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

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TABLE ND.2
CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a, b}
NONDUAL BENEFICIARIES, NEW HAMPSHIRE, 2005

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown
All	113,437	868	8,454	18,746	85,369	0	1,036,407	7,908	84,467	143,314	800,718	0
Age												
5 and younger	29,680	0	36	0	29,644	0	266,822	0	431	0	266,391	0
6-14	37,695	0	78	0	37,617	0	372,414	0	920	0	371,494	0
15-20	18,521	0	570	0	17,951	0	168,034	0	5,853	0	162,181	0
21-44	20,986	0	3,669	17,162	155	0	168,671	0	37,055	130,977	639	0
45-64	5,641	0	4,084	1,556	1	0	52,389	0	40,093	12,284	12	0
65-74	409	391	16	2	0	0	4,184	4,068	103	13	0	0
75-84	284	283	1	0	0	0	2,693	2,681	12	0	0	0
85 and older	194	194	0	0	0	0	1,159	1,159	0	0	0	0
Unknown	27	0	0	26	1	0	41	0	0	40	1	0
Gender												
Female	63,649	592	4,728	16,241	42,088	0	573,280	5,391	48,486	127,149	392,254	0
Male	49,788	276	3,726	2,505	43,281	0	463,127	2,517	35,981	16,165	408,464	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	101,883	615	8,040	16,905	76,323	0	931,972	5,231	80,508	129,550	716,683	0
African American	2,988	20	131	631	2,206	0	27,310	196	1,250	4,920	20,944	0
Other/unknown	8,566	233	283	1,210	6,840	0	77,125	2,481	2,709	8,844	63,091	0
Use of Nursing Facilities^c												
Entire year	157	75	79	0	3	0	1,719	810	873	0	36	0
Part year	257	60	173	5	19	0	2,463	504	1,712	35	212	0
None	113,023	733	8,202	18,741	85,347	0	1,032,225	6,594	81,882	143,279	800,470	0
Maintenance Assistance Status												
Cash	22,673	431	4,709	5,448	12,085	0	216,929	4,696	50,887	44,379	116,967	0
Medically needy	4,536	164	847	2,036	1,489	0	35,959	1,009	6,773	13,838	14,339	0
Poverty-related	63,707	2	2	3,910	59,793	0	568,312	18	14	22,258	546,022	0
Other/unknown	22,521	271	2,896	7,352	12,002	0	215,207	2,185	26,793	62,839	123,390	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	113,437	868	8,454	18,746	85,369	0	1,036,407	7,908	84,467	143,314	800,718	0
FFS part year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
FFS part year, no Rx claims	0	0	0	0	0	0	0	0	0	0	0	0

Source: Data for this table are from the MAX 2005 file for New Hampshire, released by CMS in 10/2008. This table was produced on 04/23/2009.

a. Table 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.

TABLE ND.3
ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC^{a, b}
NONDUAL BENEFICIARIES, NEW HAMPSHIRE, 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	62.8	7.7	\$488	\$63	\$3,352	14.6	113,437
Age							
5 and younger	60.4	2.8	107	39	1,512	7.1	29,680
6-14	57.2	4.5	309	69	2,374	13.0	37,695
15-20	62.1	6.3	418	67	3,722	11.2	18,521
21-44	72.5	12.9	793	61	5,027	15.8	20,986
45-64	78.5	37.1	2,575	70	10,965	23.5	5,641
65-74	83.6	38.9	2,328	60	11,404	20.4	409
75-84	74.3	34.5	1,767	51	10,176	17.4	284
85 and older	45.9	25.7	1,066	42	10,713	10.0	194
Unknown	0.0	0.0	0	0	0	0.0	27
Basis of Eligibility^e							
Aged	72.6	34.7	1,879	54	10,882	17.3	868
Disabled	79.4	35.5	2,689	76	15,707	17.1	8,454
Adults	71.2	10.4	511	49	2,579	19.8	18,746
Children	59.2	4.1	251	61	2,222	11.3	85,369
Unknown	0.0	0.0	0	0	0	0.0	0
Gender							
Female	64.9	8.7	508	58	3,112	16.3	63,649
Male	60.2	6.5	463	71	3,659	12.7	49,788
Unknown	0.0	0.0	0	0	0	0.0	0
Race							
White	63.6	8.1	512	63	3,530	14.5	101,883
African American	55.6	4.8	310	64	1,811	17.1	2,988
Other/unknown	56.7	4.6	271	58	1,773	15.3	8,566
Use of Nursing Facilities^f							
Entire year	98.7	101.2	5,953	59	65,376	9.1	157
Part year	92.2	61.8	3,865	63	47,750	8.1	257
None	62.7	7.5	473	63	3,165	14.9	113,023
Maintenance Assistance Status							
Cash	71.5	14.0	892	64	5,331	16.7	22,673
Medically needy	67.0	13.8	945	69	5,687	16.6	4,536
Poverty related	56.5	3.3	192	58	1,525	12.6	63,707
Other/unknown	71.2	12.7	830	65	6,059	13.7	22,521

Source: Data for this table are from the MAX 2005 file for New Hampshire, released by CMS in 10/2008. This table was produced on 04/23/2009.

a. Table 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 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 ND.4
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a, b}
NONDUAL BENEFICIARIES, NEW HAMPSHIRE, 2005

Beneficiary Characteristics	Mean Number of Rx	Mean Rx \$	Rx \$ as a Percentage of All Medicaid FFS \$ ^c	Number of Rx, Percentage with:							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	Mean \$, All Medicaid FFS \$ ^d	Beneficiaries	Benefit Months
All	0.8	\$54	14.6	37.2	48.9	5.8	5.7	1.9	0.5	\$367	113,437	1,036,407
Age												
5 and younger	0.3	12	7.1	39.6	57.7	1.9	0.6	0.1	0.0	168	29,680	266,822
6-14	0.5	31	13.0	42.8	49.6	4.2	3.1	0.3	0.0	240	37,695	372,414
15-20	0.7	46	11.2	37.9	49.6	6.7	4.9	0.8	0.1	410	18,521	168,034
21-44	1.6	99	15.8	27.5	43.7	11.6	12.6	3.8	0.7	626	20,986	168,671
45-64	4.0	277	23.5	21.5	20.4	11.8	23.4	16.5	6.4	1,181	5,641	52,389
65-74	3.8	228	20.4	16.4	22.2	12.2	26.2	17.6	5.4	1,115	409	4,184
75-84	3.6	186	17.4	25.7	19.0	6.3	26.1	19.0	3.9	1,073	284	2,693
85 and older	4.3	178	10.0	54.1	6.7	5.7	10.8	18.0	4.6	1,793	194	1,159
Unknown	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	0	27	41
Basis of Eligibility^e												
Aged	3.8	206	17.3	27.4	18.1	9.0	22.6	18.2	4.7	1,195	868	7,908
Disabled	3.6	269	17.1	20.6	23.2	12.2	23.6	15.2	5.3	1,572	8,454	84,467
Adults	1.4	67	19.8	28.8	45.6	11.4	11.1	2.7	0.4	337	18,746	143,314
Children	0.4	27	11.3	40.8	52.5	3.9	2.5	0.3	0.0	237	85,369	800,718
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Gender												
Female	1.0	56	16.3	35.1	49.1	6.4	6.4	2.4	0.7	346	63,649	573,280
Male	0.7	50	12.7	39.8	48.7	5.0	4.8	1.4	0.3	393	49,788	463,127
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	0.9	56	14.5	36.4	49.0	6.0	6.0	2.1	0.6	386	101,883	931,972
African American	0.5	34	17.1	44.4	46.8	4.1	3.8	0.8	0.1	198	2,988	27,310
Other/unknown	0.5	30	15.3	43.3	48.9	3.7	3.0	1.0	0.2	197	8,566	77,125
Use of Nursing Facilities^f												
Entire year	9.2	544	9.1	1.3	1.9	2.5	22.3	38.2	33.8	5,971	157	1,719
Part year	6.5	403	8.1	7.8	9.7	6.2	25.7	31.5	19.1	4,983	257	2,463
None	0.8	52	14.9	37.3	49.1	5.8	5.6	1.8	0.4	347	113,023	1,032,225
Maintenance Assistance Status												
Cash	1.5	93	16.7	28.5	47.2	8.1	10.2	4.8	1.3	557	22,673	216,929
Medically needy	1.7	119	16.6	33.0	37.0	9.8	13.1	5.8	1.3	717	4,536	35,959
Poverty related	0.4	22	12.6	43.5	51.2	3.4	1.8	0.2	0.0	171	63,707	568,312
Other/unknown	1.3	87	13.7	28.8	46.7	9.5	10.7	3.3	1.0	634	22,521	215,207

