0.1	62	0.6	49	4	0.0	30	0.2	1	23,520	45,739
15-20	10	0.1	63	0.6	46	7	0.1	40	0.5	1	10,554	27,272
21-44	74	0.5	325	0.5	34	15	0.1	87	0.3	276	14,148	87,764
45-64	127	1.6	815	0.5	22	20	0.2	182	0.3	7	8,156	59,810
65-74	246	30.5	2,612	0.5	28	69	8.6	733	0.4	58	806	7,524
75-84	146	24.1	1,543	0.6	29	47	7.7	528	0.5	85	607	6,094
85 and older	43	20.1	477	0.5	18	21	9.8	199	0.4	28	214	2,009
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	11	51

Source: Data for this table are from the MAX 2005 file for Maryland, released by CMS in 1/2009. This table was produced on 04/23/2009.
a. Table ND.7D includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2005. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2005. For information about these drug groups, see Wolters Kluwer Health, http://www.medispan. com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615 (October 26, 2007).
Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription (s) or pharmacy; $ = Medicaid reimbursement.

Nondual Beneficiaries

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
BY BENEFICIARY CHARACTERISTIC[a, b]
NONDUAL BENEFICIARIES, MARYLAND, 2005

Beneficiary Characteristics	Rx $ per Benefit Month	Number of Rx per Benefit Month	Number of All-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents
All	**$550**	**9.1**	**1,879**	**18,864**
Age				
0-64	630	9.9	1,239	12,426
65-74	502	8.7	229	2,436
75-84	407	7.1	221	2,237
85 and older	235	5.7	190	1,765
Unknown	0	0.0	0	0
Gender				
Female	539	9.2	1,037	10,491
Male	563	8.9	842	8,373
Unknown	0	0.0	0	0
Race				
White	505	9.3	669	6,757
African American	595	8.9	1,001	10,092
Other/unknown	475	8.9	209	2,015
Basis of Eligibility[c]				
Aged	374	7.1	545	5,416
Disabled	621	9.9	1,331	13,433
Adults	163	8.7	2	3
Children	0	0.0	1	12
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 2005 file for Maryland, released by CMS in 1/2009. This table was produced on 04/23/2009.
a. Table ND.8 includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their 2005 Medicaid enrollment. A total of 1,632 beneficiaries who were in nursing facilities for part of their enrollment and their 13,027 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.

Nondual Beneficiaries

TABLE ND.9
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
BY BRAND STATUS AND THERAPEUTIC CATEGORY[a, b, c, d, e]
NONDUAL BENEFICIARIES, MARYLAND, 2005

