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**STATISTICAL COMPENDIUM:  
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2006  
NEW JERSEY**

**LIST OF TABLES**

**OVERVIEW OF STUDY POPULATION**

TABLE 1. OVERVIEW OF BENEFICIARY SELECTION CRITERIA FOR STUDY POPULATION

**FOR ALL MEDICAID BENEFICIARIES**

TABLE 2. CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY

TABLE 3. ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC

TABLE 4. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC

TABLE 5. AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC

TABLE 6. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY

TABLE 7. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP

**FOR ALL NONDUAL BENEFICIARIES**

TABLE ND.2. CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY

TABLE ND.3. ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC

TABLE ND.4. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC

TABLE ND.5. AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC

TABLE ND.6. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY

TABLE ND.7-7D. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP

TABLE ND.8. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS, BY BENEFICIARY CHARACTERISTIC

TABLE ND.9. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS, BY BRAND STATUS AND THERAPEUTIC CATEGORY

TABLE ND.10-10D. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY TOP 10 DRUG GROUP

TABLE ND.11. USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D AMONG NONDUALS, BY BENEFICIARY CHARACTERISTIC

TABLE ND.12. USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D AMONG NONDUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC

TABLE ND.13. USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D FOR SELECTED DRUG CATEGORIES AMONG NONDUALS

**FOR DUAL ELIGIBLE BENEFICIARIES**

TABLE D.2. CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY

TABLE D.3. ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC

TABLE D.4. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC

TABLE D.5. AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC

TABLE D.6. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY

TABLE D.7-7D. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP

TABLE D.8. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS, BY BENEFICIARY CHARACTERISTIC

TABLE D.9. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS, BY BRAND STATUS AND THERAPEUTIC CATEGORY

TABLE D.10-10D. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY TOP 10 DRUG GROUP

TABLE D.11. USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D AMONG DUALS, BY BENEFICIARY CHARACTERISTIC

TABLE D.12. USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D AMONG DUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC

TABLE D.13. USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D FOR SELECTED DRUG CATEGORIES AMONG DUALS

**SUPPLEMENTAL TABLES**

SUPPLEMENTAL TABLE 1. MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES

SUPPLEMENTAL TABLE 1A. MEDICAID PHARMACY REIMBURSEMENT FOR DISABLED DUAL ELIGIBLE BENEFICIARIES UNDER AGE 65

SUPPLEMENTAL TABLE 1B. MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 AND OLDER

SUPPLEMENTAL TABLE 1C. MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 TO 74

SUPPLEMENTAL TABLE 1D. MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 75 TO 84

SUPPLEMENTAL TABLE 1E. MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 85 AND OLDER

**APPENDIX TABLES**

APPENDIX TABLE A.1. CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY, NONDUAL BENEFICIARIES

APPENDIX TABLE A.2. MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS, NONDUAL BENEFICIARIES

APPENDIX TABLE A.3. CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY, DUAL ELIGIBLE BENEFICIARIES

APPENDIX TABLE A.4. MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS, DUAL ELIGIBLE BENEFICIARIES

TABLE D.2  
CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY<sup>a, b</sup>  
DUAL ELIGIBLE BENEFICIARIES, NEW JERSEY, 2006

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown
<b>All</b>	<b>142,203</b>	<b>80,562</b>	<b>61,084</b>	<b>500</b>	<b>33</b>	<b>24</b>	<b>1,503,458</b>	<b>834,532</b>	<b>666,648</b>	<b>1,730</b>	<b>324</b>	<b>224</b>
<b>Age</b>												
5 and younger	6	0	5	0	1	0	51	0	50	0	1	0
6-14	14	0	11	0	3	0	117	0	100	0	17	0
15-20	180	0	157	3	20	0	1,852	0	1,605	21	226	0
21-44	16,456	1	16,092	351	9	3	172,335	12	171,017	1,192	80	34
45-64	27,859	19	27,695	127	0	18	302,245	127	301,492	461	0	165
65-74	36,756	25,772	10,963	18	0	3	390,606	268,140	122,386	55	0	25
75-84	35,511	30,306	5,204	1	0	0	382,354	322,899	59,454	1	0	0
85 and older	25,421	24,464	957	0	0	0	253,898	243,354	10,544	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
<b>Gender</b>												
Female	93,461	58,255	34,820	348	14	24	991,710	607,478	382,686	1,179	143	224
Male	48,742	22,307	26,264	152	19	0	511,748	227,054	283,962	551	181	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
<b>Race</b>												
White	71,386	41,512	29,610	238	12	14	745,820	420,312	324,466	788	127	127
African American	27,449	11,916	15,341	174	13	5	293,552	126,841	165,917	615	126	53
Other/unknown	43,368	27,134	16,133	88	8	5	464,086	287,379	176,265	327	71	44
<b>Use of Nursing Facilities<sup>c</sup></b>												
Entire year	21,165	18,590	2,575	0	0	0	219,328	190,667	28,661	0	0	0
Part year	11,407	9,777	1,630	0	0	0	109,718	93,071	16,647	0	0	0
None	109,631	52,195	56,879	500	33	24	1,174,412	550,794	621,340	1,730	324	224
<b>Maintenance Assistance Status</b>												
Cash	68,531	29,890	38,477	162	2	0	746,978	324,686	421,697	591	4	0
Medically needy	26	11	15	0	0	0	213	110	103	0	0	0
Poverty-related	34,654	19,430	15,110	89	1	24	370,443	206,951	162,941	324	3	224
Other/unknown	38,992	31,231	7,482	249	30	0	385,824	302,785	81,907	815	317	0
<b>Dual Medicare Status<sup>d</sup></b>												
Full dual, all year	141,227	79,844	60,835	491	33	24	1,493,512	827,093	664,196	1,675	324	224
Full dual, part year	976	718	249	9	0	0	9,946	7,439	2,452	55	0	0
<b>Managed Care (MC) Status</b>												
Fee-for-service (FFS) all year	139,663	79,929	59,559	122	29	24	1,493,251	831,816	660,256	639	316	224
FFS part year, with Rx claims	2,040	544	1,290	203	3	0	8,474	2,332	5,494	643	5	0
FFS part year, no Rx claims	500	89	235	175	1	0	1,733	384	898	448	3	0

Source: Data for this table are from the MAX 2006 file for New Jersey, released by CMS in 7/2009. This table was produced on 02/11/2010.

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

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

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

d. The "Full dual, all year" group contains beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefits during all months of Medicaid enrollment in 2006. The "Full dual, part year" group contains beneficiaries who had such benefits for some, but not all, months of their enrollment. Refer to footnote g of Table 1 for more information about how we determined dual eligibility status.

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

TABLE D.3  
ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC<sup>a, b</sup>  
DUAL ELIGIBLE BENEFICIARIES, NEW JERSEY, 2006

Beneficiary Characteristics	Percentage with at Least One Rx	Mean Number of Rx	Mean Rx \$	\$ per Rx	Rx \$ as a Percentage of All Medicaid		Number of Beneficiaries
					Mean \$, All Medicaid FFS \$ <sup>c</sup>	FFS \$ <sup>d</sup>	
<b>All</b>	<b>77.7</b>	<b>11.3</b>	<b>\$722</b>	<b>\$64</b>	<b>\$18,576</b>	<b>3.9</b>	<b>142,203</b>
<b>Age</b>							
5 and younger	83.3	14.3	1,531	107	31,184	4.9	6
6-14	85.7	32.2	6,301	196	21,721	29.0	14
15-20	66.7	14.9	2,490	167	15,548	16.0	180
21-44	71.6	10.6	994	94	14,471	6.9	16,456
45-64	81.8	14.5	1,090	75	21,255	5.1	27,859
65-74	78.6	11.8	706	60	11,144	6.3	36,756
75-84	79.5	10.5	549	52	17,849	3.1	35,511
85 and older	73.6	8.6	394	46	30,073	1.3	25,421
Unknown	0.0	0.0	0	0	0	0.0	0
<b>Basis of Eligibility<sup>e</sup></b>							
Aged	75.7	9.6	502	52	20,037	2.5	80,562
Disabled	80.6	13.6	1,014	75	16,775	6.0	61,084
Adults	49.4	4.8	465	97	3,273	14.2	500
Children	60.6	20.3	2,927	144	20,742	14.1	33
Unknown	87.5	18.1	1,202	67	12,879	9.3	24
<b>Gender</b>							
Female	79.5	11.6	702	60	18,562	3.8	93,461
Male	74.3	10.6	760	72	18,602	4.1	48,742
Unknown	0.0	0.0	0	0	0	0.0	0
<b>Race</b>							
White	76.4	11.1	667	60	25,530	2.6	71,386
African American	77.1	11.4	851	75	15,368	5.5	27,449
Other/unknown	80.3	11.6	732	63	9,159	8.0	43,368
<b>Use of Nursing Facilities<sup>f</sup></b>							
Entire year	72.8	11.1	462	41	52,898	0.9	21,165
Part year	77.7	11.1	563	51	33,236	1.7	11,407
None	78.7	11.3	789	70	10,424	7.6	109,631
<b>Maintenance Assistance Status</b>							
Cash	80.3	12.1	816	68	8,933	9.1	68,531
Medically needy	65.4	10.0	679	68	15,741	4.3	26
Poverty related	79.5	11.0	805	73	7,112	11.3	34,654
Other/unknown	71.7	10.2	483	48	45,713	1.1	38,992

Source: Data for this table are from the MAX 2006 file for New Jersey, released by CMS in 7/2009. This table was produced on 02/11/2010.