Source: Data for this table are from the MAX 2005 file for New Hampshire, released by CMS in 10/2008. This table was produced on 04/23/2009.

a. Table 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, NEW HAMPSHIRE, 2005

Beneficiary Characteristics	All Rx			Patented Brand-Name Drugs			Off-Patent Brand-Name Drugs			Generic Drugs		
	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx
All	0.8	\$54	\$63	0.3	\$40	\$131	0.0	\$4	\$108	0.5	\$10	\$20
Age												
5 and younger	0.3	12	39	0.1	9	96	0.0	0	50	0.2	3	14
6-14	0.5	31	69	0.2	26	117	0.0	1	83	0.2	4	19
15-20	0.7	46	67	0.3	36	123	0.0	2	76	0.4	7	20
21-44	1.6	99	61	0.5	70	149	0.1	8	117	1.1	21	20
45-64	4.0	277	70	1.3	197	146	0.2	24	154	2.5	57	23
65-74	3.8	228	60	1.5	178	119	0.1	8	90	2.2	41	19
75-84	3.6	186	51	1.4	144	100	0.1	5	54	2.1	38	18
85 and older	4.3	178	42	1.4	126	88	0.2	11	47	2.6	42	16
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility^d												
Aged	3.8	206	54	1.5	159	108	0.1	7	67	2.2	40	18
Disabled	3.6	269	76	1.3	197	157	0.2	22	144	2.1	51	24
Adults	1.4	67	49	0.4	45	126	0.1	6	105	1.0	17	18
Children	0.4	27	61	0.2	22	115	0.0	1	75	0.2	4	18
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Gender												
Female	1.0	56	58	0.3	41	129	0.0	4	102	0.6	12	19
Male	0.7	50	71	0.3	39	133	0.0	3	120	0.4	8	21
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Race												
White	0.9	56	63	0.3	42	131	0.0	4	109	0.5	11	20
African American	0.5	34	64	0.2	27	143	0.0	1	90	0.3	6	17
Other/unknown	0.5	30	58	0.2	23	128	0.0	2	95	0.3	5	17
Use of Nursing Facilities^e												
Entire year	9.2	544	59	3.2	386	121	0.4	27	67	5.6	131	23
Part year	6.5	403	63	2.1	290	139	0.2	25	101	4.1	88	21
None	0.8	52	63	0.3	39	131	0.0	3	109	0.5	10	20
Maintenance Assistance Status												
Cash	1.5	93	64	0.5	67	138	0.1	7	129	0.9	19	20
Medically needy	1.7	119	69	0.6	89	150	0.1	8	117	1.1	22	21
Poverty related	0.4	22	58	0.1	17	114	0.0	1	72	0.2	4	17
Other/unknown	1.3	87	65	0.5	65	133	0.1	6	108	0.8	16	20

Source: Data for this table are from the MAX 2005 file for New Hampshire, released by CMS in 10/2008. This table was produced on 04/23/2009.

a. Table 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 New Hampshire, 0.1 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.

For information about this classification method, see Wolters Kluwer Health, <http://www.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 ND.6
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d}
 NONDUAL BENEFICIARIES, NEW HAMPSHIRE, 2005

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per Rx				Users ^e				
	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total Number of Rx	Total Rx \$	Number of Users	As a Percentage of All Benes	Number of Benefit Months
Anti-infective Agents	0.2	0.0	0.0	0.2	\$9	\$5	\$2	\$3	\$42	\$130	\$71	\$17	99,918	\$4,209,584	43,083	38.0	457,197
Biologicals	0.2	0.2	0.0	0.0	131	118	7	6	659	729	938	202	605	398,732	296	0.3	3,044
Antineoplastic Agents	0.5	0.2	0.0	0.4	136	112	5	18	255	665	622	51	2,067	526,448	365	0.3	3,867
Endocrine/Metabolic Drugs	0.5	0.2	0.0	0.3	28	19	2	6	61	121	75	22	76,574	4,663,472	16,246	14.3	168,332
Cardiovascular Agents	0.9	0.3	0.0	0.6	37	28	0	8	39	97	48	13	82,793	3,251,332	8,249	7.3	88,617
Respiratory Agents	0.4	0.2	0.0	0.2	23	20	1	3	57	93	61	15	86,822	4,975,845	20,145	17.8	215,941
Gastrointestinal Agents	0.5	0.2	0.0	0.3	35	30	0	4	76	153	58	17	39,847	3,028,820	8,223	7.2	87,554
Genitourinary Agents	0.3	0.1	0.0	0.1	13	10	1	2	51	83	55	20	10,033	512,903	3,705	3.3	38,705
CNS Drugs	0.9	0.4	0.0	0.5	82	69	1	12	87	158	111	25	162,272	14,186,176	16,581	14.6	172,345
Stimulants/Anti-obesity/Anorexia	0.7	0.6	0.0	0.1	63	58	0	5	89	102	74	35	51,150	4,535,715	6,680	5.9	71,727
Miscellaneous Psychological/ Neurological Agents	0.3	0.2	0.0	0.1	77	70	0	6	280	397	101	67	2,377	665,738	800	0.7	8,642
Analgesics and Anesthetics	0.5	0.1	0.0	0.4	21	8	7	7	43	140	223	16	110,516	4,713,771	21,283	18.8	219,257
Neuromuscular Agents	0.7	0.3	0.0	0.4	58	43	3	12	82	151	87	31	66,682	5,463,676	8,937	7.9	94,830
Nutritional Products	0.2	0.0	0.0	0.2	3	1	0	2	16	75	18	10	21,462	337,187	10,194	9.0	107,731
Hematological Agents	0.6	0.2	0.0	0.4	89	82	1	5	158	434	59	16	7,900	1,247,672	1,347	1.2	14,052
Topical Products	0.2	0.1	0.0	0.1	9	5	0	3	43	91	78	21	52,461	2,269,372	24,767	21.8	266,595
Miscellaneous Products	0.2	0.1	0.0	0.1	26	18	4	4	125	149	229	63	3,269	409,290	1,431	1.3	15,783
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	4	0	0	0	19	0	0	0	160	3,054	78	0.1	858
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.	876,908	55,398,787	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for New Hampshire, released by CMS in 10/2008. This table was produced on 04/23/2009.

a. Table 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.medispn.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

d. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In New Hampshire, 0.1 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.

