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

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TABLE ND.2
CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a, b}
NONDUAL BENEFICIARIES, NEW HAMPSHIRE, 2006

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown
All	115,128	915	8,650	18,938	86,625	0	1,059,051	8,489	87,509	144,750	818,303	0
Age												
5 and younger	30,067	0	43	0	30,024	0	272,642	0	466	0	272,176	0
6-14	37,744	0	73	0	37,671	0	376,272	0	860	0	375,412	0
15-20	19,297	0	526	0	18,771	0	175,504	0	5,495	0	170,009	0
21-44	21,144	0	3,736	17,250	158	0	171,093	0	38,555	131,844	694	0
45-64	5,936	0	4,247	1,688	1	0	54,865	0	41,947	12,906	12	0
65-74	434	410	24	0	0	0	4,599	4,425	174	0	0	0
75-84	308	307	1	0	0	0	2,867	2,855	12	0	0	0
85 and older	198	198	0	0	0	0	1,209	1,209	0	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	64,576	631	4,816	16,425	42,704	0	585,800	5,832	49,859	128,367	401,742	0
Male	50,552	284	3,834	2,513	43,921	0	473,251	2,657	37,650	16,383	416,561	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	103,423	633	8,220	17,084	77,486	0	951,957	5,551	83,239	131,130	732,037	0
African American	3,049	24	131	644	2,250	0	28,249	246	1,251	4,910	21,842	0
Other/unknown	8,656	258	299	1,210	6,889	0	78,845	2,692	3,019	8,710	64,424	0
Use of Nursing Facilities^c												
Entire year	177	89	83	0	5	0	1,875	947	868	0	60	0
Part year	243	51	175	10	7	0	2,364	503	1,699	78	84	0
None	114,708	775	8,392	18,928	86,613	0	1,054,812	7,039	84,942	144,672	818,159	0
Maintenance Assistance Status												
Cash	20,925	466	4,818	4,823	10,818	0	200,481	5,122	52,378	38,109	104,872	0
Medically needy	4,695	167	847	2,139	1,542	0	37,404	950	6,923	14,656	14,875	0
Poverty-related	65,564	11	3	4,041	61,509	0	590,921	73	11	23,670	567,167	0
Other/unknown	23,944	271	2,982	7,935	12,756	0	230,245	2,344	28,197	68,315	131,389	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	115,128	915	8,650	18,938	86,625	0	1,059,051	8,489	87,509	144,750	818,303	0
FFS part year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
FFS part year, no Rx claims	0	0	0	0	0	0	0	0	0	0	0	0

Source: Data for this table are from the MAX 2006 file for New Hampshire, released by CMS in 10/2009. This table was produced on 02/11/2010.

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

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

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

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

TABLE ND.3
ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC^{a, b}
NONDUAL BENEFICIARIES, NEW HAMPSHIRE, 2006

Beneficiary Characteristics	Percentage with at Least One Rx	Mean Number of Rx	Mean Rx \$	\$ per Rx	Mean \$, All Medicaid FFS \$ ^c	Rx \$ as a Percentage of All Medicaid FFS \$ ^d	Number of Beneficiaries
All	63.2	10.7	\$726	\$68	\$4,095	17.7	115,128
Age							
5 and younger	60.5	4.0	167	42	2,030	8.2	30,067
6-14	58.3	6.3	471	75	2,893	16.3	37,744
15-20	62.4	8.4	597	71	4,360	13.7	19,297
21-44	72.2	17.6	1,141	65	6,114	18.7	21,144
45-64	78.0	50.3	3,814	76	12,812	29.8	5,936
65-74	84.6	52.2	3,479	67	13,879	25.1	434
75-84	69.2	42.2	2,512	60	11,251	22.3	308
85 and older	38.9	18.7	846	45	11,221	7.5	198
Unknown	0.0	0.0	0	0	0	0.0	0
Basis of Eligibility^e							
Aged	69.8	41.9	2,624	63	12,574	20.9	915
Disabled	79.9	49.1	4,062	83	18,651	21.8	8,650
Adults	70.8	14.1	707	50	3,123	22.6	18,938
Children	59.9	5.8	377	65	2,764	13.6	86,625
Unknown	0.0	0.0	0	0	0	0.0	0
Gender							
Female	65.3	12.0	745	62	3,840	19.4	64,576
Male	60.6	9.0	701	78	4,421	15.9	50,552
Unknown	0.0	0.0	0	0	0	0.0	0
Race							
White	64.0	11.1	756	68	4,291	17.6	103,423
African American	57.3	6.6	498	75	2,531	19.7	3,049
Other/unknown	56.3	6.6	438	67	2,301	19.0	8,656
Use of Nursing Facilities^f							
Entire year	88.1	101.3	6,765	67	66,603	10.2	177
Part year	91.8	85.3	5,621	66	50,995	11.0	243
None	63.1	10.4	706	68	3,899	18.1	114,708
Maintenance Assistance Status							
Cash	71.8	20.4	1,448	71	6,834	21.2	20,925
Medically needy	66.0	17.7	1,339	76	6,616	20.2	4,695
Poverty related	57.3	4.7	280	60	1,903	14.7	65,564
Other/unknown	71.5	17.3	1,195	69	7,208	16.6	23,944