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

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

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

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

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

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

TABLE D.4  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC<sup>a, b</sup>  
 DUAL ELIGIBLE BENEFICIARIES, NEW JERSEY, 2006

Beneficiary Characteristics	Number of Rx, Percentage with:										Number	
	Mean Number of Rx	Mean Rx \$	Rx \$ as a Percentage of All Medicaid FFS \$ <sup>c</sup>	None	More than 0, but 1 or Less	More than 1, but 2 or Less	More than 2, but 5 or Less	More than 5, but 10 or Less	More than 10	Mean \$, All Medicaid FFS \$ <sup>d</sup>	Beneficiaries	Benefit Months
<b>All</b>	<b>1.1</b>	<b>\$68</b>	<b>3.9</b>	<b>22.3</b>	<b>52.9</b>	<b>13.1</b>	<b>9.0</b>	<b>2.0</b>	<b>0.8</b>	<b>\$1,757</b>	<b>142,203</b>	<b>1,503,458</b>
<b>Age</b>												
5 and younger	1.7	180	4.9	16.7	50.0	0.0	0.0	16.7	16.7	3,669	6	51
6-14	3.9	754	29.0	14.3	35.7	0.0	35.7	0.0	14.3	2,599	14	117
15-20	1.4	242	16.0	33.3	37.2	8.9	13.3	6.1	1.1	1,511	180	1,852
21-44	1.0	95	6.9	28.4	48.4	11.1	8.7	2.2	1.1	1,382	16,456	172,335
45-64	1.3	100	5.1	18.2	49.4	16.0	12.4	2.8	1.2	1,959	27,859	302,245
65-74	1.1	66	6.3	21.4	53.6	13.3	8.8	2.0	0.8	1,049	36,756	390,606
75-84	1.0	51	3.1	20.5	56.5	13.4	7.8	1.4	0.4	1,658	35,511	382,354
85 and older	0.9	40	1.3	26.4	53.6	10.6	7.2	1.8	0.5	3,011	25,421	253,898
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<b>Basis of Eligibility<sup>e</sup></b>												
Aged	0.9	48	2.5	24.3	54.6	11.8	7.3	1.6	0.5	1,934	80,562	834,532
Disabled	1.2	93	6.0	19.4	51.0	14.9	11.1	2.5	1.1	1,537	61,084	666,648
Adults	1.4	134	14.2	50.6	21.6	7.0	12.4	5.6	2.8	946	500	1,730
Children	2.1	298	14.1	39.4	21.2	6.1	18.2	9.1	6.1	2,113	33	324
Unknown	1.9	129	9.3	12.5	25.0	29.2	33.3	0.0	0.0	1,380	24	224
<b>Gender</b>												
Female	1.1	66	3.8	20.5	53.9	13.5	9.2	2.1	0.8	1,749	93,461	991,710
Male	1.0	72	4.1	25.7	50.9	12.3	8.5	1.9	0.7	1,772	48,742	511,748
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<b>Race</b>												
White	1.1	64	2.6	23.6	51.4	12.8	9.3	2.2	0.8	2,444	71,386	745,820
African American	1.1	80	5.5	22.9	52.9	12.9	8.4	2.0	0.9	1,437	27,449	293,552
Other/unknown	1.1	68	8.0	19.7	55.3	13.7	8.9	1.7	0.7	856	43,368	464,086
<b>Use of Nursing Facilities<sup>f</sup></b>												
Entire year	1.1	45	0.9	27.2	48.4	10.9	9.4	2.9	1.1	5,105	21,165	219,328
Part year	1.2	59	1.7	22.3	52.8	11.1	9.6	3.1	1.0	3,455	11,407	109,718
None	1.1	74	7.6	21.3	53.7	13.7	8.8	1.7	0.7	973	109,631	1,174,412
<b>Maintenance Assistance Status</b>												
Cash	1.1	75	9.1	19.7	54.3	14.1	9.2	1.9	0.8	820	68,531	746,978
Medically needy	1.2	83	4.3	34.6	30.8	15.4	15.4	3.8	0.0	1,921	26	213
Poverty related	1.0	75	11.3	20.5	55.2	13.9	8.2	1.5	0.7	665	34,654	370,443
Other/unknown	1.0	49	1.1	28.3	48.4	10.5	9.3	2.6	0.8	4,620	38,992	385,824

Source: Data for this table are from the MAX 2006 file for New Jersey, released by CMS in 7/2009. This table was produced on 02/11/2010.

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

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

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

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

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

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

TABLE D.5  
 AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, NEW JERSEY, 2006

Beneficiary Characteristics	All Rx			Patented Brand-Name Drugs			Off-Patent Brand-Name Drugs			Generic Drugs		
	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx
<b>All</b>	<b>1.1</b>	<b>\$68</b>	<b>\$64</b>	<b>0.4</b>	<b>\$48</b>	<b>\$128</b>	<b>0.1</b>	<b>\$5</b>	<b>\$70</b>	<b>0.6</b>	<b>\$15</b>	<b>\$25</b>
<b>Age</b>												
5 and younger	1.7	180	107	0.5	140	286	0.1	2	30	1.1	38	33
6-14	3.9	754	196	1.4	684	485	0.1	14	98	2.3	56	24
15-20	1.4	242	167	0.7	210	300	0.1	6	102	0.7	26	38
21-44	1.0	95	94	0.3	70	200	0.1	6	109	0.6	19	31
45-64	1.3	100	75	0.4	70	157	0.1	8	92	0.8	23	28
65-74	1.1	66	60	0.4	47	110	0.1	5	63	0.6	15	24
75-84	1.0	51	52	0.3	35	100	0.1	5	58	0.5	12	22
85 and older	0.9	40	46	0.3	26	99	0.1	3	49	0.5	10	19
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Basis of Eligibility<sup>d</sup></b>												
Aged	0.9	48	52	0.3	33	103	0.1	4	57	0.5	11	21
Disabled	1.2	93	75	0.4	66	151	0.1	7	84	0.7	20	28
Adults	1.4	134	97	0.6	100	165	0.1	6	104	0.7	28	39
Children	2.1	298	144	1.2	266	217	0.0	3	66	0.8	29	37
Unknown	1.9	129	67	0.7	85	127	0.1	9	103	1.2	35	29
<b>Gender</b>												
Female	1.1	66	60	0.4	46	119	0.1	5	69	0.6	15	24
Male	1.0	72	72	0.4	52	147	0.1	5	73	0.6	16	26
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Race</b>												
White	1.1	64	60	0.3	43	130	0.1	5	77	0.7	16	24
African American	1.1	80	75	0.4	58	146	0.1	6	73	0.6	16	27
Other/unknown	1.1	68	63	0.4	49	115	0.1	5	61	0.6	14	25
<b>Use of Nursing Facilities<sup>e</sup></b>												
Entire year	1.1	45	41	0.3	29	109	0.1	3	44	0.7	13	18
Part year	1.2	59	51	0.3	39	117	0.1	4	57	0.7	15	21
None	1.1	74	70	0.4	52	131	0.1	6	75	0.6	16	27
<b>Maintenance Assistance Status</b>												
Cash	1.1	75	68	0.4	53	126	0.1	6	69	0.6	16	26
Medically needy	1.2	83	68	0.5	59	113	0.0	4	83	0.6	20	30
Poverty related	1.0	75	73	0.4	53	140	0.1	6	86	0.6	16	28
Other/unknown	1.0	49	48	0.3	32	119	0.1	3	56	0.7	13	19

Source: Data for this table are from the MAX 2006 file for New Jersey, released by CMS in 7/2009. This table was produced on 02/11/2010.

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

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

c. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies combined. For information about this classification method, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

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

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

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

TABLE D.6  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, NEW JERSEY, 2006

Therapeutic Category	Number of Rx per Benefit Month												Users <sup>e</sup>				
	Among Users				\$ per Benefit Month Among Users				\$ per Rx				Total Number of Rx	Total Rx \$	Number	As a Percentage of Dual Benes	Number of Benefit Months
	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					
Anti-infective Agents	0.2	0.1	0.0	0.1	\$30	\$25	\$1	\$4	\$155	\$305	\$145	\$38	49,680	\$7,699,700	23,879	16.8	260,508
Biologicals	0.1	0.0	0.0	0.0	11	9	0	2	115	182	0	41	2,064	237,077	1,931	1.4	21,835
Antineoplastic Agents	0.2	0.1	0.0	0.2	69	50	1	18	308	775	610	113	6,917	2,133,853	3,031	2.1	31,111
Endocrine/Metabolic Drugs	0.3	0.1	0.0	0.2	19	15	1	4	67	114	103	23	111,215	7,405,708	34,770	24.5	384,201
Cardiovascular Agents	0.4	0.2	0.0	0.2	23	16	3	5	54	74	107	23	280,415	15,033,709	57,970	40.8	639,736
Respiratory Agents	0.3	0.1	0.0	0.2	16	12	1	4	55	94	55	24	133,501	7,327,783	40,143	28.2	449,342
Gastrointestinal Agents	0.2	0.2	0.0	0.1	25	21	1	3	108	139	362	33	85,881	9,314,446	33,681	23.7	369,209
Genitourinary Agents	0.2	0.1	0.0	0.1	14	10	3	2	71	84	94	31	19,010	1,350,601	8,616	6.1	94,616
CNS Drugs	0.6	0.1	0.0	0.4	33	22	3	8	55	162	111	19	331,436	18,226,618	50,878	35.8	558,066
Stimulants/Anti-obesity/Anorexia	0.3	0.2	0.0	0.0	48	47	0	1	178	192	110	43	4,182	744,320	1,378	1.0	15,434
Miscellaneous Psychological/Neurological Agents	0.2	0.2	0.0	0.0	38	38	0	1	161	165	113	79	15,594	2,511,077	6,095	4.3	65,296
Analgesics and Anesthetics	0.3	0.0	0.0	0.2	22	9	3	10	83	202	154	49	93,875	7,795,519	31,673	22.3	346,825
Neuromuscular Agents	0.4	0.1	0.0	0.3	24	13	1	10	55	154	90	29	100,309	5,529,627	20,744	14.6	228,880
Nutritional Products	0.4	0.1	0.1	0.3	7	2	2	3	16	23	17	13	168,175	2,634,517	34,168	24.0	379,301
Hematological Agents	0.4	0.1	0.0	0.3	27	23	0	4	66	210	27	13	113,647	7,462,150	25,129	17.7	275,326
Topical Products	0.3	0.1	0.0	0.1	18	13	1	4	72	108	70	37	86,318	6,238,010	30,995	21.8	343,370
Miscellaneous Products	0.2	0.2	0.0	0.1	88	75	5	7	357	480	249	104	2,823	1,007,556	1,079	0.8	11,513
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	8	0	0	0	52	0	0	0	871	45,055	503	0.4	5,532
<b>TOTAL NO. OF RX AND RX \$</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>1,605,913</b>	<b>102,697,326</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>

Source: Data for this table are from the MAX 2006 file for New Jersey, released by CMS in 7/2009. This table was produced on 02/11/2010.

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

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

c. For information about these therapeutic categories, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

d. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In New Jersey, 1.2 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.

For information about this classification method, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

e. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 2006.