For information about this classification method, see Wolters Kluwer Health, <http://www.medispn.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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

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

Nondual Beneficiaries

TABLE ND.7
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP^{a, b, c}
 NONDUAL BENEFICIARIES, NEW HAMPSHIRE, 2005

Top 10 Drug Groups	Users			Among Users			
	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	\$8,857,119	6,769	6.0	74,126	0.6	\$190	\$119
ANTICONVULSANT	4,933,582	7,026	6.2	76,352	0.7	98	65
ANTIDEPRESSANTS	4,733,806	16,528	14.6	173,880	0.5	57	27
STIMULANTS/ANTI-OBESITY/ANOREXIANTS	4,535,715	7,894	7.0	85,569	0.6	89	53
ANTIASTHMATIC	3,601,906	20,934	18.5	225,917	0.3	61	16
ANALGESICS - Narcotic	3,058,653	25,031	22.1	260,620	0.3	39	12
ULCER DRUGS	2,105,557	7,381	6.5	79,296	0.4	75	27
MISC. ENDOCRINE	1,949,176	1,138	1.0	12,813	0.5	300	152
DERMATOLOGICAL	1,694,674	22,245	19.6	243,884	0.2	46	7
ANTHYPERLIPIDEMIC	1,611,749	2,639	2.3	29,136	0.6	98	55
Total	37,081,937	117,585		1,261,593	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for New Hampshire, released by CMS in 10/2008. This table was produced on 04/23/2009.

a. Table 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.medispn.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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

Nondual Beneficiaries

TABLE ND.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}
 NONDUAL BENEFICIARIES, NEW HAMPSHIRE, 2005

Beneficiary Characteristics	All Top 10 Drug Groups			ANTIPSYCHOTICS				ANTICONVULSANT				
	Number of Rx	Rx \$	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	454,976	\$37,081,937	6,769	6.0	74,126	0.6	\$120	7,026	6.2	76,352	0.7	\$65
Female												
All Females	272,578	20,220,658	3,613	5.7	39,392	0.6	102	4,539	7.1	49,103	0.6	58
Female, Disabled												
All Ages	105,565	9,335,513	1,664	35.2	18,815	0.7	133	1,929	40.8	21,881	0.7	68
5 and younger	164	16,248	1	6.7	12	0.2	3	8	53.3	96	1.0	95
6-14	484	76,389	0	0.0	0	0.0	0	24	72.7	279	0.8	60
15-20	2,684	272,972	56	23.3	636	0.6	108	88	36.7	1,011	0.9	102
21-44	37,182	3,388,941	808	41.7	9,042	0.6	124	907	46.8	10,262	0.7	74
45-64	64,969	5,569,023	796	31.9	9,095	0.7	145	901	36.1	10,221	0.7	57
65-74	82	11,940	3	37.5	30	0.9	209	1	12.5	12	0.9	122
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles												
All Ages	167,013	10,885,145	1,949	3.3	20,577	0.4	73	2,610	4.4	27,222	0.5	51
5 and younger	11,304	578,121	15	0.1	168	0.4	53	97	0.7	1,104	0.7	90
6-14	32,900	2,963,514	378	2.1	4,209	0.5	91	401	2.2	4,523	0.7	85
15-20	27,642	2,017,599	482	5.1	5,187	0.5	88	398	4.2	4,329	0.6	76
21-44	75,829	3,912,272	895	5.9	9,109	0.3	48	1,487	9.7	14,896	0.5	32
45-64	10,794	758,097	84	7.6	879	0.4	83	160	14.5	1,598	0.6	45
65-74	4,736	379,081	43	16.6	498	0.8	167	41	15.8	476	0.8	45
75-84	2,653	202,446	33	17.6	362	1.0	150	20	10.6	230	0.8	45
85 and older	1,155	74,015	19	13.0	165	0.7	60	6	4.1	66	0.7	42
Male												
All Males	182,398	16,861,279	3,156	6.3	34,734	0.7	140	2,487	5.0	27,249	0.7	76
Male, Disabled												
All Ages	57,420	5,944,180	1,112	29.8	12,316	0.8	177	1,098	29.5	12,390	0.8	83
5 and younger	621	61,034	1	4.8	12	0.9	42	21	100.0	252	1.1	174
6-14	623	78,387	3	6.7	36	0.5	15	24	53.3	288	1.0	134
15-20	4,054	423,213	116	35.2	1,319	0.8	138	115	34.8	1,351	0.8	93
21-44	24,686	2,783,380	656	37.9	7,229	0.7	168	557	32.1	6,316	0.8	89
45-64	27,331	2,591,725	336	21.2	3,720	0.9	209	378	23.8	4,154	0.7	61
65-74	105	6,441	0	0.0	0	0.0	0	3	37.5	29	0.7	57
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Nondual Beneficiaries

TABLE ND.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}
 NONDUAL BENEFICIARIES, NEW HAMPSHIRE, 2005

Beneficiary Characteristics	All Top 10 Drug Groups			ANTIPSYCHOTICS				ANTICONVULSANT				
	Number of Rx	Rx \$	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month
Male, Other Eligibles												
All Ages	124,978	10,917,099	2,044	4.4	22,418	0.7	119	1,389	3.0	14,859	0.6	70
5 and younger	15,050	881,668	58	0.4	659	0.4	54	134	0.9	1,515	0.5	78
6-14	66,270	6,107,611	1,181	6.0	13,357	0.7	119	633	3.2	7,205	0.6	68
15-20	29,831	2,999,694	648	7.7	7,019	0.7	131	373	4.4	3,965	0.7	87
21-44	7,951	488,604	95	4.6	758	0.4	89	181	8.9	1,494	0.5	36
45-64	2,964	214,296	20	4.4	181	0.5	82	39	8.6	369	0.6	44
65-74	1,387	127,844	24	17.9	276	0.7	146	18	13.4	197	0.6	72
75-84	902	66,639	5	5.3	55	0.9	90	3	3.2	36	0.4	51
85 and older	623	30,743	13	27.1	113	0.7	76	8	16.7	78	1.2	29
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 Hampshire, released by CMS in 10/2008. 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.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.