Source: Data for this table are from the MAX 2006 file for New Hampshire, released by CMS in 10/2009. This table was produced on 02/11/2010.

a. Table ND.3 includes beneficiaries represented by Cell K of Table 1.

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

c. In 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.

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

TABLE ND.4
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a, b}
 NONDUAL BENEFICIARIES, NEW HAMPSHIRE, 2006

Beneficiary Characteristics	Mean Number of Rx	Mean Rx \$	Rx \$ as a Percentage of All Medicaid FFS \$ ^c	Number of Rx, Percentage with:						Mean \$, All Medicaid FFS \$ ^d	Number	
				None	More than 0, but 1 or Less	More than 1, but 2 or Less	More than 2, but 5 or Less	More than 5, but 10 or Less	More than 10		Beneficiaries	Benefit Months
All	1.2	\$79	17.7	36.8	44.5	7.1	7.3	3.1	1.3	\$445	115,128	1,059,051
Age												
5 and younger	0.4	18	8.2	39.5	54.0	4.0	2.2	0.3	0.0	224	30,067	272,642
6-14	0.6	47	16.3	41.7	46.4	5.7	5.1	1.0	0.2	290	37,744	376,272
15-20	0.9	66	13.7	37.6	44.7	8.5	7.2	1.7	0.3	479	19,297	175,504
21-44	2.2	141	18.7	27.8	36.9	11.8	14.6	6.8	2.1	756	21,144	171,093
45-64	5.4	413	29.8	22.0	15.5	9.3	20.4	19.3	13.5	1,386	5,936	54,865
65-74	4.9	328	25.1	15.4	17.1	12.4	23.3	20.7	11.1	1,310	434	4,599
75-84	4.5	270	22.3	30.8	11.4	8.4	24.4	16.9	8.1	1,209	308	2,867
85 and older	3.1	139	7.5	61.1	14.6	3.0	9.6	8.6	3.0	1,838	198	1,209
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Basis of Eligibility^e												
Aged	4.5	283	20.9	30.2	14.9	9.2	20.8	16.8	8.2	1,355	915	8,489
Disabled	4.9	402	21.8	20.1	17.2	10.6	22.0	18.4	11.7	1,844	8,650	87,509
Adults	1.8	92	22.6	29.2	38.7	11.6	13.4	5.6	1.4	409	18,938	144,750
Children	0.6	40	13.6	40.1	48.8	5.7	4.4	0.8	0.1	293	86,625	818,303
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Gender												
Female	1.3	82	19.4	34.7	44.5	7.6	7.9	3.7	1.7	423	64,576	585,800
Male	1.0	75	15.9	39.4	44.5	6.4	6.6	2.3	0.8	472	50,552	473,251
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	1.2	82	17.6	36.0	44.5	7.3	7.7	3.2	1.4	466	103,423	951,957
African American	0.7	54	19.7	42.7	45.3	5.3	4.5	1.8	0.5	273	3,049	28,249
Other/unknown	0.7	48	19.0	43.8	44.4	5.1	4.4	1.8	0.5	253	8,656	78,845
Use of Nursing Facilities^f												
Entire year	9.6	639	10.2	11.9	9.0	2.3	13.6	24.9	38.4	6,287	177	1,875
Part year	8.8	578	11.0	8.2	9.5	4.5	21.4	26.7	29.6	5,242	243	2,364
None	1.1	77	18.1	36.9	44.6	7.1	7.3	3.0	1.2	424	114,708	1,054,812
Maintenance Assistance Status												
Cash	2.1	151	21.2	28.2	39.9	9.3	12.1	6.9	3.7	713	20,925	200,481
Medically needy	2.2	168	20.2	34.0	33.0	9.2	13.3	7.5	3.1	830	4,695	37,404
Poverty related	0.5	31	14.7	42.7	48.0	5.2	3.5	0.5	0.1	211	65,564	590,921
Other/unknown	1.8	124	16.6	28.5	41.3	9.7	12.6	5.8	2.1	750	23,944	230,245