Therapeutic Category	Number of Rx per Benefit Month Among Users				$ per Benefit Month Among Users				$ per Rx				Total Number of Rx	Total Rx $	Users		
	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic			Number of Users	As a Percentage of All-Year Nursing Facility Residents	Number of Benefit Months
Anti-infective Agents	1.0	0.5	0.1	0.4	$156	$136	$10	$10	$153	$272	$119	$23	13,223	$2,023,949	1,235	65.7	12,964
Biologicals	0.1	0.0	0.0	0.1	3	0	0	3	30	0	0	30	21	631	20	1.1	221
Antineoplastic Agents	0.5	0.1	0.0	0.4	82	41	0	42	163	321	0	110	511	83,313	101	5.4	1,012
Endocrine/Metabolic Drugs	1.3	0.5	0.2	0.7	52	39	6	7	39	85	31	10	11,255	436,796	792	42.2	8,364
Cardiovascular Agents	2.3	0.8	0.0	1.5	70	52	0	17	31	68	11	12	30,648	943,548	1,312	69.8	13,551
Respiratory Agents	0.9	0.3	0.0	0.6	32	26	0	5	34	83	44	8	7,259	244,386	745	39.6	7,716
Gastrointestinal Agents	1.2	0.6	0.0	0.6	61	53	0	8	51	92	49	13	15,550	792,003	1,238	65.9	12,885
Genitourinary Agents	0.5	0.3	0.0	0.3	23	18	0	5	42	72	26	16	2,516	106,022	436	23.2	4,588
CNS Drugs	1.9	1.0	0.0	0.9	153	135	3	16	81	135	66	18	27,290	2,210,521	1,370	72.9	14,417
Stimulants/Anti-obesity/Anorexia	0.9	0.3	0.0	0.6	42	34	0	7	48	134	17	12	416	19,910	45	2.4	476
Miscellaneous Psychological/ Neurological Agents	0.9	0.9	0.0	0.0	146	144	0	1	161	162	0	122	1,568	253,201	162	8.6	1,739
Analgesics and Anesthetics	1.6	0.1	0.2	1.3	58	11	23	25	37	100	118	19	16,015	597,255	1,001	53.3	10,225
Neuromuscular Agents	1.7	0.5	0.2	1.0	97	50	8	39	57	107	42	37	18,355	1,048,722	1,013	53.9	10,818
Nutritional Products	0.7	0.0	0.0	0.7	9	0	0	8	12	11	11	12	5,318	63,364	716	38.1	7,396
Hematological Agents	1.3	0.5	0.3	0.5	133	125	3	5	102	242	13	9	11,207	1,142,774	862	45.9	8,602
Topical Products	0.7	0.2	0.1	0.4	29	18	4	7	42	74	53	18	8,645	361,966	1,160	61.7	12,329
Miscellaneous Products	0.3	0.1	0.0	0.3	19	9	0	10	55	144	284	35	799	43,683	218	11.6	2,334
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	5	0	0	0	20	0	0	0	143	2,863	58	3.1	624
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.	170,739	10,374,907	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for Maryland, released by CMS in 1/2009. This table was produced on 04/23/2009.
a. Table ND.9 includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2005. A total of 1,632 beneficiaries who were in nursing facilities for part of their enrollment and their 13,027 benefit months were excluded from the analysis.
b. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 2005. A beneficiary who used drugs from two or more categories was counted as a user for each category. Therefore, the sum of users across categories may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
c. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
d. For information about these therapeutic categories, see Wolters Kluwer Health, http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615 (October 26, 2007).
e. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. For information about this classification method, see Wolters Kluwer Health, http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615 (October 26, 2007).
In Maryland, 0.1 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.
Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; CNS = Central Nervous System; MAX = Medicaid Analytic Extract; n.a. = not applicable; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; $ = Medicaid reimbursement.

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]
NONDUAL BENEFICIARIES, MARYLAND, 2005

Top 10 Drug Groups in Nursing Facilities	Total Medicaid Rx $	Users					Among Users
		Number of Users	As a Percentage of All-Year Nursing Facility Residents	Number of Benefit Months	Number of Rx per Benefit Month	$ per Rx	Rx $ per Benefit Month
ANTIPSYCHOTICS	$1,513,193	1,004	53.4	10,955	0.9	$159	$138
ANTIVIRAL	1,342,404	464	24.7	4,902	0.6	432	274
ANTICONVULSANT	892,977	1,114	59.3	12,001	1.2	65	74
HEMATOPOIETIC AGENTS	635,672	485	25.8	4,730	0.8	169	134
ULCER DRUGS	615,690	1,182	62.9	12,353	0.7	67	50
ANTIDEPRESSANTS	576,591	1,329	70.7	14,280	0.8	49	40
ANALGESICS - Narcotic	479,333	1,195	63.6	12,119	1.1	37	40
ANTIDIABETIC	410,406	1,053	56.0	11,263	0.9	41	36
ANTIHYPERLIPIDEMIC	360,330	543	28.9	5,914	0.7	81	61
ANTICOAGULANTS	291,551	533	28.4	5,269	1.0	54	55
Total	7,118,147	8,902		93,786	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for Maryland, released by CMS in 1/2009. This table was produced on 04/23/2009.
a. Table ND.10 includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2005. A total of 1,632 beneficiaries who were in nursing facilities for part of their enrollment and their 13,027 benefit months were excluded from the analysis.
b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2005. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
c. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
d. The top 10 drug groups were determined based on total 2005 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615 (October 26, 2007).
Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; $ = Medicaid reimbursement.