Nondual Beneficiaries

TABLE ND.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}
 NONDUAL BENEFICIARIES, NEW HAMPSHIRE, 2005

Beneficiary Characteristics	ANTIDEPRESSANTS					STIMULANTS/ANTI-OBESITY/ANOREXIANTS					ANTIASTHMATIC				
	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	16,528	14.6	173,880	0.5	\$27	7,894	7.0	85,569	0.6	\$53	20,934	18.5	225,917	0.3	\$16
Female															
All Females	12,239	19.2	128,196	0.5	27	2,525	4.0	27,369	0.6	51	11,526	18.1	123,966	0.3	16
Female, Disabled															
All Ages	3,700	78.3	41,815	0.6	35	196	4.1	2,222	0.5	67	2,270	48.0	25,936	0.4	27
5 and younger	2	13.3	24	0.1	1	0	0.0	0	0.0	0	4	26.7	48	0.4	42
6-14	2	6.1	24	0.7	17	3	9.1	36	0.3	45	13	39.4	156	0.3	24
15-20	102	42.5	1,151	0.5	29	27	11.3	306	0.4	31	41	17.1	467	0.2	15
21-44	1,535	79.3	17,274	0.5	33	81	4.2	897	0.5	54	762	39.4	8,673	0.3	16
45-64	2,058	82.5	23,330	0.6	36	85	3.4	983	0.6	90	1,445	57.9	16,546	0.4	34
65-74	1	12.5	12	0.2	14	0	0.0	0	0.0	0	5	62.5	46	0.4	37
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	8,539	14.5	86,381	0.4	23	2,329	4.0	25,147	0.6	49	9,256	15.7	98,030	0.2	13
5 and younger	16	0.1	192	0.3	8	37	0.3	384	0.4	47	1,771	12.3	19,405	0.2	11
6-14	703	3.9	7,834	0.5	21	1,394	7.7	15,431	0.6	52	2,710	15.0	29,946	0.2	12
15-20	1,610	17.0	16,697	0.4	22	511	5.4	5,420	0.5	45	1,575	16.6	16,509	0.2	12
21-44	5,416	35.5	53,482	0.4	23	345	2.3	3,461	0.5	43	2,716	17.8	27,064	0.3	12
45-64	610	55.4	6,126	0.5	30	38	3.4	412	0.7	74	328	29.8	3,361	0.3	20
65-74	94	36.3	1,089	0.7	34	3	1.2	36	0.6	26	99	38.2	1,118	0.5	42
75-84	52	27.7	573	0.7	31	1	0.5	3	1.3	12	40	21.3	454	0.6	43
85 and older	38	26.0	388	0.8	21	0	0.0	0	0.0	0	17	11.6	173	0.5	67
Male															
All Males	4,289	8.6	45,684	0.5	28	5,369	10.8	58,200	0.6	54	9,408	18.9	101,951	0.3	16
Male, Disabled															
All Ages	1,604	43.0	17,477	0.6	31	143	3.8	1,607	0.6	45	951	25.5	10,574	0.4	33
5 and younger	2	9.5	24	0.6	6	0	0.0	0	0.0	0	14	66.7	168	0.3	11
6-14	6	13.3	72	0.7	41	5	11.1	60	0.2	14	16	35.6	192	0.3	8
15-20	95	28.8	1,078	0.6	30	43	13.0	493	0.7	45	46	13.9	543	0.3	24
21-44	762	44.0	8,363	0.5	31	74	4.3	839	0.6	49	315	18.2	3,501	0.4	31
45-64	736	46.3	7,919	0.6	31	21	1.3	215	0.6	36	552	34.8	6,106	0.5	36
65-74	3	37.5	21	0.4	19	0	0.0	0	0.0	0	8	100.0	64	0.5	37
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Nondual Beneficiaries

TABLE ND.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}
 NONDUAL BENEFICIARIES, NEW HAMPSHIRE, 2005

Beneficiary Characteristics	ANTIDEPRESSANTS					STIMULANTS/ANTI-OBESITY/ANOREXIANTS					ANTIASTHMATIC				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month
Male, Other Eligibles															
All Ages	2,685	5.8	28,207	0.5	26	5,226	11.3	56,593	0.6	54	8,457	18.4	91,377	0.2	14
5 and younger	31	0.2	362	0.2	5	183	1.2	2,067	0.4	27	3,031	19.9	32,758	0.2	13
6-14	1,164	5.9	12,967	0.5	24	3,901	19.9	42,522	0.6	55	3,945	20.2	43,110	0.2	15
15-20	903	10.7	9,503	0.5	30	1,103	13.0	11,661	0.6	58	1,189	14.1	12,798	0.3	15
21-44	408	20.0	3,591	0.4	22	30	1.5	260	0.5	63	174	8.5	1,539	0.3	16
45-64	114	25.1	1,085	0.6	37	8	1.8	71	0.8	78	49	10.8	426	0.4	37
65-74	27	20.1	305	0.5	27	1	0.7	12	0.3	48	43	32.1	483	0.5	39
75-84	19	20.0	208	0.6	30	0	0.0	0	0.0	0	20	21.1	212	0.6	58
85 and older	19	39.6	186	0.9	44	0	0.0	0	0.0	0	6	12.5	51	0.3	12
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 Hampshire, released by CMS in 10/2008. 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.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.

Nondual Beneficiaries

TABLE ND.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}
 NONDUAL BENEFICIARIES, NEW HAMPSHIRE, 2005

Beneficiary Characteristics	ANALGESICS - Narcotic					ULCER DRUGS					MISC. ENDOCRINE				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	25,031	22.1	260,620	0.3	\$12	7,381	6.5	79,296	0.4	\$27	1,138	1.0	12,813	0.5	\$152
Female															
All Females	18,489	29.1	191,914	0.3	11	5,124	8.1	55,406	0.3	25	621	1.0	7,005	0.5	144
Female, Disabled															
All Ages	3,731	78.9	42,382	0.5	27	1,850	39.1	21,262	0.4	33	247	5.2	2,838	0.6	71
5 and younger	1	6.7	12	0.2	1	3	20.0	36	0.6	26	2	13.3	24	0.7	163
6-14	3	9.1	36	0.1	1	16	48.5	183	0.5	62	8	24.2	96	0.6	438
15-20	73	30.4	849	0.2	1	30	12.5	357	0.4	32	11	4.6	123	0.8	269
21-44	1,643	84.9	18,615	0.4	19	614	31.7	7,076	0.4	28	35	1.8	416	0.5	62
45-64	2,010	80.5	22,858	0.5	34	1,186	47.5	13,604	0.5	35	190	7.6	2,167	0.6	45
65-74	1	12.5	12	0.3	5	1	12.5	6	0.3	41	1	12.5	12	0.2	34
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	14,758	25.1	149,532	0.3	6	3,274	5.6	34,144	0.3	20	374	0.6	4,167	0.5	194
5 and younger	382	2.7	4,195	0.1	1	446	3.1	4,306	0.3	19	20	0.1	234	0.5	134
6-14	1,019	5.6	11,470	0.1	1	363	2.0	4,133	0.3	19	160	0.9	1,782	0.5	329
15-20	2,567	27.0	26,659	0.2	1	469	4.9	4,985	0.2	13	32	0.3	363	0.5	324
21-44	9,929	65.0	98,317	0.3	7	1,559	10.2	16,019	0.3	18	23	0.2	222	0.3	30
45-64	665	60.3	6,759	0.4	23	239	21.7	2,448	0.3	27	21	1.9	224	0.4	40
65-74	103	39.8	1,160	0.4	20	119	45.9	1,378	0.5	35	56	21.6	639	0.6	45
75-84	57	30.3	611	0.2	6	55	29.3	620	0.6	41	46	24.5	531	0.5	42
85 and older	36	24.7	361	0.3	19	24	16.4	255	0.7	57	16	11.0	172	0.7	47
Male															
All Males	6,542	13.1	68,706	0.3	15	2,257	4.5	23,890	0.4	31	517	1.0	5,808	0.5	162
Male, Disabled															
All Ages	1,828	49.1	19,946	0.5	39	835	22.4	9,331	0.5	40	89	2.4	1,010	0.7	114
5 and younger	5	23.8	60	0.1	1	23	109.5	276	0.9	51	1	4.8	12	0.2	2
6-14	1	2.2	12	0.1	0	12	26.7	144	0.7	124	6	13.3	72	1.0	177
15-20	62	18.8	703	0.2	2	33	10.0	393	0.5	44	15	4.5	176	0.7	90
21-44	754	43.5	8,275	0.5	33	311	17.9	3,543	0.5	37	38	2.2	438	0.7	166
45-64	1,001	63.0	10,859	0.6	46	452	28.5	4,949	0.5	39	29	1.8	312	0.6	46
65-74	5	62.5	37	0.4	11	4	50.0	26	0.3	3	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Nondual Beneficiaries