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

TABLE D.7  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, NEW JERSEY, 2006

Top 10 Drug Groups	Users			Among Users			
	Total Medicaid Rx \$	Number of Users	As a Percentage of Dual Beneficiaries	Number of Benefit Months	Number of Rx per Benefit Month	\$ per Rx	Rx \$ per Benefit Month
ANTIPSYCHOTICS	\$9,064,232	15,454	10.9	172,386	0.2	\$216	\$53
ULCER DRUGS	6,919,780	30,038	21.1	333,532	0.2	115	21
ANTHYPERLIPIDEMIC	5,763,770	28,063	19.7	317,585	0.2	101	18
ANTIVIRAL	4,863,969	3,589	2.5	40,121	0.2	534	121
ANTIDIABETIC	4,457,949	28,750	20.2	321,840	0.2	70	14
ANTICONVULSANT	4,438,991	17,710	12.5	198,036	0.4	54	22
HEMATOPOIETIC AGENTS	4,262,152	17,675	12.4	195,338	0.4	50	22
DERMATOLOGICAL	4,208,388	30,253	21.3	339,051	0.2	79	12
ANTIHYPERTENSIVE	4,005,357	37,140	26.1	415,790	0.2	51	10
ANALGESICS - Narcotic	3,774,443	21,037	14.8	228,520	0.2	82	17
Total	51,759,031	229,709	n.a.	2,562,199	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2006 file for New Jersey, released by CMS in 7/2009. This table was produced on 02/11/2010.

a. Table D.7 includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2006. 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 2006. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

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

Dual Medicaid Beneficiaries



TABLE D.7A  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS COMBINED  
 AND FIRST AND SECOND GROUPS SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, NEW JERSEY, 2006

Beneficiary Characteristics	All Top 10 Drug Groups							ANTIPSYCHOTICS					ULCER DRUGS				
	Number of Rx	Rx \$	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
<b>All</b>	<b>577,388</b>	<b>\$51,759,031</b>	<b>15,454</b>	<b>10.9</b>	<b>172,386</b>	<b>0.2</b>	<b>\$53</b>	<b>30,038</b>	<b>21.1</b>	<b>333,532</b>	<b>0.2</b>	<b>\$21</b>					
<b>Female</b>																	
All Females	378,663	31,234,209	8,352	8.9	92,481	0.2	48	21,213	22.7	236,438	0.2	21					
<b>Female, Disabled</b>																	
All Ages	184,924	18,160,942	5,627	16.2	64,178	0.2	54	9,274	26.6	105,793	0.2	22					
5 and younger	20	2,177	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
6-14	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
15-20	459	71,259	19	27.1	210	0.5	104	14	20.0	168	0.2	20					
21-44	32,746	4,066,064	1,909	27.1	21,516	0.3	62	1,258	17.8	14,149	0.2	22					
45-64	86,103	8,779,728	2,964	19.8	33,969	0.2	49	4,112	27.4	46,564	0.2	22					
65-74	45,764	3,801,195	494	6.4	5,740	0.3	67	2,486	32.1	28,651	0.2	23					
75-84	16,931	1,242,438	197	4.8	2,249	0.2	31	1,188	28.9	13,793	0.2	18					
85 and older	2,901	198,081	44	5.2	494	0.2	20	216	25.7	2,468	0.1	17					
<b>Female, Other Eligibles</b>																	
All Ages	193,739	13,073,267	2,725	4.6	28,303	0.2	32	11,939	20.4	130,645	0.2	20					
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
6-14	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
15-20	72	17,897	1	8.3	12	0.9	603	0	0.0	0	0.0	0					
21-44	376	39,017	11	4.0	73	0.4	105	19	6.9	122	0.3	38					
45-64	341	23,616	4	4.1	9	0.9	81	19	19.4	140	0.2	26					
65-74	62,282	4,672,610	642	3.9	7,090	0.3	39	3,676	22.4	40,867	0.2	21					
75-84	75,030	5,095,765	1,010	4.7	10,612	0.2	28	4,759	22.2	53,234	0.2	19					
85 and older	55,638	3,224,362	1,057	5.2	10,507	0.2	31	3,466	16.9	36,282	0.2	19					
<b>Male</b>																	
All Males	198,725	20,524,822	7,102	14.6	79,905	0.2	59	8,825	18.1	97,094	0.2	21					
<b>Male, Disabled</b>																	
All Ages	124,429	15,351,365	6,160	23.5	70,259	0.2	62	4,702	17.9	52,831	0.2	22					
5 and younger	7	2,354	1	33.3	8	0.6	286	0	0.0	0	0.0	0					
6-14	173	24,481	0	0.0	0	0.0	0	1	12.5	12	0.3	34					
15-20	430	76,695	22	25.3	264	0.5	120	8	9.2	96	0.2	33					
21-44	36,169	5,423,502	2,778	30.7	31,570	0.3	68	1,110	12.3	12,410	0.2	23					
45-64	65,863	7,931,181	3,093	24.3	35,336	0.2	56	2,484	19.6	27,859	0.2	22					
65-74	17,384	1,577,211	215	6.7	2,478	0.3	63	818	25.4	9,232	0.2	24					
75-84	4,075	292,475	45	4.1	531	0.2	39	260	23.9	2,995	0.2	21					
85 and older	328	23,466	6	5.1	72	0.2	27	21	17.8	227	0.2	18					

Dual Medicaid Beneficiaries

TABLE D.7A  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS COMBINED  
 AND FIRST AND SECOND GROUPS SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, NEW JERSEY, 2006

Beneficiary Characteristics	All Top 10 Drug Groups		ANTIPSYCHOTICS					ULCER DRUGS				
	Number of Rx	Rx \$	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
<b>Male, Other Eligibles</b>												
All Ages	74,296	5,173,457	942	4.2	9,646	0.2	36	4,123	18.3	44,263	0.2	20
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	199	32,829	10	90.9	120	0.7	165	1	9.1	12	1.2	253
21-44	162	27,956	4	4.5	25	1.2	365	7	7.9	28	0.4	46
45-64	173	27,346	1	1.5	6	2.5	686	8	12.1	43	0.5	42
65-74	32,656	2,384,897	366	3.9	3,935	0.2	42	1,697	18.1	18,275	0.2	20
75-84	29,861	2,018,471	365	4.1	3,643	0.2	28	1,701	19.1	18,586	0.2	20
85 and older	11,245	681,958	196	4.9	1,917	0.2	27	709	17.7	7,319	0.2	18
<b>Unknown</b>	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2006 file for New Jersey, released by CMS in 7/2009. This table was produced on 02/11/2010.

a. Table D.7A includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2006. 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 2006. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

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

Dual Medicaid Beneficiaries

TABLE D.7B  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR THIRD TO FIFTH TOP DRUG GROUPS  
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, NEW JERSEY, 2006

Beneficiary Characteristics	ANTIHYPERTENSIVE					ANTIVIRAL					ANTIDIABETIC				
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
<b>All</b>	<b>28,063</b>	<b>19.7</b>	<b>317,585</b>	<b>0.2</b>	<b>\$18</b>	<b>3,589</b>	<b>2.5</b>	<b>40,121</b>	<b>0.2</b>	<b>\$121</b>	<b>28,750</b>	<b>20.2</b>	<b>321,840</b>	<b>0.2</b>	<b>\$14</b>
<b>Female</b>															
All Females	19,025	20.4	216,144	0.2	18	1,528	1.6	17,195	0.2	99	19,199	20.5	216,478	0.2	14
<b>Female, Disabled</b>															
All Ages	7,964	22.9	91,766	0.2	19	1,272	3.7	14,369	0.2	112	8,917	25.6	102,104	0.2	16
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	5	7.1	60	0.4	21	3	4.3	36	0.6	398	11	15.7	124	0.3	34
21-44	511	7.2	5,812	0.2	18	383	5.4	4,310	0.2	114	624	8.8	7,059	0.2	19
45-64	3,459	23.1	39,603	0.2	19	744	5.0	8,429	0.2	122	3,752	25.0	42,695	0.2	17
65-74	2,641	34.1	30,547	0.2	20	115	1.5	1,302	0.1	48	3,160	40.8	36,378	0.2	17
75-84	1,196	29.1	14,026	0.1	15	23	0.6	255	0.1	47	1,228	29.8	14,229	0.2	11
85 and older	152	18.1	1,718	0.1	16	4	0.5	37	0.1	9	142	16.9	1,619	0.2	10
<b>Female, Other Eligibles</b>															
All Ages	11,061	18.9	124,378	0.2	18	256	0.4	2,826	0.1	35	10,282	17.5	114,374	0.2	12
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	2	16.7	17	0.1	42	0	0.0	0	0.0	0
21-44	9	3.3	45	0.4	38	6	2.2	21	0.4	274	14	5.1	85	0.4	30
45-64	18	18.4	130	0.2	22	3	3.1	10	0.4	154	29	29.6	170	0.3	24
65-74	4,382	26.7	49,225	0.2	18	121	0.7	1,389	0.1	43	4,259	26.0	47,447	0.2	13
75-84	4,810	22.5	54,891	0.2	17	80	0.4	929	0.1	27	4,181	19.5	47,400	0.2	11
85 and older	1,842	9.0	20,087	0.2	18	44	0.2	460	0.1	12	1,799	8.8	19,272	0.2	10
<b>Male</b>															
All Males	9,038	18.5	101,441	0.2	18	2,061	4.2	22,926	0.2	138	9,551	19.6	105,362	0.2	14
<b>Male, Disabled</b>															
All Ages	4,665	17.8	52,979	0.2	19	1,881	7.2	21,064	0.2	143	4,804	18.3	53,628	0.2	16
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	3	37.5	36	0.4	249	1	12.5	12	0.1	9
15-20	3	3.4	36	0.3	19	3	3.4	36	0.2	284	3	3.4	36	0.7	49
21-44	832	9.2	9,382	0.2	17	658	7.3	7,289	0.2	131	736	8.1	8,121	0.2	18
45-64	2,501	19.7	28,326	0.2	19	1,130	8.9	12,701	0.3	146	2,612	20.6	28,998	0.2	16
65-74	1,037	32.2	11,814	0.2	20	83	2.6	954	0.3	183	1,138	35.3	12,832	0.2	15
75-84	274	25.2	3,211	0.2	15	4	0.4	48	0.1	6	301	27.6	3,481	0.2	10
85 and older	18	15.3	210	0.1	19	0	0.0	0	0.0	0	13	11.0	148	0.1	5

Dual Medicaid Beneficiaries

TABLE D.7B  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR THIRD TO FIFTH TOP DRUG GROUPS  
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, NEW JERSEY, 2006

Beneficiary Characteristics	ANTIHYPERTENSIVE					ANTIVIRAL					ANTIDIABETIC				
	Number of Users	Users as %	Number of Benefit Months Among Users	Mean		Number of Users	Users as %	Number of Benefit Months Among Users	Mean		Number of Users	Users as %	Number of Benefit Months Among Users	Mean	
		of Dual Benes		Rx per Benefit	Mean Rx \$		Rx per Benefit		Mean Rx \$	of Dual Benes		Rx per Benefit		Mean Rx \$	Rx per Benefit
<b>Male, Other Eligibles</b>															
All Ages	4,373	19.5	48,462	0.2	18	180	0.8	1,862	0.2	78	4,747	21.1	51,734	0.2	12
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	9.1	12	1.0	33
21-44	5	5.6	19	0.3	26	0	0.0	0	0.0	0	4	4.5	4	1.5	102
45-64	10	15.2	68	0.5	57	8	12.1	32	0.5	378	9	13.6	34	0.4	31
65-74	2,097	22.3	23,036	0.2	19	115	1.2	1,221	0.2	86	2,440	26.0	26,437	0.2	13
75-84	1,865	20.9	21,141	0.2	18	46	0.5	501	0.2	56	1,817	20.4	20,162	0.2	11
85 and older	396	9.9	4,198	0.2	18	11	0.3	108	0.1	9	476	11.9	5,085	0.2	10
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2006 file for New Jersey, released by CMS in 7/2009. This table was produced on 02/11/2010.

a. Table D.7B includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2006. 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 2006. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

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

Dual Medicaid Beneficiaries

TABLE D.7C  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR SIXTH TO EIGHTH TOP DRUG GROUPS  
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, NEW JERSEY, 2006