Nondual Beneficiaries

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]
NONDUAL BENEFICIARIES, MARYLAND, 2005

Beneficiary Characteristics	All Top 10 Drug Groups		ANTIPSYCHOTICS					ANTIVIRAL				
	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	**84,089**	**$7,118,147**	**1,004**	**53.4**	**10,955**	**0.9**	**$138**	**464**	**24.7**	**4,902**	**0.6**	**$274**
Female												
All Females	46,704	3,826,412	583	56.2	6,420	0.9	146	216	20.8	2,259	0.6	250
Female, Disabled												
All Ages	35,520	3,025,043	399	60.6	4,421	1.0	160	185	28.1	1,901	0.7	289
64 or younger	32,402	2,746,861	352	59.3	3,909	1.0	154	180	30.3	1,841	0.7	291
65-74	2,829	245,578	41	70.7	440	1.1	207	5	8.6	60	0.5	219
75-84	266	30,881	6	120.0	72	0.9	198	0	0.0	0	0.0	0
85 and older	23	1,723	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles												
All Ages	11,184	801,369	184	48.5	1,999	0.8	117	31	8.2	358	0.2	40
64 or younger	103	6,833	1	33.3	12	1.0	361	0	0.0	0	0.0	0
65-74	3,302	282,686	52	65.0	612	0.9	174	7	8.8	76	0.6	168
75-84	4,450	318,774	69	49.6	764	0.8	116	15	10.8	174	0.1	6
85 and older	3,329	193,076	62	39.5	611	0.6	55	9	5.7	108	0.1	4
Male												
All Males	37,385	3,291,735	421	50.0	4,535	0.8	127	248	29.5	2,643	0.7	295
Male, Disabled												
All Ages	31,862	2,846,723	338	50.2	3,630	0.8	129	231	34.3	2,462	0.7	305
64 or younger	30,248	2,738,433	318	49.9	3,404	0.8	127	230	36.1	2,450	0.7	307
65-74	1,428	90,627	18	56.3	202	0.9	121	1	3.1	12	0.1	4
75-84	171	17,552	2	66.7	24	1.6	533	0	0.0	0	0.0	0
85 and older	15	111	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male, Other Eligibles												
All Ages	5,523	445,012	83	49.1	905	0.8	117	17	10.1	181	0.5	150
64 or younger	286	12,385	2	40.0	24	0.6	56	1	20.0	12	0.2	1
65-74	2,374	194,611	34	57.6	395	0.9	135	8	13.6	87	0.7	214
75-84	2,313	209,867	37	50.0	390	0.8	116	4	5.4	40	0.4	202
85 and older	550	28,149	10	32.3	96	0.6	62	4	12.9	42	0.1	9
Unknown	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

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]
NONDUAL BENEFICIARIES, MARYLAND, 2005