TABLE ND.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}
 NONDUAL BENEFICIARIES, NEW HAMPSHIRE, 2005

Beneficiary Characteristics	ANALGESICS - Narcotic					ULCER DRUGS					MISC. ENDOCRINE				
	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	4,714	10.2	48,760	0.2	5	1,422	3.1	14,559	0.3	25	428	0.9	4,798	0.4	171
5 and younger	577	3.8	6,465	0.1	1	490	3.2	4,743	0.3	23	20	0.1	227	0.5	118
6-14	1,175	6.0	13,265	0.1	1	324	1.7	3,704	0.3	25	335	1.7	3,779	0.4	137
15-20	1,487	17.6	15,981	0.1	1	278	3.3	2,976	0.3	24	59	0.7	664	0.6	409
21-44	1,139	55.7	9,739	0.4	16	201	9.8	1,814	0.3	26	2	0.1	13	0.2	20
45-64	257	56.5	2,468	0.4	20	60	13.2	579	0.4	33	4	0.9	37	0.6	57
65-74	37	27.6	436	0.3	5	32	23.9	369	0.5	38	2	1.5	24	0.7	67
75-84	27	28.4	263	0.3	5	31	32.6	318	0.5	41	2	2.1	18	0.2	18
85 and older	15	31.3	143	0.5	15	6	12.5	56	0.6	28	4	8.3	36	0.8	56
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

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

Nondual Beneficiaries

TABLE ND.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}
 NONDUAL BENEFICIARIES, NEW HAMPSHIRE, 2005

Beneficiary Characteristics	DERMATOLOGICAL					ANTIHYPERTENSIVE					Number of Beneficiaries	Number of Benefit Months
	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	22,245	19.6	243,884	0.2	\$7	2,639	2.3	29,136	0.6	\$55	113,437	1,036,407
Female												
All Females	13,429	21.1	146,877	0.2	7	1,743	2.7	19,452	0.6	56	63,636	573,262
Female, Disabled												
All Ages	2,027	42.9	23,623	0.2	11	1,095	23.2	12,631	0.6	60	4,728	48,486
5 and younger	5	33.3	60	0.1	3	0	0.0	0	0.0	0	15	179
6-14	15	45.5	180	0.1	2	0	0.0	0	0.0	0	33	383
15-20	74	30.8	856	0.1	4	7	2.9	83	0.3	27	240	2,487
21-44	726	37.5	8,450	0.2	10	173	8.9	2,000	0.5	46	1,936	20,032
45-64	1,207	48.4	14,077	0.2	12	912	36.5	10,518	0.6	63	2,496	25,349
65-74	0	0.0	0	0.0	0	3	37.5	30	0.5	55	8	56
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Female, Other Eligibles												
All Ages	11,402	19.4	123,254	0.1	6	648	1.1	6,821	0.5	49	58,908	524,776
5 and younger	3,259	22.6	35,060	0.1	3	3	0.0	36	0.4	11	14,407	129,564
6-14	2,960	16.4	33,441	0.1	6	5	0.0	53	0.5	45	18,043	177,502
15-20	2,156	22.7	23,465	0.2	9	20	0.2	218	0.4	42	9,491	84,576
21-44	2,564	16.8	26,184	0.2	8	287	1.9	2,883	0.4	40	15,272	118,723
45-64	252	22.9	2,754	0.2	11	152	13.8	1,564	0.5	46	1,102	9,008
65-74	107	41.3	1,220	0.2	9	113	43.6	1,293	0.6	62	259	2,765
75-84	65	34.6	716	0.2	7	57	30.3	657	0.6	67	188	1,814
85 and older	39	26.7	414	0.2	10	11	7.5	117	0.6	68	146	824
Male												
All Males	8,816	17.7	97,007	0.1	7	896	1.8	9,684	0.6	54	49,774	463,104
Male, Disabled												
All Ages	1,123	30.1	12,987	0.2	9	629	16.9	6,978	0.6	57	3,726	35,981
5 and younger	13	61.9	156	0.1	3	0	0.0	0	0.0	0	21	252
6-14	17	37.8	204	0.1	16	0	0.0	0	0.0	0	45	537
15-20	123	37.3	1,444	0.2	8	3	0.9	36	0.5	96	330	3,366
21-44	474	27.4	5,553	0.2	9	144	8.3	1,632	0.5	44	1,733	17,023
45-64	487	30.7	5,555	0.2	10	479	30.2	5,301	0.6	61	1,588	14,744
65-74	9	112.5	75	0.3	14	3	37.5	9	0.4	50	8	47
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0

Nondual Beneficiaries

TABLE ND.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}
 NONDUAL BENEFICIARIES, NEW HAMPSHIRE, 2005

Beneficiary Characteristics	DERMATOLOGICAL					ANTIHYPERTENSIVE					Number of Beneficiaries	Number of Benefit Months
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month		
Male, Other Eligibles												
All Ages	7,693	16.7	84,020	0.1	6	267	0.6	2,706	0.5	48	46,048	427,123
5 and younger	3,091	20.3	32,926	0.1	4	5	0.0	58	0.1	7	15,237	136,827
6-14	2,514	12.8	28,452	0.1	5	14	0.1	166	0.6	43	19,574	193,992
15-20	1,770	20.9	19,467	0.2	12	16	0.2	164	0.5	35	8,460	77,605
21-44	161	7.9	1,448	0.2	15	76	3.7	717	0.4	37	2,045	12,893
45-64	51	11.2	530	0.2	20	74	16.3	692	0.6	58	455	3,288
65-74	44	32.8	519	0.2	7	44	32.8	489	0.5	50	134	1,316
75-84	32	33.7	350	0.3	8	33	34.7	370	0.7	65	95	867
85 and older	30	62.5	328	0.3	12	5	10.4	50	0.7	30	48	335
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	27	41

Source: Data for this table are from the MAX 2005 file for New Hampshire, released by CMS in 10/2008. This table was produced on 04/23/2009.

a. Table 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.medspan.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

TABLE ND.8
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BENEFICIARY CHARACTERISTIC^{a, b}
 NONDUAL BENEFICIARIES, NEW HAMPSHIRE, 2005

Beneficiary Characteristics	Rx \$ per Benefit Month	Number of Rx per Benefit Month	Number of All-Year Nursing Facility Residents	Benefit Months Among All- Year Nursing Facility Residents
All	\$544	9.2	157	1,719
Age				
0-64	711	10.5	82	909
65-74	500	9.5	15	176
75-84	355	8.0	22	248
85 and older	291	6.9	38	386
Unknown	0	0.0	0	0
Gender				
Female	537	9.2	105	1,172
Male	558	9.4	52	547
Unknown	0	0.0	0	0
Race				
White	538	9.1	153	1,674
African American	0	0	0	0
Other/unknown	744	13.5	4	45
Basis of Eligibility^c				
Aged	356	7.8	75	810
Disabled	707	10.6	79	873
Adults	0	0.0	0	0
Children	807	8.9	3	36
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 2005 file for New Hampshire, released by CMS in 10/2008. This table was produced on 04/23/2009.

a. Table 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 257 beneficiaries who were in nursing facilities for part of their enrollment and their 2,463 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, NEW HAMPSHIRE, 2005