Beneficiary Characteristics	ANTICONVULSANT					HEMATOPOIETIC AGENTS					DERMATOLOGICAL				
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit per Month	Mean Rx \$ Benefit per Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit per Month	Mean Rx \$ Benefit per Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit per Month	Mean Rx \$ Benefit per Month
<b>All</b>	<b>17,710</b>	<b>12.5</b>	<b>198,036</b>	<b>0.4</b>	<b>\$22</b>	<b>17,675</b>	<b>12.4</b>	<b>195,338</b>	<b>0.4</b>	<b>\$22</b>	<b>30,253</b>	<b>21.3</b>	<b>339,051</b>	<b>0.2</b>	<b>\$12</b>
<b>Female</b>															
All Females	11,024	11.8	123,051	0.4	21	12,397	13.3	137,336	0.4	20	20,648	22.1	231,897	0.2	13
<b>Female, Disabled</b>															
All Ages	7,076	20.3	80,383	0.4	25	4,262	12.2	48,966	0.4	23	9,482	27.2	109,364	0.2	12
5 and younger	1	50.0	6	1.2	225	2	100.0	24	0.2	28	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	15	21.4	162	0.6	91	7	10.0	84	0.3	43	23	32.9	266	0.2	20
21-44	2,024	28.7	22,613	0.4	33	646	9.2	7,401	0.3	21	1,411	20.0	16,142	0.2	12
45-64	3,692	24.6	42,104	0.4	24	1,695	11.3	19,360	0.4	27	3,910	26.1	44,646	0.2	13
65-74	923	11.9	10,624	0.4	17	1,106	14.3	12,861	0.4	23	2,653	34.3	31,032	0.2	13
75-84	358	8.7	4,135	0.3	12	663	16.1	7,629	0.4	18	1,272	30.9	14,934	0.1	11
85 and older	63	7.5	739	0.3	7	143	17.0	1,607	0.5	24	213	25.4	2,344	0.2	11
<b>Female, Other Eligibles</b>															
All Ages	3,948	6.7	42,668	0.4	14	8,135	13.9	88,370	0.5	19	11,166	19.0	122,533	0.2	13
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	4	33.3	38	1.1	241	1	8.3	12	0.4	12	4	33.3	46	0.1	10
21-44	27	9.8	155	0.5	45	11	4.0	63	0.3	5	21	7.6	134	0.2	12
45-64	14	14.3	81	0.5	41	9	9.2	73	0.2	4	16	16.3	99	0.3	24
65-74	1,306	8.0	14,490	0.4	16	1,772	10.8	19,682	0.4	22	3,444	21.0	38,467	0.2	13
75-84	1,531	7.2	16,893	0.4	13	3,114	14.6	34,616	0.4	17	4,510	21.1	50,683	0.1	12
85 and older	1,066	5.2	11,011	0.4	11	3,228	15.8	33,924	0.5	18	3,171	15.5	33,104	0.2	13
<b>Male</b>															
All Males	6,686	13.7	74,985	0.4	25	5,278	10.8	58,002	0.4	26	9,605	19.7	107,154	0.2	12
<b>Male, Disabled</b>															
All Ages	5,180	19.7	58,743	0.4	27	2,168	8.3	24,478	0.4	33	5,172	19.7	58,596	0.2	13
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	33.3	8	0.3	9
6-14	3	37.5	34	1.1	18	10	125.0	120	0.4	102	5	62.5	60	0.3	9
15-20	13	14.9	147	0.6	88	10	11.5	117	0.2	108	16	18.4	187	0.3	12
21-44	1,953	21.6	22,149	0.4	32	389	4.3	4,357	0.4	52	1,329	14.7	15,079	0.2	13
45-64	2,773	21.8	31,407	0.4	24	1,139	9.0	12,753	0.5	29	2,515	19.8	28,253	0.2	13
65-74	348	10.8	3,975	0.4	23	458	14.2	5,285	0.4	27	991	30.8	11,335	0.2	14
75-84	81	7.4	938	0.3	11	140	12.9	1,615	0.4	20	288	26.4	3,367	0.2	12
85 and older	9	7.6	93	0.2	6	22	18.6	231	0.5	31	27	22.9	307	0.1	6

Dual Medicaid Beneficiaries

TABLE D.7C  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR SIXTH TO EIGHTH TOP DRUG GROUPS  
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, NEW JERSEY, 2006

Beneficiary Characteristics	ANTICONVULSANT					HEMATOPOIETIC AGENTS					DERMATOLOGICAL				
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean		Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean		Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean	
				Rx per Month	Mean Rx \$ Benefit				Rx per Month	Mean Rx \$ Benefit				Rx per Month	Mean Rx \$ Benefit
<b>Male, Other Eligibles</b>															
All Ages	1,506	6.7	16,242	0.4	15	3,110	13.8	33,524	0.5	20	4,433	19.7	48,558	0.2	12
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	5	45.5	60	0.8	126	1	9.1	9	0.1	1	9	81.8	108	0.2	15
21-44	12	13.5	43	1.3	239	0	0.0	0	0.0	0	6	6.7	43	0.4	54
45-64	3	4.5	8	0.9	21	0	0.0	0	0.0	0	6	9.1	44	0.2	16
65-74	697	7.4	7,608	0.4	17	1,065	11.3	11,462	0.5	19	1,808	19.3	19,883	0.2	12
75-84	568	6.4	6,211	0.3	12	1,357	15.2	14,890	0.5	20	1,866	21.0	20,757	0.2	12
85 and older	221	5.5	2,312	0.4	12	687	17.1	7,163	0.5	21	738	18.4	7,723	0.2	12
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2006 file for New Jersey, released by CMS in 7/2009. This table was produced on 02/11/2010.

a. Table D.7C includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2006. 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 2006. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

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

Dual Medicaid Beneficiaries

TABLE D.7D  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR NINTH AND TENTH TOP DRUG GROUPS  
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, NEW JERSEY, 2006

Beneficiary Characteristics	ANTIHYPERTENSIVE					ANALGESICS - Narcotic						
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Beneficiaries	Number of Benefit Months
<b>All</b>	<b>37,140</b>	<b>26.1</b>	<b>415,790</b>	<b>0.2</b>	<b>\$10</b>	<b>21,037</b>	<b>14.8</b>	<b>228,520</b>	<b>0.2</b>	<b>\$17</b>	<b>142,203</b>	<b>1,503,458</b>
<b>Female</b>												
All Females	25,189	27.0	283,357	0.2	10	14,455	15.5	157,792	0.2	15	93,461	991,710
<b>Female, Disabled</b>												
All Ages	9,732	27.9	111,737	0.2	10	8,246	23.7	92,512	0.2	19	34,820	382,686
5 and younger	0	0.0	0	0.0	0	3	150.0	18	0.5	9	2	18
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	9
15-20	11	15.7	131	0.4	16	13	18.6	145	0.2	3	70	704
21-44	659	9.3	7,450	0.2	10	1,752	24.8	19,354	0.2	28	7,056	74,886
45-64	3,944	26.3	44,856	0.2	11	4,188	27.9	46,644	0.2	21	14,992	163,745
65-74	3,271	42.2	37,811	0.2	11	1,516	19.6	17,505	0.2	12	7,743	86,912
75-84	1,588	38.6	18,509	0.2	8	647	15.7	7,461	0.1	6	4,115	47,138
85 and older	259	30.9	2,980	0.2	8	127	15.1	1,385	0.1	8	839	9,274
<b>Female, Other Eligibles</b>												
All Ages	15,457	26.4	171,620	0.2	10	6,209	10.6	65,280	0.2	8	58,641	609,024
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	1
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12
15-20	2	16.7	14	0.1	11	2	16.7	14	0.2	5	12	118
21-44	16	5.8	80	0.5	25	47	17.1	305	0.3	19	275	996
45-64	27	27.6	204	0.3	18	33	33.7	222	0.3	5	98	484
65-74	5,321	32.4	59,422	0.2	10	2,002	12.2	21,904	0.2	9	16,403	172,742
75-84	6,463	30.2	73,024	0.2	9	2,381	11.1	25,790	0.2	7	21,401	230,023
85 and older	3,628	17.7	38,876	0.2	9	1,744	8.5	17,045	0.2	8	20,450	204,648
<b>Male</b>												
All Males	11,951	24.5	132,433	0.2	9	6,582	13.5	70,728	0.2	21	48,742	511,748
<b>Male, Disabled</b>												
All Ages	5,709	21.7	64,063	0.2	10	4,604	17.5	50,466	0.2	26	26,264	283,962
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	32
6-14	7	87.5	84	0.6	19	2	25.0	24	0.1	2	8	91
15-20	7	8.0	84	0.3	9	17	19.5	204	0.1	3	87	901
21-44	956	10.6	10,542	0.2	9	1,454	16.1	15,860	0.2	32	9,036	96,131
45-64	3,098	24.4	34,652	0.2	9	2,502	19.7	27,259	0.2	26	12,703	137,747
65-74	1,230	38.2	13,924	0.2	11	511	15.9	5,773	0.2	11	3,220	35,474
75-84	383	35.2	4,472	0.2	9	108	9.9	1,232	0.2	7	1,089	12,316
85 and older	28	23.7	305	0.2	8	10	8.5	114	0.1	5	118	1,270

Dual Medicaid Beneficiaries

TABLE D.7D  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR NINTH AND TENTH TOP DRUG GROUPS  
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, NEW JERSEY, 2006

Beneficiary Characteristics	ANTIHYPERTENSIVE					ANALGESICS - Narcotic						
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Beneficiaries	Number of Benefit Months
<b>Male, Other Eligibles</b>												
All Ages	6,242	27.8	68,370	0.2	9	1,978	8.8	20,262	0.2	9	22,478	227,786
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	5
15-20	3	27.3	36	0.7	11	1	9.1	12	0.1	1	11	129
21-44	9	10.1	24	0.6	24	15	16.9	56	0.4	63	89	322
45-64	9	13.6	62	0.6	44	10	15.2	33	0.5	26	66	269
65-74	2,904	30.9	31,554	0.2	9	911	9.7	9,569	0.2	10	9,390	95,478
75-84	2,549	28.6	28,520	0.2	9	740	8.3	7,721	0.2	7	8,906	92,877
85 and older	768	19.1	8,174	0.2	8	301	7.5	2,871	0.2	10	4,014	38,706
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0

Source: Data for this table are from the MAX 2006 file for New Jersey, released by CMS in 7/2009. This table was produced on 02/11/2010.

a. Table D.7D includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2006. 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 2006. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

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.