Beneficiary Characteristics	ANTICONVULSANT					HEMATOPOIETIC AGENTS					ULCER DRUGS				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx $	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx $	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx $
All	**1,114**	**59.3**	**12,001**	**1.2**	**$74**	**485**	**25.8**	**4,730**	**0.8**	**$134**	**1,182**	**62.9**	**12,353**	**0.7**	**$50**
Female															
All Females	589	56.8	6,407	1.1	66	240	23.1	2,311	0.8	156	625	60.3	6,543	0.7	50
Female, Disabled															
All Ages	477	72.5	5,207	1.1	71	162	24.6	1,621	0.8	151	415	63.1	4,452	0.7	51
64 or younger	442	74.4	4,807	1.1	71	150	25.3	1,501	0.8	148	370	62.3	3,963	0.7	51
65-74	33	56.9	376	1.2	69	11	19.0	108	0.6	153	43	74.1	465	0.8	48
75-84	2	40.0	24	1.1	156	1	20.0	12	0.2	489	1	20.0	12	0.2	16
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	100.0	12	0.9	73
Female, Other Eligibles															
All Ages	112	29.6	1,200	1.0	45	78	20.6	690	0.9	167	210	55.4	2,091	0.8	48
64 or younger	1	33.3	12	0.9	104	2	66.7	4	1.3	6	1	33.3	2	1.0	76
65-74	46	57.5	519	1.0	48	21	26.3	196	0.7	116	51	63.8	529	0.7	48
75-84	37	26.6	379	0.9	45	31	22.3	297	1.0	198	78	56.1	806	0.7	46
85 and older	28	17.8	290	0.9	36	24	15.3	193	0.9	174	80	51.0	754	0.8	51
Male															
All Males	525	62.4	5,594	1.2	84	245	29.1	2,419	0.8	114	557	66.2	5,810	0.7	50
Male, Disabled															
All Ages	449	66.7	4,762	1.2	83	201	29.9	1,977	0.8	106	451	67.0	4,711	0.7	50
64 or younger	425	66.7	4,494	1.2	83	193	30.3	1,881	0.8	108	426	66.9	4,443	0.7	51
65-74	22	68.8	244	1.3	82	7	21.9	84	0.7	80	22	68.8	232	0.7	39
75-84	2	66.7	24	0.8	66	0	0.0	0	0.0	0	2	66.7	24	0.6	29
85 and older	0	0.0	0	0.0	0	1	100.0	12	0.7	4	1	100.0	12	0.6	5
Male, Other Eligibles															
All Ages	76	45.0	832	1.2	89	44	26.0	442	0.9	150	106	62.7	1,099	0.7	49
64 or younger	2	40.0	24	1.3	65	1	20.0	12	0.1	22	5	100.0	53	0.9	73
65-74	28	47.5	311	1.3	97	14	23.7	130	0.9	174	42	71.2	466	0.7	41
75-84	39	52.7	438	1.2	89	22	29.7	240	0.9	165	42	56.8	431	0.8	57
85 and older	7	22.6	59	1.0	57	7	22.6	60	0.7	60	17	54.8	149	0.6	44
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

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]
NONDUAL BENEFICIARIES, MARYLAND, 2005

Beneficiary Characteristics	ANTIDEPRESSANTS					ANALGESICS - Narcotic					ANTIDIABETIC				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx $	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx $	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx $
All	**1,329**	**70.7**	**14,280**	**0.8**	**$40**	**1,195**	**63.6**	**12,119**	**1.1**	**$40**	**1,053**	**56.0**	**11,263**	**0.9**	**$36**
Female															
All Females	753	72.6	8,077	0.9	43	651	62.8	6,587	1.1	41	634	61.1	6,863	0.9	37
Female, Disabled															
All Ages	553	84.0	5,989	0.9	44	487	74.0	5,015	1.2	45	425	64.6	4,589	1.0	38
64 or younger	511	86.0	5,517	0.9	43	451	75.9	4,619	1.2	46	366	61.6	4,004	1.0	38
65-74	39	67.2	436	0.9	53	35	60.3	384	0.7	33	51	87.9	489	1.0	41
75-84	2	40.0	24	1.0	6	1	20.0	12	0.2	1	8	160.0	96	1.1	42
85 and older	1	100.0	12	1.0	71	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	200	52.8	2,088	0.8	40	164	43.3	1,572	0.7	28	209	55.1	2,274	0.8	34
64 or younger	3	100.0	16	1.1	45	3	100.0	14	0.5	2	2	66.7	2	1.0	7
65-74	45	56.3	468	0.9	52	46	57.5	441	0.8	43	56	70.0	624	0.8	31
75-84	75	54.0	795	0.8	36	55	39.6	558	0.6	17	101	72.7	1,095	0.8	39
85 and older	77	49.0	809	0.8	37	60	38.2	559	0.6	28	50	31.8	553	0.8	27
Male															
All Males	576	68.4	6,203	0.8	37	544	64.6	5,532	1.1	38	419	49.8	4,400	0.9	36
Male, Disabled															
All Ages	483	71.8	5,189	0.8	37	462	68.6	4,747	1.2	41	333	49.5	3,489	0.9	39
64 or younger	459	72.1	4,908	0.8	37	445	69.9	4,587	1.2	42	307	48.2	3,188	0.9	39
65-74	24	75.0	281	0.8	36	16	50.0	148	0.7	12	23	71.9	265	0.9	33
75-84	0	0.0	0	0.0	0	1	33.3	12	0.1	0	3	100.0	36	1.2	24
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male, Other Eligibles															
All Ages	93	55.0	1,014	0.8	36	82	48.5	785	0.4	16	86	50.9	911	0.8	25
64 or younger	2	40.0	17	0.9	58	4	80.0	41	0.8	6	9	180.0	94	0.9	21
65-74	31	52.5	365	0.8	37	30	50.8	293	0.3	5	42	71.2	438	0.7	26
75-84	44	59.5	472	0.7	37	32	43.2	322	0.4	34	28	37.8	295	0.8	30
85 and older	16	51.6	160	0.7	29	16	51.6	129	0.5	3	7	22.6	84	0.7	14
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