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per Rx				Users				
	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total Number of Rx	Total Rx \$	Number of Users	As a Percentage of All-Year Nursing Facility Residents	Number of Benefit Months
Anti-infective Agents	0.4	0.1	0.0	0.3	\$21	\$13	\$1	\$7	\$49	\$159	\$41	\$22	575	\$28,210	115	73.2	1,327
Biologicals	0.1	0.0	0.0	0.0	2	1	0	1	19	12	0	27	51	992	46	29.3	525
Antineoplastic Agents	0.8	0.3	0.0	0.5	87	66	0	21	114	215	0	46	92	10,495	10	6.4	120
Endocrine/Metabolic Drugs	1.6	0.5	0.3	0.8	61	40	9	12	38	73	33	15	1,595	60,110	88	56.1	982
Cardiovascular Agents	2.4	0.6	0.0	1.8	69	39	0	30	29	70	38	16	2,668	77,023	99	63.1	1,113
Respiratory Agents	0.8	0.4	0.0	0.4	45	36	0	8	56	94	59	19	606	33,803	68	43.3	757
Gastrointestinal Agents	1.2	0.5	0.0	0.7	77	61	0	15	62	119	15	21	1,482	91,796	105	66.9	1,198
Genitourinary Agents	1.0	0.9	0.0	0.1	75	71	0	3	71	79	0	22	406	29,013	35	22.3	389
CNS Drugs	2.2	1.0	0.0	1.2	164	126	0	38	75	128	8	33	3,352	253,058	140	89.2	1,547
Stimulants/Anti-obesity/Anorexia	1.4	0.0	0.0	1.4	62	0	0	62	44	0	0	44	21	929	2	1.3	15
Miscellaneous Psychological/Neurological Agents	0.8	0.8	0.0	0.0	136	136	0	1	164	165	0	50	286	46,854	32	20.4	344
Analgesics and Anesthetics	1.2	0.2	0.2	0.9	77	35	28	15	64	171	177	17	1,114	70,828	85	54.1	916
Neuromuscular Agents	1.9	0.6	0.1	1.2	175	113	7	56	92	188	90	45	1,578	144,834	74	47.1	826
Nutritional Products	0.8	0.0	0.0	0.8	12	0	0	12	14	0	14	14	368	5,308	40	25.5	438
Hematological Agents	1.3	0.4	0.1	0.8	75	66	1	8	60	183	17	9	720	43,041	53	33.8	574
Topical Products	0.7	0.2	0.0	0.5	27	15	1	11	37	94	37	20	885	33,062	105	66.9	1,210
Miscellaneous Products	0.7	0.2	0.2	0.2	42	27	9	6	64	117	47	26	80	5,143	11	7.0	122
Unknown Therapeutic Category	0.5	0.0	0.0	0.0	6	0	0	0	13	0	0	0	12	151	2	1.3	24
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.	15,891	934,650	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for New Hampshire, released by CMS in 10/2008. This table was produced on 04/23/2009.

a. Table 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 257 beneficiaries who were in nursing facilities for part of their enrollment and their 2,463 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.medispain.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.medispain.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

In New Hampshire, 0.1 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.

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

Nondual Beneficiaries

TABLE ND.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}
 NONDUAL BENEFICIARIES, NEW HAMPSHIRE, 2005

Top 10 Drug Groups in Nursing Facilities	Total Medicaid Rx \$	Users			Among Users		
		Number of Users	As a Percentage of All-Year Nursing Facility Residents	Number of Benefit Months	Number of Rx per Benefit Month	\$ per Rx	Rx \$ per Benefit Month
ANTIPSYCHOTICS	\$173,449	98	62.4	1,080	1.0	\$157	\$161
ANTICONVULSANT	129,355	85	54.1	979	1.2	107	132
ULCER DRUGS	82,646	90	57.3	1,033	0.9	87	80
ANTIDEPRESSANTS	69,142	150	95.5	1,660	0.9	45	42
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	46,896	38	24.2	408	0.7	163	115
ANTIDIABETIC	41,544	68	43.3	800	1.2	44	52
ANALGESICS - Narcotic	35,759	89	56.7	993	0.7	50	36
ANTIHYPERTENSIVE	32,711	39	24.8	426	0.9	82	77
ANTIASTHMATIC	28,978	71	45.2	782	0.5	69	37
ANALGESICS - ANTI-INFLAMMATORY	23,009	47	29.9	525	0.6	75	44
Total	663,489	775		8,686	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for New Hampshire, released by CMS in 10/2008. This table was produced on 04/23/2009.

a. Table 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 257 beneficiaries who were in nursing facilities for part of their enrollment and their 2,463 benefit months were excluded from the analysis.

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

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

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

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

Nondual Beneficiaries

TABLE ND.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}
 NONDUAL BENEFICIARIES, NEW HAMPSHIRE, 2005

Beneficiary Characteristics	All Top 10 Drug Groups			ANTIPSYCHOTICS				ANTICONVULSANT				
	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	7,878	\$663,489	98	62.4	1,080	1.0	\$161	85	54.1	979	1.2	\$132
Female												
All Females	5,407	454,637	70	66.7	766	1.1	160	61	58.1	699	1.3	153
Female, Disabled												
All Ages	3,304	307,499	36	69.2	403	1.2	179	48	92.3	548	1.3	177
64 or younger	3,304	307,499	36	69.2	403	1.2	179	48	92.3	548	1.3	177
65-74	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles												
All Ages	2,103	147,138	34	64.2	363	1.0	139	13	24.5	151	1.2	64
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	696	54,654	9	75.0	108	0.9	175	5	41.7	60	1.1	63
75-84	863	57,840	15	83.3	171	1.1	135	5	27.8	60	1.6	67
85 and older	544	34,644	10	43.5	84	0.8	101	3	13.0	31	0.8	62
Male												
All Males	2,471	208,852	28	53.8	314	0.9	163	24	46.2	280	1.1	80
Male, Disabled												
All Ages	1,619	145,997	11	40.7	132	1.1	225	20	74.1	238	1.2	89
64 or younger	1,619	145,997	11	40.7	132	1.1	225	20	74.1	238	1.2	89
65-74	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male, Other Eligibles												
All Ages	852	62,855	17	68.0	182	0.8	118	4	16.0	42	0.8	34
64 or younger	125	15,803	1	33.3	12	1.1	603	1	33.3	12	0.1	1
65-74	157	9,135	5	166.7	56	0.7	59	0	0.0	0	0.0	0
75-84	158	10,694	3	75.0	36	1.0	96	0	0.0	0	0.0	0
85 and older	412	27,223	8	53.3	78	0.7	95	3	20.0	30	1.1	47
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 Hampshire, released by CMS in 10/2008. This table was produced on 04/23/2009.

a. Table ND.10A 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 257 beneficiaries who were in nursing facilities for part of their enrollment and their 2,463 benefit months were excluded from the analysis.

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

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

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

Bene Mo(s) = benefit month(s); 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 ND.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}
 NONDUAL BENEFICIARIES, NEW HAMPSHIRE, 2005

Beneficiary Characteristics	ULCER DRUGS					ANTIDEPRESSANTS					MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL				
	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	90	57.3	1,033	0.9	\$80	150	95.5	1,660	0.9	\$42	38	24.2	408	0.7	\$115
Female															
All Females	55	52.4	648	0.9	71	93	88.6	1,034	1.0	45	27	25.7	286	0.7	127
Female, Disabled															
All Ages	30	57.7	357	0.9	74	44	84.6	487	1.1	57	10	19.2	101	0.6	233
64 or younger	30	57.7	357	0.9	74	44	84.6	487	1.1	57	10	19.2	101	0.6	233
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	25	47.2	291	0.8	67	49	92.5	547	0.9	35	17	32.1	185	0.7	69
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	9	75.0	108	0.6	54	12	100.0	144	1.1	48	3	25.0	36	0.8	85
75-84	10	55.6	111	0.9	44	16	88.9	183	0.9	37	5	27.8	60	0.9	97
85 and older	6	26.1	72	1.0	123	21	91.3	220	0.8	24	9	39.1	89	0.6	45
Male															
All Males	35	67.3	385	1.0	95	57	109.6	626	0.8	36	11	21.2	122	0.7	86
Male, Disabled															
All Ages	23	85.2	257	1.0	109	29	107.4	327	0.8	30	2	7.4	24	0.8	109
64 or younger	23	85.2	257	1.0	109	29	107.4	327	0.8	30	2	7.4	24	0.8	109
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male, Other Eligibles															
All Ages	12	48.0	128	1.0	67	28	112.0	299	0.8	42	9	36.0	98	0.7	80
64 or younger	2	66.7	24	1.9	164	1	33.3	12	0.8	25	0	0.0	0	0.0	0
65-74	3	100.0	36	1.0	65	3	100.0	32	0.7	30	2	66.7	24	0.5	32
75-84	2	50.0	24	1.1	77	8	200.0	96	0.7	37	1	25.0	12	1.0	145
85 and older	5	33.3	44	0.5	10	16	106.7	159	0.9	48	6	40.0	62	0.8	87
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 Hampshire, released by CMS in 10/2008. This table was produced on 04/23/2009.