TABLE D.8  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,  
 BY BENEFICIARY CHARACTERISTIC<sup>a, b</sup>  
 DUAL ELIGIBLE BENEFICIARIES, NEW JERSEY, 2006

Beneficiary Characteristics	Rx \$ per Benefit Month	Number of Rx per Benefit Month	Number of All-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents
<b>All</b>	<b>\$45</b>	<b>1.1</b>	<b>21,165</b>	<b>219,328</b>
<b>Age</b>				
0-64	93	1.9	1,925	21,462
65-74	73	1.6	2,636	28,435
75-84	39	1.0	6,228	64,568
85 and older	31	0.8	10,376	104,863
Unknown	0	0.0	0	0
<b>Gender</b>				
Female	40	1.0	15,954	165,449
Male	59	1.3	5,211	53,879
Unknown	0	0.0	0	0
<b>Race</b>				
White	41	1.1	16,308	167,161
African American	53	1.1	2,918	31,375
Other/unknown	57	1.2	1,939	20,792
<b>Basis of Eligibility<sup>c</sup></b>				
Aged	37	1.0	18,590	190,667
Disabled	98	1.9	2,575	28,661
Adults	0	0.0	0	0
Children	0	0.0	0	0
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 2006 file for New Jersey, released by CMS in 7/2009. This table was produced on 02/11/2010.

a. Table D.8 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their 2006 Medicaid enrollment. A total of 11,407 beneficiaries who were in nursing facilities for part of their enrollment and their 109,718 benefit months were excluded from the analysis. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

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

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

Dual Medicaid Beneficiaries

TABLE D.9  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,  
 BY BRAND STATUS AND THERAPEUTIC CATEGORY<sup>a, b, c, d, e</sup>  
 DUAL ELIGIBLE BENEFICIARIES, NEW JERSEY, 2006

Therapeutic Category	Number of Rx per Benefit Month Among Users			\$ per Benefit Month Among Users			\$ per Rx			Users							
	Total	Patented Brand-Name	Off-Patent Brand-Name Generic	Total	Patented Brand-Name	Off-Patent Brand-Name Generic	Total	Patented Brand-Name	Off-Patent Brand-Name Generic	Total Number of Rx	Total Rx \$	Number of Users	As a Percentage of Dual All-Year Nursing Facility Residents	Number of Benefit Months			
Anti-infective Agents	0.2	0.1	0.0	0.1	\$21	\$17	\$1	\$4	\$99	\$191	\$115	\$34	4,016	\$395,640	1,863	8.8	18,627
Biologicals	0.1	0.0	0.0	0.1	2	1	0	2	26	20	0	31	700	18,438	668	3.2	7,419
Antineoplastic Agents	0.2	0.0	0.0	0.2	39	13	0	27	157	642	0	116	1,355	213,231	581	2.7	5,434
Endocrine/Metabolic Drugs	0.3	0.1	0.0	0.2	15	11	1	3	43	89	60	14	10,173	441,961	2,780	13.1	29,120
Cardiovascular Agents	0.5	0.2	0.0	0.3	19	10	2	6	36	62	78	20	27,558	997,315	5,096	24.1	52,888
Respiratory Agents	0.3	0.1	0.0	0.2	12	8	1	4	42	77	51	20	9,981	415,663	3,117	14.7	33,280
Gastrointestinal Agents	0.3	0.2	0.0	0.1	24	18	1	5	78	108	176	37	12,338	963,528	3,876	18.3	40,285
Genitourinary Agents	0.3	0.1	0.0	0.1	13	8	2	4	53	73	81	29	3,755	197,258	1,386	6.5	14,885
CNS Drugs	0.8	0.1	0.0	0.6	27	16	2	9	34	114	80	14	67,241	2,261,406	7,954	37.6	84,540
Stimulants/Anti-obesity/Anorexia	0.4	0.3	0.0	0.1	45	44	0	1	128	151	14	11	302	38,763	81	0.4	859
Miscellaneous Psychological/Neurological Agents	0.3	0.3	0.0	0.0	39	39	0	0	136	136	46	132	5,204	708,072	1,723	8.1	17,982
Analgesics and Anesthetics	0.4	0.1	0.0	0.3	18	5	1	11	46	95	95	35	8,804	405,025	2,162	10.2	22,455
Neuromuscular Agents	0.7	0.1	0.0	0.6	24	10	0	14	35	120	51	23	19,814	688,179	2,601	12.3	28,273
Nutritional Products	0.5	0.0	0.1	0.3	5	1	2	3	11	27	11	9	22,394	252,867	4,432	20.9	46,878
Hematological Agents	0.7	0.1	0.0	0.6	24	20	0	4	36	200	18	7	31,973	1,162,644	4,568	21.6	48,223
Topical Products	0.3	0.1	0.0	0.1	17	11	2	3	57	96	59	24	9,685	556,736	3,155	14.9	33,025
Miscellaneous Products	0.2	0.1	0.0	0.1	32	29	0	2	170	356	161	22	302	51,393	162	0.8	1,610
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	5	0	0	0	21	0	0	0	228	4,684	96	0.5	1,002
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.	235,823	9,772,803	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2006 file for New Jersey, released by CMS in 7/2009. This table was produced on 02/11/2010.  
 a. Table D.9 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2006. A total of 11,407 beneficiaries who were in nursing facilities for part of their enrollment and their 109,718 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 2006. 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.medi-span.com/master-drug-database.aspx>.  
 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.medi-span.com/master-drug-database.aspx>.  
 In New Jersey, 1.2 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.  
 Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; CNS = Central Nervous System; MAX = Medicaid Analytic Extract; n.a. = not applicable; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.10  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS,  
 BY TOP-10 DRUG GROUP<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, NEW JERSEY, 2006

Top 10 Drug Groups in Nursing Facilities	Users				Among Users			
	Total Medicaid Rx \$	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	\$1,000,941	2,007	9.5	21,631	0.3	\$163	\$46	
HEMATOPOIETIC AGENTS	766,039	3,749	17.7	40,005	0.7	29	19	
ULCER DRUGS	714,936	3,147	14.9	32,708	0.2	91	22	
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	708,072	2,098	9.9	21,745	0.2	136	33	
ANTIDEPRESSANTS	555,111	3,296	15.6	34,308	0.3	62	16	
ANTICONVULSANT	544,234	2,398	11.3	26,263	0.7	31	21	
ANTIANKXIETY AGENTS	520,415	4,894	23.1	52,098	0.7	13	10	
DERMATOLOGICAL	422,517	3,085	14.6	31,999	0.2	64	13	
ANTIHYPERTENSIVE	289,796	1,267	6.0	13,291	0.3	86	22	
ANTIASTHMATIC	290,893	1,912	9.0	19,043	0.3	57	15	
Total	5,812,954	27,853	n.a.	293,091	n.a.	n.a.	n.a.	

Source: Data for this table are from the MAX 2006 file for New Jersey, released by CMS in 7/2009. This table was produced on 02/11/2010.

a. Table D.10 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2006. A total of 11,407 beneficiaries who were in nursing facilities for part of their enrollment and their 109,718 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 2006. 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 2006 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

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; n.a. = not applicable.

Dual Medicaid Beneficiaries

TABLE D.10A  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR TOP 10 DRUG GROUPS COMBINED AND FIRST  
 AND SECOND TOP DRUG GROUPS SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, NEW JERSEY, 2006

Beneficiary Characteristics	All Top 10 Drug Groups								ANTIPSYCHOTICS					HEMATOPOIETIC AGENTS				
	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 \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	
<b>All</b>	<b>126,345</b>	<b>\$5,812,954</b>	<b>2,007</b>	<b>9.5</b>	<b>21,631</b>	<b>0.3</b>	<b>\$46</b>	<b>3,749</b>	<b>17.7</b>	<b>40,005</b>	<b>0.7</b>	<b>\$19</b>						
<b>Female</b>																		
All Females	90,401	3,981,541	1,374	8.6	14,722	0.3	45	2,757	17.3	29,440	0.7	17						
<b>Female, Disabled</b>																		
All Ages	14,364	873,776	241	17.9	2,778	0.4	82	225	16.7	2,489	0.7	36						
64 or younger	9,670	518,463	142	16.7	1,634	0.3	67	124	14.6	1,366	0.7	30						
65-74	2,970	254,043	60	38.5	711	0.5	119	30	19.2	340	0.8	81						
75-84	1,167	68,487	30	14.5	349	0.3	84	42	20.3	480	0.6	14						
85 and older	557	32,783	9	6.8	84	0.2	38	29	22.0	303	0.7	53						
<b>Female, Other Eligibles</b>																		
All Ages	76,037	3,107,765	1,133	7.8	11,944	0.3	36	2,532	17.3	26,951	0.7	15						
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0						
65-74	12,098	515,292	180	13.3	2,019	0.3	50	262	19.4	2,854	0.7	20						
75-84	24,766	1,031,725	410	9.3	4,336	0.2	34	731	16.6	7,886	0.6	15						
85 and older	39,173	1,560,748	543	6.1	5,589	0.2	33	1,539	17.4	16,211	0.7	14						
<b>Male</b>																		
All Males	35,944	1,831,413	633	12.1	6,909	0.3	49	992	19.0	10,565	0.7	26						
<b>Male, Disabled</b>																		
All Ages	14,664	831,332	254	20.7	2,913	0.3	65	226	18.4	2,520	0.7	42						
64 or younger	12,600	653,315	208	19.4	2,361	0.3	56	191	17.8	2,165	0.7	36						
65-74	1,653	150,123	36	45.6	432	0.5	111	20	25.3	218	0.7	97						
75-84	346	20,003	8	14.0	96	0.4	83	7	12.3	74	0.5	10						
85 and older	65	7,891	2	9.5	24	0.1	15	8	38.1	63	0.6	94						
<b>Male, Other Eligibles</b>																		
All Ages	21,280	1,000,081	379	9.5	3,996	0.3	38	766	19.2	8,045	0.7	21						
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0						
65-74	7,452	367,377	132	12.6	1,462	0.3	53	189	18.1	2,000	0.7	26						
75-84	7,802	356,579	150	9.5	1,537	0.2	31	298	19.0	3,132	0.7	18						
85 and older	6,026	276,125	97	7.1	997	0.2	27	279	20.5	2,913	0.6	20						
<b>Unknown</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>						

Source: Data for this table are from the MAX 2006 file for New Jersey, released by CMS in 7/2009. This table was produced on 02/11/2010.  
 a. Table D.10A includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2006. A total of 11,407 beneficiaries who were in nursing facilities for part of their enrollment and their 109,718 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 2006. 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 2006 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.  
 Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.10B  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY  
 AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, NEW JERSEY, 2006