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]
NONDUAL BENEFICIARIES, MARYLAND, 2005

	ANTIHYPERLIPIDEMIC					ANTICOAGULANTS						
Beneficiary Characteristics	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	**543**	**28.9**	**5,914**	**0.7**	**$61**	**533**	**28.4**	**5,269**	**1.0**	**$55**	**1,879**	**18,864**
Female												
All Females	323	31.1	3,519	0.7	59	267	25.7	2,619	1.1	51	1,037	10,491
Female, Disabled												
All Ages	238	36.2	2,621	0.7	59	197	29.9	1,931	1.0	56	658	6,751
64 or younger	209	35.2	2,291	0.7	58	183	30.8	1,796	1.0	58	594	6,057
65-74	26	44.8	294	0.7	62	13	22.4	123	0.6	20	58	622
75-84	3	60.0	36	0.6	66	1	20.0	12	1.2	23	5	60
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12
Female, Other Eligibles												
All Ages	85	22.4	898	0.8	61	70	18.5	688	1.3	36	379	3,740
64 or younger	0	0.0	0	0.0	0	1	33.3	12	3.9	26	3	15
65-74	25	31.3	258	0.9	80	14	17.5	134	0.9	48	80	862
75-84	43	30.9	453	0.7	53	30	21.6	307	1.2	38	139	1,385
85 and older	17	10.8	187	0.8	53	25	15.9	235	1.4	27	157	1,478
Male												
All Males	220	26.1	2,395	0.8	64	266	31.6	2,650	1.0	60	842	8,373
Male, Disabled												
All Ages	175	26.0	1,915	0.8	64	229	34.0	2,244	1.0	64	673	6,682
64 or younger	164	25.7	1,794	0.8	63	220	34.5	2,138	1.0	66	637	6,301
65-74	10	31.3	109	1.0	77	7	21.9	82	0.6	17	32	333
75-84	1	33.3	12	1.0	77	2	66.7	24	1.8	30	3	36
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12
Male, Other Eligibles												
All Ages	45	26.6	480	0.8	63	37	21.9	406	0.8	40	169	1,691
64 or younger	3	60.0	29	0.7	58	4	80.0	41	0.8	13	5	53
65-74	22	37.3	248	0.9	66	18	30.5	198	1.0	43	59	619
75-84	15	20.3	160	0.8	62	10	13.5	113	0.6	61	74	756
85 and older	5	16.1	43	0.7	48	5	16.1	54	0.5	4	31	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 Maryland, released by CMS in 1/2009. This table was produced on 04/23/2009.
a. Table ND.10D includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2005. A total of 1,632 beneficiaries who were in nursing facilities for part of their enrollment and their 13,027 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.