a. Table ND.10B 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 257 beneficiaries who were in nursing facilities for part of their enrollment and their 2,463 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 ND.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}
 NONDUAL BENEFICIARIES, NEW HAMPSHIRE, 2005

Beneficiary Characteristics	ANTIDIABETIC					ANALGESICS - Narcotic					ANTIHYPERLIPIDEMIC				
	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	68	43.3	800	1.2	\$52	89	56.7	993	0.7	\$36	39	24.8	426	0.9	\$77
Female															
All Females	56	53.3	665	1.2	52	53	50.5	583	0.7	28	28	26.7	318	1.0	79
Female, Disabled															
All Ages	30	57.7	360	1.2	55	32	61.5	355	0.8	35	17	32.7	197	1.0	84
64 or younger	30	57.7	360	1.2	55	32	61.5	355	0.8	35	17	32.7	197	1.0	84
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	26	49.1	305	1.1	49	21	39.6	228	0.5	19	11	20.8	121	0.9	70
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	11	91.7	132	1.3	69	7	58.3	84	0.5	19	4	33.3	48	1.0	83
75-84	8	44.4	96	1.1	48	5	27.8	51	0.6	20	4	22.2	48	0.9	59
85 and older	7	30.4	77	0.6	16	9	39.1	93	0.3	18	3	13.0	25	0.6	65
Male															
All Males	12	23.1	135	1.3	50	36	69.2	410	0.8	47	11	21.2	108	0.9	71
Male, Disabled															
All Ages	9	33.3	99	1.5	54	21	77.8	240	1.1	71	9	33.3	90	0.8	78
64 or younger	9	33.3	99	1.5	54	21	77.8	240	1.1	71	9	33.3	90	0.8	78
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male, Other Eligibles															
All Ages	3	12.0	36	0.7	38	15	60.0	170	0.4	12	2	8.0	18	1.0	37
64 or younger	0	0.0	0	0.0	0	3	100.0	36	0.1	1	0	0.0	0	0.0	0
65-74	3	100.0	36	0.7	38	2	66.7	24	0.3	2	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	2	50.0	24	0.2	2	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	8	53.3	86	0.6	23	2	13.3	18	1.0	37
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 Hampshire, released by CMS in 10/2008. This table was produced on 04/23/2009.

a. Table ND.10C 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 257 beneficiaries who were in nursing facilities for part of their enrollment and their 2,463 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 ND.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}
 NONDUAL BENEFICIARIES, NEW HAMPSHIRE, 2005

Beneficiary Characteristics	ANTIASTHMATIC					ANALGESICS - ANTI-INFLAMMATORY						
	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	71	45.2	782	0.5	\$37	47	29.9	525	0.6	\$44	157	1,719
Female												
All Females	44	41.9	505	0.5	31	35	33.3	391	0.5	11	105	1,172
Female, Disabled												
All Ages	24	46.2	274	0.5	37	23	44.2	264	0.5	7	52	578
64 or younger	24	46.2	274	0.5	37	23	44.2	264	0.5	7	52	578
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Female, Other Eligibles												
All Ages	20	37.7	231	0.4	24	12	22.6	127	0.5	20	53	594
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	3	25.0	36	0.7	40	0	0.0	0	0.0	0	12	144
75-84	12	66.7	135	0.5	27	4	22.2	48	0.4	25	18	200
85 and older	5	21.7	60	0.1	6	8	34.8	79	0.6	17	23	250
Male												
All Males	27	51.9	277	0.7	48	12	23.1	134	0.8	140	52	547
Male, Disabled												
All Ages	15	55.6	158	0.8	52	6	22.2	72	0.9	236	27	295
64 or younger	15	55.6	158	0.8	52	6	22.2	72	0.9	236	27	295
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Male, Other Eligibles												
All Ages	12	48.0	119	0.6	44	6	24.0	62	0.7	28	25	252
64 or younger	3	100.0	36	1.0	117	2	66.7	24	0.7	4	3	36
65-74	2	66.7	20	1.0	18	0	0.0	0	0.0	0	3	32
75-84	1	25.0	12	0.3	2	1	25.0	12	0.4	3	4	48
85 and older	6	40.0	51	0.3	12	3	20.0	26	0.8	63	15	136
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 Hampshire, released by CMS in 10/2008. 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 257 beneficiaries who were in nursing facilities for part of their enrollment and their 2,463 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 ND.11
USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
AMONG NONDUALS, BY BENEFICIARY CHARACTERISTIC^{a,b}
NEW HAMPSHIRE, 2005

Beneficiary Characteristics	Number of Beneficiaries with at Least One Part D Excluded Rx	Percentage of Beneficiaries with at Least One Part D Excluded Rx	Number of Part D Excluded Rx per Beneficiary	Total Number Part D Excluded Rx	Part D Excluded Rx \$ per Beneficiary	Total Part D Excluded Rx \$	\$ per Part D Excluded Rx	Part D Excluded Rx \$ as a Percentage of All Nondual Rx \$	Total Number of Beneficiaries
All	22,921	20.2	1.0	113,743	\$14	\$1,543,064	\$14	2.8	113,437
Age									
5 and younger	5,198	17.5	0.4	11,395	5	157,989	14	5.0	29,680
6-14	5,474	14.5	0.4	16,278	7	263,163	16	2.3	37,695
15-20	2,788	15.1	0.5	10,018	10	193,805	19	2.5	18,521
21-44	6,214	29.6	1.7	35,901	22	451,988	13	2.7	20,986
45-64	2,838	50.3	5.9	33,183	75	424,772	13	2.9	5,641
65-74	211	51.6	7.2	2,960	64	26,373	9	2.8	409
75-84	127	44.7	8.0	2,279	54	15,239	7	3.0	284
85 and older	71	36.6	8.9	1,729	50	9,735	6	4.7	194
Unknown	0	0.0	0.0	0	0	0	0	0.0	27
Basis of Eligibility^c									
Aged	401	46.2	7.9	6,884	59	50,809	7	3.1	868
Disabled	4,209	49.8	5.9	50,086	81	684,974	14	3.0	8,454
Adults	5,064	27.0	1.2	21,660	14	254,284	12	2.7	18,746
Children	13,247	15.5	0.4	35,113	6	552,997	16	2.6	85,369
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Gender									
Female	14,510	22.8	1.2	75,702	16	1,020,723	13	3.2	63,649
Male	8,411	16.9	0.8	38,041	10	522,341	14	2.3	49,788
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Race									
White	20,572	20.2	1.0	106,436	14	1,409,278	13	2.7	101,883
African American	635	21.3	0.7	2,119	28	82,374	39	8.9	2,988
Other/unknown	1,714	20.0	0.6	5,188	6	51,412	10	2.2	8,566
Use of Nursing Facilities^d									
Entire year	152	96.8	40.5	6,353	429	67,406	11	7.2	157
Part year	221	86.0	15.9	4,090	204	52,498	13	5.3	257
None	22,548	19.9	0.9	103,300	13	1,423,160	14	2.7	113,023
Maintenance Assistance Status									
Cash	7,015	30.9	2.1	46,854	24	545,944	12	2.7	22,673
Medically needy	1,369	30.2	2.1	9,470	37	168,146	18	3.9	4,536
Poverty related	8,277	13.0	0.3	19,008	5	314,123	17	2.6	63,707
Other/unknown	6,260	27.8	1.7	38,411	23	514,851	13	2.8	22,521