Beneficiary Characteristics	ULCER DRUGS					MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL					ANTIDEPRESSANTS							
	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 \$
		Residents	Benefit Months					Residents	Benefit Months					Residents	Benefit Months			
<b>All</b>	<b>3,147</b>	<b>14.9</b>	<b>32,708</b>	<b>0.2</b>	<b>\$22</b>	<b>2,098</b>	<b>9.9</b>	<b>21,745</b>	<b>0.2</b>	<b>\$33</b>	<b>3,296</b>	<b>15.6</b>	<b>34,308</b>	<b>0.3</b>	<b>\$16</b>			
<b>Female</b>																		
All Females	2,281	14.3	23,746	0.2	21	1,611	10.1	16,793	0.2	32	2,433	15.3	25,279	0.3	15			
<b>Female, Disabled</b>																		
All Ages	268	19.9	2,957	0.3	29	77	5.7	893	0.3	88	264	19.6	2,931	0.4	24			
64 or younger	162	19.1	1,818	0.3	28	42	4.9	498	0.3	126	171	20.1	1,875	0.4	24			
65-74	60	38.5	659	0.4	38	14	9.0	167	0.5	66	51	32.7	611	0.5	30			
75-84	30	14.5	333	0.3	28	13	6.3	145	0.2	21	27	13.0	310	0.2	14			
85 and older	16	12.1	147	0.2	13	8	6.1	83	0.1	17	15	11.4	135	0.2	17			
<b>Female, Other Eligibles</b>																		
All Ages	2,013	13.8	20,789	0.2	20	1,534	10.5	15,900	0.2	29	2,169	14.8	22,348	0.2	14			
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	225	16.6	2,379	0.3	24	110	8.1	1,149	0.3	50	258	19.1	2,776	0.3	17			
75-84	635	14.5	6,704	0.2	20	511	11.6	5,398	0.2	27	715	16.3	7,495	0.2	14			
85 and older	1,153	13.0	11,706	0.2	19	913	10.3	9,353	0.2	28	1,196	13.5	12,077	0.2	14			
<b>Male</b>																		
All Males	866	16.6	8,962	0.3	24	487	9.3	4,952	0.2	34	863	16.6	9,029	0.3	18			
<b>Male, Disabled</b>																		
All Ages	270	22.0	2,984	0.3	29	62	5.0	690	0.3	51	275	22.4	3,041	0.4	25			
64 or younger	232	21.6	2,579	0.3	27	50	4.7	563	0.3	54	245	22.8	2,707	0.3	23			
65-74	26	32.9	290	0.5	45	7	8.9	82	0.4	44	23	29.1	260	0.7	50			
75-84	10	17.5	106	0.2	24	2	3.5	24	0.2	25	6	10.5	69	0.3	21			
85 and older	2	9.5	9	0.7	68	3	14.3	21	0.2	25	1	4.8	5	0.2	2			
<b>Male, Other Eligibles</b>																		
All Ages	596	15.0	5,978	0.2	21	425	10.7	4,262	0.2	31	588	14.8	5,988	0.2	15			
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	158	15.1	1,582	0.3	22	77	7.4	783	0.3	42	150	14.3	1,615	0.3	16			
75-84	240	15.3	2,435	0.2	22	169	10.8	1,670	0.2	28	230	14.6	2,348	0.2	15			
85 and older	198	14.5	1,961	0.2	19	179	13.2	1,809	0.2	28	208	15.3	2,025	0.2	13			
<b>Unknown</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>			

Source: Data for this table are from the MAX 2006 file for New Jersey, released by CMS in 7/2009. This table was produced on 02/11/2010.  
 a. Table D.10B includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2006. A total of 11,407 beneficiaries who were in nursing facilities for part of their enrollment and their 109,718 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 2006. 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 2006 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.  
 Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.10C  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY  
 AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, NEW JERSEY, 2006

Beneficiary Characteristics	ANTICONVULSANT					ANTIANSXIETY AGENTS					DERMATOLOGICAL				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
<b>All</b>	<b>2,398</b>	<b>11.3</b>	<b>26,263</b>	<b>0.7</b>	<b>\$21</b>	<b>4,894</b>	<b>23.1</b>	<b>52,098</b>	<b>0.7</b>	<b>\$10</b>	<b>3,085</b>	<b>14.6</b>	<b>31,999</b>	<b>0.2</b>	<b>\$13</b>
<b>Female</b>															
All Females	1,575	9.9	17,144	0.7	18	3,676	23.0	39,025	0.8	9	2,168	13.6	22,258	0.2	14
<b>Female, Disabled</b>															
All Ages	377	28.0	4,289	0.8	29	402	29.9	4,458	0.9	16	302	22.5	3,368	0.2	14
64 or younger	281	33.1	3,164	0.8	30	280	32.9	3,102	1.0	17	176	20.7	1,958	0.2	10
65-74	64	41.0	750	0.8	33	50	32.1	586	0.9	14	80	51.3	932	0.3	28
75-84	24	11.6	279	0.5	15	42	20.3	479	0.7	11	31	15.0	344	0.2	6
85 and older	8	6.1	96	0.4	5	30	22.7	291	0.6	11	15	11.4	134	0.2	12
<b>Female, Other Eligibles</b>															
All Ages	1,198	8.2	12,855	0.6	15	3,274	22.4	34,567	0.7	9	1,866	12.8	18,890	0.2	14
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	269	19.9	2,972	0.7	20	382	28.2	4,197	1.0	14	241	17.8	2,541	0.2	12
75-84	428	9.7	4,701	0.6	15	1,065	24.2	11,226	0.7	9	613	14.0	6,206	0.2	13
85 and older	501	5.7	5,182	0.6	12	1,827	20.6	19,144	0.7	7	1,012	11.4	10,143	0.2	14
<b>Male</b>															
All Males	823	15.8	9,119	0.7	25	1,218	23.4	13,073	0.7	12	917	17.6	9,741	0.2	12
<b>Male, Disabled</b>															
All Ages	407	33.1	4,568	0.8	34	388	31.5	4,384	1.0	17	320	26.0	3,539	0.2	13
64 or younger	360	33.6	4,062	0.8	31	342	31.9	3,870	1.0	18	263	24.5	2,917	0.2	12
65-74	40	50.6	448	0.8	60	28	35.4	302	0.9	13	50	63.3	548	0.3	18
75-84	5	8.8	49	0.8	18	15	26.3	176	0.7	15	6	10.5	62	0.2	19
85 and older	2	9.5	9	0.2	14	3	14.3	36	0.2	2	1	4.8	12	0.1	5
<b>Male, Other Eligibles</b>															
All Ages	416	10.4	4,551	0.5	16	830	20.8	8,689	0.6	9	597	15.0	6,202	0.2	11
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	185	17.7	2,069	0.6	22	234	22.3	2,594	0.9	13	200	19.1	2,132	0.2	10
75-84	136	8.7	1,469	0.5	12	318	20.2	3,306	0.6	9	211	13.4	2,209	0.2	11
85 and older	95	7.0	1,013	0.4	11	278	20.4	2,789	0.4	5	186	13.7	1,861	0.2	13
<b>Unknown</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>

Source: Data for this table are from the MAX 2006 file for New Jersey, released by CMS in 7/2009. This table was produced on 02/11/2010.  
 a. Table D.10C includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2006. A total of 11,407 beneficiaries who were in nursing facilities for part of their enrollment and their 109,718 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 2006. 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 2006 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.  
 Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.10D  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR NINTH AND TENTH TOP DRUG GROUPS  
 SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, NEW JERSEY, 2006

Beneficiary Characteristics	ANTIHYPERTENSIVE					ANTIASTHMATIC						
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	All-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents
<b>All</b>	<b>1,267</b>	<b>6.0</b>	<b>13,291</b>	<b>0.3</b>	<b>\$22</b>	<b>1,912</b>	<b>9.0</b>	<b>19,043</b>	<b>0.3</b>	<b>\$15</b>	<b>21,165</b>	<b>219,328</b>
<b>Female</b>												
All Females	900	5.6	9,453	0.2	21	1,352	8.5	13,415	0.3	16	15,954	165,449
<b>Female, Disabled</b>												
All Ages	111	8.3	1,256	0.3	33	181	13.5	1,908	0.3	20	1,345	14,883
64 or younger	63	7.4	709	0.3	32	107	12.6	1,110	0.3	19	850	9,381
65-74	29	18.6	319	0.4	48	37	23.7	400	0.5	32	156	1,792
75-84	13	6.3	156	0.2	16	18	8.7	216	0.2	10	207	2,317
85 and older	6	4.5	72	0.1	10	19	14.4	182	0.2	12	132	1,393
<b>Female, Other Eligibles</b>												
All Ages	789	5.4	8,197	0.2	19	1,171	8.0	11,507	0.2	15	14,609	150,566
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	5
65-74	128	9.5	1,388	0.2	20	162	12.0	1,584	0.3	15	1,354	14,549
75-84	306	7.0	3,242	0.2	18	372	8.5	3,761	0.3	16	4,392	45,853
85 and older	355	4.0	3,567	0.2	19	637	7.2	6,162	0.2	14	8,862	90,159
<b>Male</b>												
All Males	367	7.0	3,838	0.3	25	560	10.7	5,628	0.3	15	5,211	53,879
<b>Male, Disabled</b>												
All Ages	101	8.2	1,130	0.4	31	154	12.5	1,657	0.3	17	1,230	13,778
64 or younger	89	8.3	994	0.3	28	130	12.1	1,416	0.3	15	1,073	12,070
65-74	9	11.4	100	0.6	56	15	19.0	153	0.6	35	79	883
75-84	2	3.5	24	0.4	26	8	14.0	76	0.4	19	57	621
85 and older	1	4.8	12	0.2	10	1	4.8	12	0.2	8	21	204
<b>Male, Other Eligibles</b>												
All Ages	266	6.7	2,708	0.3	22	406	10.2	3,971	0.3	14	3,981	40,101
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	6
65-74	90	8.6	976	0.3	26	115	11.0	1,150	0.3	16	1,047	11,211
75-84	120	7.6	1,275	0.2	20	140	8.9	1,381	0.3	15	1,572	15,777
85 and older	56	4.1	457	0.3	21	151	11.1	1,440	0.3	12	1,361	13,107
<b>Unknown</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0</b>

Source: Data for this table are from the MAX 2006 file for New Jersey, released by CMS in 7/2009. This table was produced on 02/11/2010.  
 a. Table D.10D includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2006. A total of 11,407 beneficiaries who were in nursing facilities for part of their enrollment and their 109,718 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 2006. 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 2006 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.  
 Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.11  
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D  
 AMONG DUALS, BY BENEFICIARY CHARACTERISTIC<sup>a,b</sup>  
 NEW JERSEY, 2006

Beneficiary Characteristics	Number of Beneficiaries with at Least One Part D Excluded Rx	Percentage of Beneficiaries with at Least One Part D Excluded Rx	Number of Part D Excluded Rx per Beneficiary	Total Number Part D Excluded Rx	Part D Excluded Rx \$ per Beneficiary	Total Part D Excluded Rx \$	\$ per Part D Excluded Rx	Part D Excluded Rx \$ as a Percentage of All Dual Rx \$	Total Number of Beneficiaries	
<b>All</b>	<b>68,961</b>	<b>48.5</b>	<b>3.5</b>	<b>503,320</b>	<b>\$82</b>	<b>\$11,642,512</b>	<b>\$23</b>	<b>11.3</b>	<b>142,203</b>	
<b>Age</b>										
5 and younger	4	66.7	8.8	53	628	3,765	71	41.0	6	
6-14	11	78.6	6.1	85	115	1,604	19	1.8	14	
15-20	62	34.4	1.5	269	48	8,641	32	1.9	180	
21-44	6,754	41.0	3.4	55,334	83	1,362,768	25	8.3	16,456	
45-64	15,198	54.6	4.9	137,590	116	3,241,408	24	10.7	27,859	
65-74	17,630	48.0	3.2	118,808	73	2,665,669	22	10.3	36,756	
75-84	17,712	49.9	3.3	117,612	75	2,663,246	23	13.7	35,511	
85 and older	11,590	45.6	2.9	73,569	67	1,695,411	23	16.9	25,421	
Unknown	0	0.0	0.0	0	0	0	0	0.0	0	
<b>Basis of Eligibility<sup>c</sup></b>										
Aged	36,874	45.8	2.9	234,586	63	5,054,757	22	12.5	80,562	
Disabled	31,962	52.3	4.4	268,333	108	6,579,534	25	10.6	61,084	
Adults	103	20.6	0.6	305	12	6,143	20	2.6	500	
Children	10	30.3	1.2	40	34	1,115	28	1.2	33	
Unknown	12	50.0	2.3	56	40	963	17	3.3	24	
<b>Gender</b>										
Female	47,452	50.8	3.6	340,956	83	7,723,128	23	11.8	93,461	
Male	21,509	44.1	3.3	162,364	80	3,919,384	24	10.6	48,742	
Unknown	0	0.0	0.0	0	0	0	0	0.0	0	
<b>Race</b>										
White	33,600	47.1	3.7	265,551	74	5,272,168	20	11.1	71,386	
African American	12,855	46.8	3.2	87,200	86	2,369,483	27	10.1	27,449	
Other/unknown	22,506	51.9	3.5	150,569	92	4,000,861	27	12.6	43,368	
<b>Use of Nursing Facilities<sup>d</sup></b>										
Entire year	9,602	45.4	4.1	87,203	51	1,075,636	12	11.0	21,165	
Part year	6,248	54.8	3.4	38,400	56	637,393	17	9.9	11,407	
None	53,111	48.4	3.4	377,717	91	9,929,483	26	11.5	109,631	
<b>Maintenance Assistance Status</b>										
Cash	34,747	50.7	3.6	246,784	97	6,669,735	27	11.9	68,531	
Medically needy	9	34.6	1.5	39	26	668	17	3.8	26	
Poverty related	16,550	47.8	3.2	110,771	83	2,879,932	26	10.3	34,654	
Other/unknown	17,655	45.3	3.7	145,726	54	2,092,177	14	11.1	38,992	