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 Nondual Rx $	Total Number of Beneficiaries
All	**14,204**	**4.9**	**0.2**	**65,062**	**$5**	**$1,559,925**	**$24**	**2.5**	**292,319**
Age									
5 and younger	1,116	2.2	0.0	2,091	6	282,850	135	28.6	50,471
6-14	892	1.8	0.1	2,494	6	276,260	111	4.6	48,305
15-20	1,055	3.2	0.1	3,390	6	184,721	54	2.6	32,786
21-44	4,620	3.8	0.2	19,212	3	333,385	17	2.0	121,199
45-64	4,085	12.7	0.7	23,535	10	314,676	13	1.7	32,163
65-74	1,322	32.5	2.0	8,047	23	94,980	12	1.4	4,064
75-84	812	33.0	1.9	4,580	21	52,344	11	1.3	2,463
85 and older	302	35.2	2.0	1,713	24	20,709	12	1.8	857
Unknown	0	0.0	0.0	0	0	0	0	0.0	11
Basis of Eligibility[c]									
Aged	1,604	30.7	1.7	9,054	21	108,324	12	1.4	5,223
Disabled	6,270	23.0	1.5	39,888	38	1,022,666	26	2.9	27,270
Adults	3,592	2.7	0.1	10,409	1	130,399	13	1.7	134,234
Children	2,580	2.1	0.0	4,909	2	288,277	59	2.8	125,188
Unknown	158	39.1	2.0	802	25	10,259	13	1.4	404
Gender									
Female	9,396	4.8	0.2	41,395	4	793,120	19	2.3	194,658
Male	4,808	4.9	0.2	23,667	8	766,805	32	2.8	97,661
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Race									
White	6,138	6.5	0.3	31,762	8	742,155	23	3.0	94,255
African American	6,118	4.0	0.2	25,947	4	585,473	23	2.0	151,982
Other/unknown	1,948	4.2	0.2	7,353	5	232,297	32	3.2	46,082
Use of Nursing Facilities[d]									
Entire year	1,158	61.6	6.5	12,292	72	134,831	11	1.3	1,879
Part year	1,065	65.3	4.9	7,934	72	116,952	15	1.8	1,632
None	11,981	4.1	0.2	44,836	5	1,308,142	29	2.9	288,808
Maintenance Assistance Status									
Cash	5,978	12.4	0.7	35,356	15	742,917	21	2.5	48,041
Medically needy	4,622	13.5	0.6	20,463	9	295,600	14	1.5	34,145
Poverty related	2,101	2.0	0.0	3,669	1	151,057	41	3.4	104,189
Other/unknown	1,503	1.4	0.1	5,574	3	370,351	66	5.1	105,944

Source: Data for this table are from the MAX 2005 file for Maryland, released by CMS in 1/2009. This table was produced on 04/23/2009.
a. Table ND.11 includes the beneficiaries represented by Cell K of Table 1. Beneficiaries include all nondual 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 ND.12
USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
AMONG NONDUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC[a,b]
MARYLAND, 2005