Source: Data for this table are from the MAX 2006 file for New Hampshire, released by CMS in 10/2009. This table was produced on 02/11/2010.

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

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

c. In 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 ND.5
 AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC^{a, b, c}
 NONDUAL BENEFICIARIES, NEW HAMPSHIRE, 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
All	1.2	\$79	\$68	0.4	\$58	\$151	0.0	\$6	\$131	0.7	\$15	\$21
Age												
5 and younger	0.4	18	42	0.1	12	128	0.0	1	43	0.3	5	16
6-14	0.6	47	75	0.3	39	134	0.0	1	62	0.3	7	22
15-20	0.9	66	71	0.4	51	141	0.0	3	95	0.5	12	22
21-44	2.2	141	65	0.6	98	171	0.1	12	151	1.5	31	20
45-64	5.4	413	76	1.7	281	169	0.3	55	180	3.5	77	22
65-74	4.9	328	67	1.8	243	136	0.3	34	135	2.9	51	18
75-84	4.5	270	60	1.7	193	114	0.3	32	121	2.6	45	17
85 and older	3.1	139	45	1.1	92	83	0.1	20	146	1.8	27	15
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility^d												
Aged	4.5	283	63	1.6	206	125	0.2	32	131	2.6	46	17
Disabled	4.9	402	83	1.6	288	183	0.2	42	168	3.0	71	24
Adults	1.8	92	50	0.4	58	140	0.1	10	154	1.4	24	18
Children	0.6	40	65	0.2	31	134	0.0	1	65	0.4	7	20
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Gender												
Female	1.3	82	62	0.4	58	147	0.1	7	134	0.9	17	20
Male	1.0	75	78	0.4	58	157	0.0	5	124	0.6	12	22
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Race												
White	1.2	82	68	0.4	60	150	0.0	7	132	0.8	16	21
African American	0.7	54	75	0.2	44	179	0.0	2	100	0.4	8	18
Other/unknown	0.7	48	67	0.2	37	162	0.0	3	107	0.5	9	18
Use of Nursing Facilities^e												
Entire year	9.6	639	67	3.4	496	144	0.4	42	96	5.7	101	18
Part year	8.8	578	66	2.6	392	149	0.4	72	160	5.7	115	20
None	1.1	77	68	0.4	56	152	0.0	6	131	0.7	15	21
Maintenance Assistance Status												
Cash	2.1	151	71	0.6	107	165	0.1	15	155	1.4	29	21
Medically needy	2.2	168	76	0.7	118	174	0.1	19	171	1.4	31	22
Poverty related	0.5	31	60	0.2	24	129	0.0	1	68	0.3	6	19
Other/unknown	1.8	124	69	0.6	92	152	0.1	9	129	1.1	23	21

Source: Data for this table are from the MAX 2006 file for New Hampshire, released by CMS in 10/2009. This table was produced on 02/11/2010.

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

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

c. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In New Hampshire, 0.2 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>.