Source: Data for this table are from the MAX 2006 file for New Jersey, released by CMS in 7/2009. This table was produced on 02/11/2010.

a. Table D.11 includes the beneficiaries represented by Cell G of Table 1. Beneficiaries include all dual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2006.

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

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

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

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



TABLE D.12  
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D  
 AMONG DUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC<sup>a,b</sup>  
 NEW JERSEY, 2006

Beneficiary Characteristics	Number Rx per Benefit Month	Rx \$ per Benefit Month	\$ per Rx	Barbiturate \$ per Benefit Month	Benzodiazapine \$ per Benefit Month	Number of Benefit Months
<b>All</b>	<b>0.3</b>	<b>\$8</b>	<b>\$23</b>	<b>\$0</b>	<b>\$3</b>	<b>1,503,458</b>
<b>Age</b>						
5 and younger	1.0	74	71	0	1	51
6-14	0.7	14	19	0	3	117
15-20	0.1	5	32	0	2	1,852
21-44	0.3	8	25	0	4	172,335
45-64	0.5	11	24	0	5	302,245
65-74	0.3	7	22	0	2	390,606
75-84	0.3	7	23	0	2	382,354
85 and older	0.3	7	23	0	2	253,898
Unknown	0.0	0	0	0	0	0
<b>Basis of Eligibility<sup>c</sup></b>						
Aged	0.3	6	22	0	2	834,532
Disabled	0.4	10	25	0	4	666,648
Adults	0.2	4	20	0	2	1,730
Children	0.1	3	28	0	1	324
Unknown	0.3	4	17	0	3	224
<b>Gender</b>						
Female	0.3	8	23	0	3	991,710
Male	0.3	8	24	0	3	511,748
Unknown	0.0	0	0	0	0	0
<b>Race</b>						
White	0.4	7	20	0	4	745,820
African American	0.3	8	27	0	2	293,552
Other/unknown	0.3	9	27	0	2	464,086
<b>Use of Nursing Facilities<sup>d</sup></b>						
Entire year	0.4	5	12	0	3	219,328
Part year	0.4	6	17	0	3	109,718
None	0.3	8	26	0	3	1,174,412
<b>Maintenance Assistance Status</b>						
Cash	0.3	9	27	0	2	746,978
Medically needy	0.2	3	17	0	3	213
Poverty related	0.3	8	26	0	3	370,443
Other/unknown	0.4	5	14	0	3	385,824

Source: Data for this table are from the MAX 2006 file for New Jersey, released by CMS in 7/2009. This table was produced on 02/11/2010.

a. Table D.12 includes the beneficiaries represented by Cell G of Table 1. Beneficiaries include all dual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2006.

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

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

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

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

TABLE D.13  
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D FOR SELECTED DRUG CATEGORIES AMONG DUALS<sup>a,b,c</sup>  
 NEW JERSEY, 2006

Drug Category	Number of Users	Rx \$ per User	Total Rx \$	Rx \$ as a Percentage of All Part D		Total Number Rx.	\$ per Rx	Number Rx as a Percentage of All Part D	
				Excluded Rx \$				Excluded Rx	
<b>All</b>	<b>100,027</b>	<b>\$116</b>	<b>\$11,642,512</b>	<b>100.0</b>		<b>503,320</b>	<b>\$23</b>	<b>100.0</b>	
Anorexia or weight loss/gain	0	0	0	0.0		0	0	0.0	
Fertility drugs	0	0	0	0.0		0	0	0.0	
Drugs for cosmetic purposes	15	14	206	0.0		20	10	0.0	
Cough and cold medications	24,206	77	1,860,913	16.0		57,515	32	11.4	
Vitamins and minerals	31,474	71	2,237,007	19.2		149,647	15	29.7	
Non-prescription drugs	7,127	382	2,719,917	23.4		27,057	101	5.4	
Barbiturates	1,321	51	67,416	0.6		17,682	4	3.5	
Benzodiazepines	32,609	122	3,985,049	34.2		240,016	17	47.7	
Other Part D Excl Rx Drugs	3,275	236	772,004	6.6		11,383	68	2.3	

Source: Data for this table are from the MAX 2006 file for New Jersey, released by CMS in 7/2009. This table was produced on 02/11/2010.

a. Table D.13 includes the beneficiaries represented by Cell G of Table 1. Beneficiaries include all dual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2006.

A user is a beneficiary who had at least one prescription filled for a Part D excluded drug in 2006. A beneficiary who used drugs from two or more Part D excluded categories was counted as a user for each category. Therefore, the sum of users across drug categories may exceed the total number of individual users as noted on Table D11.

b. Includes OTC drugs as well as prescription drugs.

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

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

Dual Medicaid Beneficiaries

SUPPLEMENTAL TABLE 1  
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES<sup>a, b</sup>  
 NEW JERSEY, 2006

Total Number of Dual Eligible Beneficiaries: 142,203  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries: \$102,697,326  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary: \$722

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	31,683	22.3	\$0	0.0
1-500	60,543	42.6	11,117,328	10.8
501-1,000	21,701	15.3	15,576,991	15.2
1,001-1,500	10,698	7.5	13,073,414	12.7
1,501-2,000	5,793	4.1	10,005,587	9.7
2,001-2,500	3,268	2.3	7,276,508	7.1
2,501-3,000	2,145	1.5	5,870,808	5.7
3,001-3,500	1,356	1.0	4,388,727	4.3
3,501-4,000	990	0.7	3,692,727	3.6
4,001-4,500	732	0.5	3,108,632	3.0
4,501-5,000	560	0.4	2,654,538	2.6
5,001-5,500	436	0.3	2,276,745	2.2
5,501-6,000	331	0.2	1,903,914	1.9
6,001-6,500	280	0.2	1,746,201	1.7
6,501-7,000	220	0.2	1,485,060	1.4
7,001-7,500	193	0.1	1,399,642	1.4
7,501-8,000	146	0.1	1,130,615	1.1
8,001-8,500	117	0.1	963,881	0.9
8,501-9,000	103	0.1	903,718	0.9
9,001-9,500	98	0.1	907,479	0.9
9,501-10,000	90	0.1	877,994	0.9
10,001+	720	0.5	12,336,817	12.0

Source: Data for this table are from the MAX 2006 file for New Jersey, released by CMS in 7/2009. This table was produced on 02/11/2010.

a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2006.

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

Dual Medicaid Beneficiaries

SUPPLEMENTAL TABLE 1A  
 MEDICAID PHARMACY REIMBURSEMENT FOR DISABLED DUAL ELIGIBLE BENEFICIARIES UNDER AGE 65<sup>a, b, c</sup>  
 NEW JERSEY, 2006

Total Number of Disabled Dual Eligible Beneficiaries, Age < 65: 43,960  
 Total Pharmacy Reimbursement for Disabled Dual Eligible Beneficiaries, Age < 65: \$46,883,825  
 Mean Pharmacy Reimbursement per Disabled Dual Eligible Beneficiary, Age < 65: \$1,066

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Disabled Dual Beneficiaries,		Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
		Age < 65	Pharmacy Reimbursement		
\$0	9,550	21.7	\$0	0.0	
1-500	15,759	35.8	2,946,371	6.3	
501-1,000	6,434	14.6	4,659,795	9.9	
1,001-1,500	3,736	8.5	4,597,625	9.8	
1,501-2,000	2,322	5.3	4,026,705	8.6	
2,001-2,500	1,445	3.3	3,222,035	6.9	
2,501-3,000	1,063	2.4	2,916,701	6.2	
3,001-3,500	741	1.7	2,400,761	5.1	
3,501-4,000	530	1.2	1,984,014	4.2	
4,001-4,500	406	0.9	1,721,166	3.7	
4,501-5,000	313	0.7	1,485,053	3.2	
5,001-5,500	230	0.5	1,201,478	2.6	
5,501-6,000	177	0.4	1,017,757	2.2	
6,001-6,500	156	0.4	973,849	2.1	
6,501-7,000	138	0.3	931,318	2.0	
7,001-7,500	120	0.3	870,062	1.9	
7,501-8,000	95	0.2	735,199	1.6	
8,001-8,500	67	0.2	551,750	1.2	
8,501-9,000	61	0.1	535,632	1.1	
9,001-9,500	55	0.1	508,717	1.1	
9,501-10,000	50	0.1	488,416	1.0	
10,001+	512	1.2	9,109,421	19.4	

Source: Data for this table are from the MAX 2006 file for New Jersey, released by CMS in 7/2009. This table was produced on 02/11/2010.

a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2006.

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

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

Dual Medicaid Beneficiaries

SUPPLEMENTAL TABLE 1B  
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 AND OLDER<sup>a, b</sup>  
 NEW JERSEY, 2006

Total Number of Dual Eligible Beneficiaries, Age 65+: 97,688  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65+: \$55,436,606  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65+: \$567

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 65+	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	21,873	22.4	\$0	0.0
1-500	44,625	45.7	8,144,500	14.7
501-1,000	15,223	15.6	10,884,967	19.6
1,001-1,500	6,933	7.1	8,440,710	15.2
1,501-2,000	3,462	3.5	5,963,787	10.8
2,001-2,500	1,809	1.9	4,022,804	7.3
2,501-3,000	1,073	1.1	2,929,882	5.3
3,001-3,500	608	0.6	1,966,115	3.5
3,501-4,000	456	0.5	1,693,758	3.1
4,001-4,500	321	0.3	1,365,985	2.5
4,501-5,000	246	0.3	1,164,496	2.1
5,001-5,500	205	0.2	1,070,167	1.9
5,501-6,000	153	0.2	880,161	1.6
6,001-6,500	124	0.1	772,352	1.4
6,501-7,000	82	0.1	553,742	1.0
7,001-7,500	73	0.1	529,580	1.0
7,501-8,000	50	0.1	387,825	0.7
8,001-8,500	49	0.1	403,793	0.7
8,501-9,000	42	0.0	368,086	0.7
9,001-9,500	41	0.0	380,240	0.7
9,501-10,000	39	0.0	379,890	0.7
10,001+	201	0.2	3,133,766	5.7

Source: Data for this table are from the MAX 2006 file for New Jersey, released by CMS in 7/2009. This table was produced on 02/11/2010.

a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2006.