Beneficiary Characteristics	Number Rx per Benefit Month	Rx $ per Benefit Month	$ per Rx	Barbiturate $ per Benefit Month	Benzodiazepine $ per Benefit Month	Number of Benefit Months
All	**0.0**	**$1**	**$24**	**$0**	**$0**	**1,491,936**
Age						
5 and younger	0.0	3	135	0	1	95,908
6-14	0.0	3	111	0	0	97,393
15-20	0.0	2	54	0	0	113,909
21-44	0.0	0	17	0	0	891,427
45-64	0.1	1	13	0	1	218,502
65-74	0.2	2	12	0	0	40,211
75-84	0.2	2	11	0	0	26,059
85 and older	0.2	2	12	0	0	8,476
Unknown	0.0	0	0	0	0	51
Basis of Eligibility[c]						
Aged	0.2	2	12	0	0	52,150
Disabled	0.2	6	26	0	1	164,631
Adults	0.0	0	13	0	0	989,013
Children	0.0	1	59	0	0	282,198
Unknown	0.2	3	13	0	1	3,944
Gender						
Female	0.0	1	19	0	0	1,123,964
Male	0.1	2	32	0	1	367,972
Unknown	0.0	0	0	0	0	0
Race						
White	0.1	1	23	0	1	543,235
African American	0.0	1	23	0	0	742,761
Other/unknown	0.0	1	32	0	0	205,940
Use of Nursing Facilities[d]						
Entire year	0.7	7	11	0	2	18,864
Part year	0.6	9	15	0	2	13,027
None	0.0	1	29	0	0	1,460,045
Maintenance Assistance Status						
Cash	0.2	4	21	0	1	199,989
Medically needy	0.1	2	14	0	1	144,530
Poverty related	0.0	1	41	0	0	212,577
Other/unknown	0.0	0	66	0	0	934,840

Source: Data for this table are from the MAX 2005 file for Maryland, released by CMS in 1/2009. This table was produced on 04/23/2009.
a. Table ND.12 includes the beneficaries represented by Cell K of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits. Beneficiaries include all nondual 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 beneficaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.
d. Please refer to footnote f on Table 1 for methodology used to determine use of nursing facilities.

TABLE ND.13
USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D FOR SELECTED DRUG CATEGORIES AMONG NONDUALS[a,b,c]
MARYLAND, 2005

Drug Category	Number of Users	Rx $ per User	Total Rx $	Rx $ as a Percentage of All Part D Excluded Rx $	Total Number Rx.	$ per Rx	Number Rx as a Percentage of All Part D Excluded Rx
All	**17,530**	**$89**	**$1,559,925**	**100.0**	**65,062**	**$24**	**100.0**
Anorexia or weight loss/gain	76	88	6,722	0.4	170	40	0.3
Fertility drugs	1	16	16	0.0	1	16	0.0
Drugs for cosmetic purposes	5	13	63	0.0	6	11	0.0
Cough and cold medications	3,347	27	88,877	5.7	5,476	16	8.4
Vitamins and minerals	3,161	53	168,842	10.8	14,825	11	22.8
Non-prescription drugs	3,536	201	710,773	45.6	9,897	72	15.2
Barbiturates	234	66	15,556	1.0	2,111	7	3.2
Benzodiazepines	6,601	62	409,002	26.2	30,917	13	47.5
Other Part D Excl Rx Drugs	569	281	160,074	10.3	1,659	96	2.5

Source: Data for this table are from the MAX 2005 file for Maryland, released by CMS in 1/2009. This table was produced on 04/23/2009.
a. Table ND.13 includes the beneficaries represented by Cell K of Table 1. Beneficiaries include all nondual 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 ND11.
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.