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

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

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

TABLE ND.6
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d}
 NONDUAL BENEFICIARIES, NEW HAMPSHIRE, 2006

Therapeutic Category	Number of Rx per Benefit Month												Users ^e				
	Among Users				\$ per Benefit Month Among Users				\$ per Rx				Number of Users	As a Percentage of All 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	0.3	0.0	0.0	0.3	\$13	\$6	\$1	\$6	\$43	\$259	\$58	\$22	142,221	\$6,094,422	44,522	38.7	473,794
Biologicals	0.4	0.4	0.0	0.0	407	402	5	0	1044	1,066	1,107	30	915	955,087	234	0.2	2,347
Antineoplastic Agents	0.8	0.3	0.0	0.5	238	209	3	26	315	813	984	53	2,846	896,291	355	0.3	3,766
Endocrine/Metabolic Drugs	0.6	0.2	0.0	0.4	40	29	1	9	65	141	47	24	105,981	6,871,459	16,594	14.4	172,805
Cardiovascular Agents	1.3	0.3	0.1	0.9	52	28	14	10	41	90	138	12	116,376	4,797,400	8,517	7.4	91,643
Respiratory Agents	0.6	0.3	0.0	0.3	38	33	0	5	67	104	58	20	123,139	8,192,448	20,092	17.5	216,254
Gastrointestinal Agents	0.6	0.3	0.0	0.3	51	42	3	5	85	158	180	17	57,770	4,882,335	9,008	7.8	95,843
Genitourinary Agents	0.3	0.1	0.0	0.2	18	11	2	4	51	93	69	22	13,694	693,776	3,778	3.3	39,410
CNS Drugs	1.3	0.5	0.1	0.7	118	94	5	19	92	192	103	26	224,820	20,723,994	16,860	14.6	175,887
Stimulants/Anti-obesity/Anorexia	1.0	0.8	0.0	0.2	95	88	0	7	98	114	81	34	71,660	6,989,370	6,777	5.9	73,226
Miscellaneous Psychological/Neurological Agents	0.4	0.2	0.0	0.1	107	101	0	6	300	427	0	53	3,495	1,048,822	899	0.8	9,778
Analgesics and Anesthetics	0.7	0.1	0.0	0.6	33	12	12	9	47	165	260	15	156,125	7,276,539	21,718	18.9	223,612
Neuromuscular Agents	1.0	0.4	0.0	0.6	80	61	4	16	83	164	111	28	94,930	7,866,123	9,234	8.0	98,108
Nutritional Products	0.3	0.0	0.0	0.2	4	2	0	2	14	86	10	9	28,114	398,804	9,888	8.6	104,935
Hematological Agents	0.8	0.2	0.0	0.5	130	114	1	15	166	489	53	29	11,308	1,872,399	1,365	1.2	14,402
Topical Products	0.3	0.1	0.0	0.2	12	8	0	3	45	107	52	19	70,378	3,183,211	24,856	21.6	267,010
Miscellaneous Products	0.3	0.2	0.0	0.1	34	25	2	7	130	147	212	82	6,077	788,507	2,108	1.8	23,227
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	7	0	0	0	32	0	0	0	283	9,187	119	0.1	1,300
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.	1,230,132	83,540,174	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2006 file for New Hampshire, released by CMS in 10/2009. This table was produced on 02/11/2010.

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

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

c. For information about these therapeutic categories, see Wolters Kluwer Health, <http://www.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 Hampshire, 0.2 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.

Benef(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 ND.7
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP^{a, b, c}
 NONDUAL BENEFICIARIES, NEW HAMPSHIRE, 2006

Top 10 Drug Groups	Users			Among Users				
	Total Medicaid Rx \$	Number of Users	As a Percentage of All Beneficiaries	Number of Benefit Months	Number of Rx per Benefit Month	\$ per Rx	Rx \$ per Benefit Month	
ANTIPSYCHOTICS	\$13,821,401	6,853	6.0	75,744	0.9	\$212	\$182	
ANTICONVULSANT	7,102,821	7,403	6.4	80,311	0.9	101	88	
STIMULANTS/ANTI-OBESITY/ANOREXIANTS	6,989,370	7,816	6.8	85,077	0.8	98	82	
ANTIASTHMATIC	6,168,652	22,000	19.1	238,598	0.4	71	26	
ANTIDEPRESSANTS	5,767,881	16,448	14.3	173,429	0.6	52	33	
ANALGESICS - Narcotic	4,816,961	26,029	22.6	270,972	0.4	43	18	
ULCER DRUGS	3,493,175	7,636	6.6	81,487	0.5	86	43	
MISC. ENDOCRINE	2,838,009	1,109	1.0	12,621	0.7	332	225	
ANTIHYPERLIPIDEMIC	2,604,435	2,885	2.5	31,941	0.8	103	82	
ANTIDIABETIC	2,364,896	3,326	2.9	35,570	0.9	78	66	
Total	55,967,601	101,505	n.a.	1,085,750	n.a.	n.a.	n.a.	