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

Dual Medicaid Beneficiaries

SUPPLEMENTAL TABLE 1C  
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 TO 74<sup>a, b</sup>  
 NEW JERSEY, 2006

Total Number of Dual Eligible Beneficiaries, Age 65-74: 36,756  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65-74: \$25,930,026  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65-74: \$705

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 65-74	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	7,874	21.4	\$0	0.0
1-500	15,435	42.0	3,061,762	11.8
501-1,000	6,146	16.7	4,397,076	17.0
1,001-1,500	2,936	8.0	3,578,560	13.8
1,501-2,000	1,514	4.1	2,609,025	10.1
2,001-2,500	830	2.3	1,850,411	7.1
2,501-3,000	510	1.4	1,395,185	5.4
3,001-3,500	316	0.9	1,025,685	4.0
3,501-4,000	229	0.6	850,808	3.3
4,001-4,500	176	0.5	748,818	2.9
4,501-5,000	143	0.4	677,638	2.6
5,001-5,500	114	0.3	595,249	2.3
5,501-6,000	89	0.2	513,189	2.0
6,001-6,500	80	0.2	498,526	1.9
6,501-7,000	47	0.1	318,054	1.2
7,001-7,500	39	0.1	283,876	1.1
7,501-8,000	25	0.1	194,035	0.7
8,001-8,500	36	0.1	296,472	1.1
8,501-9,000	24	0.1	210,434	0.8
9,001-9,500	25	0.1	231,730	0.9
9,501-10,000	20	0.1	194,417	0.7
10,001+	148	0.4	2,399,076	9.3

Source: Data for this table are from the MAX 2006 file for New Jersey, released by CMS in 7/2009. This table was produced on 02/11/2010.

a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2006.

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

Dual Medicaid Beneficiaries

SUPPLEMENTAL TABLE 1D  
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 75 TO 84<sup>a, b</sup>  
 NEW JERSEY, 2006

Total Number of Dual Eligible Beneficiaries, Age 75-84: 35,511  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 75-84: \$19,486,626  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 75-84: \$548

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 75-84	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	7,285	20.5	\$0	0.0
1-500	16,292	45.9	3,060,173	15.7
501-1,000	6,071	17.1	4,345,132	22.3
1,001-1,500	2,676	7.5	3,254,163	16.7
1,501-2,000	1,333	3.8	2,293,709	11.8
2,001-2,500	678	1.9	1,503,646	7.7
2,501-3,000	394	1.1	1,073,848	5.5
3,001-3,500	196	0.6	630,975	3.2
3,501-4,000	148	0.4	549,595	2.8
4,001-4,500	105	0.3	447,439	2.3
4,501-5,000	67	0.2	316,538	1.6
5,001-5,500	53	0.1	276,267	1.4
5,501-6,000	43	0.1	245,446	1.3
6,001-6,500	29	0.1	181,276	0.9
6,501-7,000	22	0.1	147,837	0.8
7,001-7,500	23	0.1	165,946	0.9
7,501-8,000	16	0.0	123,941	0.6
8,001-8,500	9	0.0	74,032	0.4
8,501-9,000	14	0.0	122,783	0.6
9,001-9,500	12	0.0	111,360	0.6
9,501-10,000	12	0.0	117,198	0.6
10,001+	33	0.1	445,322	2.3

Source: Data for this table are from the MAX 2006 file for New Jersey, released by CMS in 7/2009. This table was produced on 02/11/2010.

a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2006.

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

Dual Medicaid Beneficiaries

SUPPLEMENTAL TABLE 1E  
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 85 AND OLDER<sup>a, b</sup>  
 NEW JERSEY, 2006

Total Number of Dual Eligible Beneficiaries, Age 85+: 25,421  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 85+: \$10,019,954  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 85+: \$394

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 85+	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	6,714	26.4	\$0	0.0
1-500	12,898	50.7	2,022,565	20.2
501-1,000	3,006	11.8	2,142,759	21.4
1,001-1,500	1,321	5.2	1,607,987	16.0
1,501-2,000	615	2.4	1,061,053	10.6
2,001-2,500	301	1.2	668,747	6.7
2,501-3,000	169	0.7	460,849	4.6
3,001-3,500	96	0.4	309,455	3.1
3,501-4,000	79	0.3	293,355	2.9
4,001-4,500	40	0.2	169,728	1.7
4,501-5,000	36	0.1	170,320	1.7
5,001-5,500	38	0.1	198,651	2.0
5,501-6,000	21	0.1	121,526	1.2
6,001-6,500	15	0.1	92,550	0.9
6,501-7,000	13	0.1	87,851	0.9
7,001-7,500	11	0.0	79,758	0.8
7,501-8,000	9	0.0	69,849	0.7
8,001-8,500	4	0.0	33,289	0.3
8,501-9,000	4	0.0	34,869	0.3
9,001-9,500	4	0.0	37,150	0.4
9,501-10,000	7	0.0	68,275	0.7
10,001+	20	0.1	289,368	2.9

Source: Data for this table are from the MAX 2006 file for New Jersey, released by CMS in 7/2009. This table was produced on 02/11/2010.

a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2006.

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

Dual Medicaid Beneficiaries



APPENDIX TABLE A.3  
 CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY<sup>a, b</sup>  
 DUAL ELIGIBLE BENEFICIARIES, NEW JERSEY, 2006

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Blind/ Disabled	Adults	Children	Other/ Unknown	All	Aged	Blind/ Disabled	Adults	Children	Other/ Unknown
<b>All</b>	<b>155,918</b>	<b>84,240</b>	<b>70,376</b>	<b>1,240</b>	<b>38</b>	<b>24</b>	<b>1,676,715</b>	<b>880,144</b>	<b>784,689</b>	<b>11,262</b>	<b>396</b>	<b>224</b>
<b>Age</b>												
5 and younger	10	1	8	0	1	0	105	12	81	0	12	0
6-14	16	0	12	0	4	0	166	0	123	0	43	0
15-20	245	0	219	4	22	0	2,756	0	2,461	40	255	0
21-44	20,032	1	19,283	734	11	3	219,296	12	212,571	6,593	86	34
45-64	30,928	20	30,471	419	0	18	341,316	147	337,136	3,868	0	165
65-74	41,415	27,399	13,932	81	0	3	448,004	288,473	158,758	748	0	25
75-84	37,302	31,822	5,478	2	0	0	404,579	341,729	62,837	13	0	0
85 and older	25,970	24,997	973	0	0	0	260,493	249,771	10,722	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
<b>Gender</b>												
Female	102,588	60,809	40,956	781	18	24	1,107,389	639,099	460,741	7,136	189	224
Male	53,330	23,431	29,420	459	20	0	569,326	241,045	323,948	4,126	207	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
<b>Race</b>												
White	76,228	42,322	33,264	613	15	14	807,528	430,649	371,059	5,541	152	127
African American	30,954	12,449	18,068	418	14	5	338,416	133,464	200,986	3,763	150	53
Other/unknown	48,736	29,469	19,044	209	9	5	530,771	316,031	212,644	1,958	94	44
<b>Use of Nursing Facilities<sup>c</sup></b>												
Entire year	21,165	18,590	2,575	0	0	0	219,333	190,668	28,665	0	0	0
Part year	11,430	9,788	1,642	0	0	0	110,761	93,569	17,192	0	0	0
None	123,323	55,862	66,159	1,240	38	24	1,346,621	595,907	738,832	11,262	396	224
<b>Maintenance Assistance Status</b>												
Cash	79,147	32,619	46,045	479	4	0	878,640	358,092	516,101	4,422	25	0
Medically needy	26	11	15	0	0	0	224	110	114	0	0	0
Poverty related	36,933	20,228	16,576	102	3	24	400,760	216,941	182,919	645	31	224
Other/unknown	39,812	31,382	7,740	659	31	0	397,091	305,001	85,555	6,195	340	0
<b>Dual Status<sup>d</sup></b>												
Full dual, all year	154,942	83,522	70,127	1,231	38	24	1,666,622	872,673	782,158	11,171	396	224
Full dual, part year	976	718	249	9	0	0	10,093	7,471	2,531	91	0	0
<b>Managed Care (MC) Status</b>												
Fee-for-service (FFS) all year	139,663	79,929	59,559	122	29	24	1,493,251	831,816	660,256	639	316	224
FFS part year, with Rx claims	2,040	544	1,290	203	3	0	22,515	5,977	14,545	1,962	31	0
FFS part year, no Rx claims	500	89	235	175	1	0	5,004	821	2,530	1,646	7	0
MC all year, with Rx claims	11,276	3,175	7,945	155	1	0	130,689	36,380	92,730	1,567	12	0
MC all year, no Rx claims	2,439	503	1,347	585	4	0	25,256	5,150	14,628	5,448	30	0

Source: Data for this table are from the MAX 2006 file for New Jersey, released by CMS in 7/2009. This table was produced on 02/11/2010.

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

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

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

d. The "Full dual, all year" group contains beneficiaries who had Medicare as well as Medicaid pharmacy benefits during all months of Medicaid enrollment in 2006. The "Full dual, part year" group contains beneficiaries who had such benefits for some, but not all, months of their enrollment. Refer to footnote g of Table 1 for more information about how we determined dual eligibility status. Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; FFS = fee-for-service pharmacy benefit; MAX = Medicaid Analytic Extract; MC = managed care; Rx = pharmacy benefit.

APPENDIX TABLE A.4  
 MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS<sup>a</sup>  
 DUAL ELIGIBLE BENEFICIARIES, NEW JERSEY, 2006

Beneficiary Characteristics	Beneficiaries and		Benefit Months in Cell F of Table 1		Included in Cell G of Table 1		Excluded from Cell G of Table 1	
	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months
<b>All</b>	<b>155,918</b>	<b>1,676,715</b>	<b>142,203</b>	<b>1,503,458</b>	<b>0</b>	<b>173,257</b>		
Fee-for-service (FFS) all year	139,663	1,493,251	139,663	1,493,251	0	0		
FFS part year, with Rx claims	2,040	22,515	2,040	8,474	0	14,041		
FFS part year, with no Rx claims	500	5,004	500	1,733	0	3,271		
Managed care (MC) all year, with Rx claims	11,276	130,689	0	0	0	130,689		
MC all year, with no Rx claims	2,439	25,256	0	0	0	25,256		

Source: Data for this table are from the MAX 2006 file for New Jersey, released by CMS in 7/2009. This table was produced on 02/11/2010.

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

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

Dual Medicaid Beneficiaries