Nondual Beneficiaries

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

NONDUAL BENEFICIARIES, MARYLAND, 2005

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Blind/ Disabled	Adults	Children	Other/ Unknown	All	Aged	Blind/ Disabled	Adults	Children	Other/ Unknown
All	**731,554**	**5,266**	**85,855**	**167,571**	**472,458**	**404**	**7,212,165**	**52,953**	**915,097**	**1,548,244**	**4,691,923**	**3,948**
Age												
5 and younger	182,897	4	3,276	1	179,616	0	1,750,151	48	36,200	1	1,713,902	0
6-14	205,681	11	9,803	24	195,843	0	2,143,081	130	113,389	149	2,029,413	0
15-20	106,937	4	8,063	3,836	95,034	0	1,053,303	44	90,353	26,135	936,771	0
21-44	170,458	18	27,711	140,742	1,945	42	1,633,285	198	291,498	1,329,531	11,692	366
45-64	58,107	67	34,770	22,912	0	358	555,624	603	359,424	192,041	0	3,556
65-74	4,131	2,463	1,620	44	0	4	42,016	24,330	17,369	291	0	26
75-84	2,465	1,944	512	9	0	0	26,083	20,196	5,806	81	0	0
85 and older	858	755	100	3	0	0	8,477	7,404	1,058	15	0	0
Unknown	20	0	0	0	20	0	145	0	0	0	145	0
Gender												
Female	428,025	3,623	41,592	142,827	239,579	404	4,240,447	36,977	449,442	1,364,079	2,386,001	3,948
Male	303,529	1,643	44,263	24,744	232,879	0	2,971,718	15,976	465,655	184,165	2,305,922	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	220,984	1,222	30,129	59,036	130,376	221	2,163,948	12,248	316,306	552,192	1,281,052	2,150
African American	398,710	1,865	48,345	93,114	255,272	114	3,970,381	18,979	522,688	851,050	2,576,536	1,128
Other/unknown	111,860	2,179	7,381	15,421	86,810	69	1,077,836	21,726	76,103	145,002	834,335	670
Use of Nursing Facilities[c]												
Entire year	1,882	545	1,334	2	1	0	18,902	5,417	13,470	3	12	0
Part year	1,666	258	1,362	39	5	2	16,457	2,388	13,615	385	50	19
None	728,006	4,463	83,159	167,530	472,452	402	7,176,806	45,148	888,012	1,547,856	4,691,861	3,929
Maintenance Assistance Status												
Cash	165,548	2,491	66,219	30,970	65,868	0	1,735,935	28,151	752,229	277,561	677,994	0
Medically needy	72,250	2,143	18,278	21,521	30,308	0	624,235	18,981	148,361	168,235	288,658	0
Poverty related	360,082	10	46	15,873	343,749	404	3,501,798	70	298	117,839	3,379,643	3,948
Other/unknown	133,674	622	1,312	99,207	32,533	0	1,350,197	5,751	14,209	984,609	345,628	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	124,186	5,164	13,476	89,372	15,772	402	1,045,387	51,783	106,275	813,738	69,661	3,930
FFS part year, with Rx claims	42,445	50	8,771	16,968	16,654	2	414,870	573	91,362	165,415	157,502	18
FFS part year, no Rx claims	125,688	9	5,023	27,894	92,762	0	1,136,807	102	48,369	252,126	836,210	0
MC all year, with Rx claims	68,105	19	28,629	7,320	32,137	0	777,365	218	333,370	76,979	366,798	0
MC all year, no Rx claims	371,130	24	29,956	26,017	315,133	0	3,837,736	277	335,721	239,986	3,261,752	0

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

a. Table A.1 includes the beneficiaries represented by Cell J 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.
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.2

MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS[a]

NONDUAL BENEFICIARIES, MARYLAND, 2005

	Beneficiaries and Benefit Months in Cell J of Table 1		Included in Cell K of Table 1		Excluded from Cell K of Table 1	
	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months
All	**731,554**	**7,212,165**	**292,319**	**1,491,936**	**0**	**5,720,229**
Fee-for-service (FFS) all year	124,186	1,045,387	124,186	1,045,387	0	0
FFS part year, with Rx claims	42,445	414,870	42,445	147,181	0	267,689
FFS part year, with no Rx claims	125,688	1,136,807	125,688	299,368	0	837,439
Managed care (MC) all year, with Rx claims	68,105	777,365	0	0	0	777,365
MC all year, with no Rx claims	371,130	3,837,736	0	0	0	3,837,736

Source: Data for this table are from the MAX 2005 file for Maryland, released by CMS in 1/2009. This table was produced on 04/23/2009.
a. Benefit months are months during which beneficiaries had pharmacy benefit coverage.
Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; FFS = fee-for-service pharmacy benefit; MAX = Medicaid Analytic Extract;
MC = managed care; Rx = pharmacy benefit.

Nondual Beneficiaries