Source: Data for this table are from the MAX 2006 file for New Hampshire, released by CMS in 10/2009. This table was produced on 02/11/2010.

a. Table ND.7 includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 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.

Nondual Medicaid Beneficiaries

TABLE ND.7A
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS COMBINED
 AND FIRST AND SECOND GROUPS SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, NEW HAMPSHIRE, 2006

Beneficiary Characteristics	All Top 10 Drug Groups				ANTIPSYCHOTICS				ANTICONVULSANT			
	Number of Rx	Rx \$	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	622,316	\$55,967,601	6,853	6.0	75,744	0.9	\$183	7,403	6.4	80,311	0.9	\$88
Female												
All Females	377,300	30,420,636	3,632	5.6	39,759	0.8	152	4,909	7.6	52,891	0.8	80
Female, Disabled												
All Ages	157,371	14,760,304	1,675	34.8	18,981	0.9	206	2,067	42.9	23,472	1.0	92
5 and younger	223	23,094	0	0.0	0	0.0	0	14	73.7	140	1.0	144
6-14	784	120,318	1	2.9	12	0.3	19	27	79.4	324	1.2	107
15-20	3,396	395,820	56	26.5	653	1.0	191	81	38.4	962	1.1	157
21-44	52,929	5,068,627	794	40.3	8,970	0.8	188	955	48.5	10,946	0.9	102
45-64	99,577	9,122,480	824	32.1	9,346	1.0	224	988	38.5	11,080	1.0	76
65-74	462	29,965	0	0.0	0	0.0	0	2	11.8	20	0.4	12
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles												
All Ages	219,929	15,660,332	1,957	3.3	20,778	0.6	103	2,842	4.8	29,419	0.7	71
5 and younger	10,177	735,694	9	0.1	93	0.5	139	94	0.6	1,050	0.8	105
6-14	41,139	4,345,231	357	2.0	3,972	0.9	155	400	2.2	4,476	0.9	127
15-20	34,242	2,735,609	497	5.0	5,312	0.7	123	454	4.6	4,971	0.7	99
21-44	104,425	5,547,392	895	5.8	9,200	0.4	60	1,622	10.5	16,124	0.6	48
45-64	17,073	1,225,132	97	8.1	1,015	0.5	99	204	17.1	2,003	0.8	50
65-74	7,706	669,014	62	22.5	728	1.0	195	46	16.7	542	0.9	47
75-84	4,005	327,308	23	11.0	272	1.1	189	18	8.6	212	1.1	75
85 and older	1,162	74,952	17	11.7	186	1.0	95	4	2.8	41	0.8	18
Male												
All Males	245,016	25,546,965	3,221	6.4	35,985	1.0	216	2,494	4.9	27,420	1.0	104
Male, Disabled												
All Ages	82,652	9,439,874	1,149	30.0	12,921	1.0	275	1,178	30.7	13,334	1.1	108
5 and younger	792	58,569	1	4.2	12	0.8	73	19	79.2	228	1.4	92
6-14	749	100,385	1	2.6	12	1.0	20	27	69.2	314	1.3	202
15-20	5,385	583,598	101	32.1	1,184	0.9	179	106	33.7	1,236	1.4	169
21-44	33,602	4,234,286	657	37.2	7,392	1.0	279	599	33.9	6,812	1.1	115
45-64	42,053	4,457,877	389	23.1	4,321	1.0	296	427	25.4	4,744	1.0	77
65-74	71	5,159	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Nondual Medicaid Beneficiaries

TABLE ND.7A
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS COMBINED
 AND FIRST AND SECOND GROUPS SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, NEW HAMPSHIRE, 2006