Source: Data for this table are from the MAX 2005 file for New Hampshire, released by CMS in 10/2008. This table was produced on 04/23/2009.

a. Table 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}
NEW HAMPSHIRE, 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	0.1	\$1	\$14	\$0	\$1	1,036,407
Age						
5 and younger	0.0	1	14	0	0	266,822
6-14	0.0	1	16	0	0	372,414
15-20	0.1	1	19	0	0	168,034
21-44	0.2	3	13	0	1	168,671
45-64	0.6	8	13	0	3	52,389
65-74	0.7	6	9	0	2	4,184
75-84	0.8	6	7	0	1	2,693
85 and older	1.5	8	6	0	1	1,159
Unknown	0.0	0	0	0	0	41
Basis of Eligibility^c						
Aged	0.9	6	7	0	1	7,908
Disabled	0.6	8	14	0	3	84,467
Adults	0.2	2	12	0	1	143,314
Children	0.0	1	16	0	0	800,718
Unknown	0.0	0	0	0	0	0
Gender						
Female	0.1	2	13	0	1	573,280
Male	0.1	1	14	0	0	463,127
Unknown	0.0	0	0	0	0	0
Race						
White	0.1	2	13	0	1	931,972
African American	0.1	3	39	0	0	27,310
Other/unknown	0.1	1	10	0	0	77,125
Use of Nursing Facilities^d						
Entire year	3.7	39	11	0	20	1,719
Part year	1.7	21	13	0	9	2,463
None	0.1	1	14	0	0	1,032,225
Maintenance Assistance Status						
Cash	0.2	3	12	0	1	216,929
Medically needy	0.3	5	18	0	1	35,959
Poverty related	0.0	1	17	0	0	568,312
Other/unknown	0.2	2	13	0	1	215,207

Source: Data for this table are from the MAX 2005 file for New Hampshire, released by CMS in 10/2008. This table was produced on 04/23/2009.

a. Table ND.12 includes the beneficiaries 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 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.

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

Drug Category	Number of Users	Rx \$ per User	Total Rx \$	Rx \$ as a Percentage of All Part D		\$ per Rx	Number Rx as a Percentage of All Part D	
				Excluded Rx \$	Total Number Rx.		Excluded Rx	
All	28,659	\$54	\$1,543,064	100.0	113,743	\$14	100.0	
Anorexia or weight loss/gain	13	215	2,792	0.2	40	70	0.0	
Fertility drugs	0	0	0	0.0	0	0	0.0	
Drugs for cosmetic purposes	154	12	1,875	0.1	204	9	0.2	
Cough and cold medications	3,831	43	165,798	10.7	6,409	26	5.6	
Vitamins and minerals	3,674	36	132,454	8.6	10,095	13	8.9	
Non-prescription drugs	13,761	36	501,566	32.5	55,419	9	48.7	
Barbiturates	193	65	12,523	0.8	1,762	7	1.5	
Benzodiazepines	6,374	86	549,728	35.6	37,699	15	33.1	
Other Part D Excl Rx Drugs	659	268	176,328	11.4	2,115	83	1.9	

Source: Data for this table are from the MAX 2005 file for New Hampshire, released by CMS in 10/2008. This table was produced on 04/23/2009.

a. Table ND.13 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. 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

APPENDIX TABLE A.1
CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY^{a, b}
NONDUAL BENEFICIARIES, NEW HAMPSHIRE, 2005

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Blind/ Disabled	Adults	Children	Other/ Unknown	All	Aged	Blind/ Disabled	Adults	Children	Other/ Unknown
All	113,437	868	8,454	18,746	85,369	0	1,036,407	7,908	84,467	143,314	800,718	0
Age												
5 and younger	29,680	0	36	0	29,644	0	266,822	0	431	0	266,391	0
6-14	37,695	0	78	0	37,617	0	372,414	0	920	0	371,494	0
15-20	18,521	0	570	0	17,951	0	168,034	0	5,853	0	162,181	0
21-44	20,986	0	3,669	17,162	155	0	168,671	0	37,055	130,977	639	0
45-64	5,641	0	4,084	1,556	1	0	52,389	0	40,093	12,284	12	0
65-74	409	391	16	2	0	0	4,184	4,068	103	13	0	0
75-84	284	283	1	0	0	0	2,693	2,681	12	0	0	0
85 and older	194	194	0	0	0	0	1,159	1,159	0	0	0	0
Unknown	27	0	0	26	1	0	41	0	0	40	1	0
Gender												
Female	63,649	592	4,728	16,241	42,088	0	573,280	5,391	48,486	127,149	392,254	0
Male	49,788	276	3,726	2,505	43,281	0	463,127	2,517	35,981	16,165	408,464	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	101,883	615	8,040	16,905	76,323	0	931,972	5,231	80,508	129,550	716,683	0
African American	2,988	20	131	631	2,206	0	27,310	196	1,250	4,920	20,944	0
Other/unknown	8,566	233	283	1,210	6,840	0	77,125	2,481	2,709	8,844	63,091	0
Use of Nursing Facilities^c												
Entire year	157	75	79	0	3	0	1,719	810	873	0	36	0
Part year	257	60	173	5	19	0	2,463	504	1,712	35	212	0
None	113,023	733	8,202	18,741	85,347	0	1,032,225	6,594	81,882	143,279	800,470	0
Maintenance Assistance Status												
Cash	22,673	431	4,709	5,448	12,085	0	216,929	4,696	50,887	44,379	116,967	0
Medically needy	4,536	164	847	2,036	1,489	0	35,959	1,009	6,773	13,838	14,339	0
Poverty related	63,707	2	2	3,910	59,793	0	568,312	18	14	22,258	546,022	0
Other/unknown	22,521	271	2,896	7,352	12,002	0	215,207	2,185	26,793	62,839	123,390	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	113,437	868	8,454	18,746	85,369	0	1,036,407	7,908	84,467	143,314	800,718	0
FFS part year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
FFS part year, no Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
MC all year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
MC all year, no Rx claims	0	0	0	0	0	0	0	0	0	0	0	0

Source: Data for this table are from the MAX 2005 file for New Hampshire, released by CMS in 10/2008. This table was produced on 04/23/2009.

a. Table A.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, NEW HAMPSHIRE, 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	113,437	1,036,407	113,437	1,036,407	0	0
Fee-for-service (FFS) all year	113,437	1,036,407	113,437	1,036,407	0	0
FFS part year, with Rx claims	0	0	0	0	0	0
FFS part year, with no Rx claims	0	0	0	0	0	0
Managed care (MC) all year, with Rx claims	0	0	0	0	0	0
MC all year, with no Rx claims	0	0	0	0	0	0

Source: Data for this table are from the MAX 2005 file for New Hampshire, released by CMS in 10/2008. This table was produced on 04/23/2009.

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

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

MC = managed care; Rx = pharmacy benefit.

Nondual Beneficiaries