Beneficiary Characteristics	All Top 10 Drug Groups			ANTIPSYCHOTICS					ANTICONVULSANT				
	Number of Rx	Rx \$	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	
Male, Other Eligibles													
All Ages	162,364	16,107,091	2,072	4.4	23,064	1.0	183	1,316	2.8	14,086	0.9	101	
5 and younger	16,230	1,240,793	48	0.3	530	0.6	100	119	0.8	1,324	0.7	84	
6-14	89,214	9,182,856	1,219	6.2	13,817	1.0	183	576	2.9	6,494	0.9	111	
15-20	37,170	4,249,849	667	7.5	7,403	0.9	197	360	4.1	3,940	1.0	123	
21-44	11,098	755,170	87	4.3	773	0.5	128	187	9.2	1,636	0.6	45	
45-64	4,947	335,419	16	3.2	134	0.6	51	55	11.1	478	0.7	31	
65-74	2,111	208,317	25	18.7	299	1.0	211	14	10.4	168	0.6	84	
75-84	1,198	104,986	5	5.2	51	0.9	87	4	4.1	34	1.2	57	
85 and older	396	29,701	5	9.4	57	1.0	97	1	1.9	12	1.2	19	
Unknown	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	

Source: Data for this table are from the MAX 2006 file for New Hampshire, released by CMS in 10/2009. This table was produced on 02/11/2010.

a. Table ND.7A includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 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>.

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

Nondual Medicaid Beneficiaries

TABLE ND.7B
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY,
 BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, NEW HAMPSHIRE, 2006

Beneficiary Characteristics	STIMULANTS/ANTI-OBESITY/ANOREXIANTS					ANTIASTHMATIC					ANTIDEPRESSANTS				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	7,816	6.8	85,077	0.8	\$82	22,000	19.1	238,598	0.4	\$26	16,448	14.3	173,429	0.6	\$33
Female															
All Females	2,574	4.0	27,961	0.8	78	11,997	18.6	129,217	0.4	27	12,304	19.1	128,956	0.6	33
Female, Disabled															
All Ages	201	4.2	2,296	0.8	94	2,411	50.1	27,670	0.5	45	3,762	78.1	42,489	0.8	45
5 and younger	0	0.0	0	0.0	0	3	15.8	26	0.2	13	1	5.3	12	2.4	44
6-14	2	5.9	24	0.1	10	15	44.1	180	0.6	29	5	14.7	60	0.5	36
15-20	21	10.0	252	0.6	50	40	19.0	470	0.4	33	88	41.7	1,025	0.7	41
21-44	99	5.0	1,109	0.7	83	766	38.9	8,842	0.4	30	1,531	77.7	17,315	0.7	41
45-64	79	3.1	911	0.9	121	1,576	61.4	18,046	0.6	53	2,131	83.1	24,022	0.8	48
65-74	0	0.0	0	0.0	0	11	64.7	106	0.6	52	6	35.3	55	0.9	32
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	2,373	4.0	25,665	0.8	77	9,586	16.0	101,547	0.3	22	8,542	14.3	86,467	0.5	28
5 and younger	32	0.2	352	0.6	43	1,891	12.9	20,496	0.3	18	12	0.1	139	0.4	17
6-14	1,392	7.7	15,394	0.8	79	2,828	15.7	31,077	0.3	20	753	4.2	8,365	0.6	22
15-20	517	5.2	5,517	0.7	72	1,693	17.1	17,791	0.3	21	1,594	16.1	16,607	0.5	25
21-44	373	2.4	3,794	0.7	74	2,649	17.2	26,566	0.3	21	5,360	34.9	52,998	0.5	28
45-64	57	4.8	584	0.8	97	364	30.5	3,710	0.4	32	649	54.4	6,331	0.7	37
65-74	2	0.7	24	0.8	33	108	39.1	1,292	0.7	59	103	37.3	1,210	0.9	45
75-84	0	0.0	0	0.0	0	47	22.4	554	0.8	70	49	23.3	584	1.0	46
85 and older	0	0.0	0	0.0	0	6	4.1	61	1.5	242	22	15.2	233	1.2	36
Male															
All Males	5,242	10.4	57,116	0.9	84	10,003	19.8	109,381	0.4	25	4,144	8.2	44,473	0.7	33
Male, Disabled															
All Ages	169	4.4	1,921	0.8	71	1,007	26.3	11,435	0.6	47	1,599	41.7	17,753	0.7	38
5 and younger	0	0.0	0	0.0	0	24	100.0	288	0.4	12	2	8.3	24	0.7	10
6-14	2	5.1	24	0.7	56	17	43.6	185	0.6	59	3	7.7	31	0.9	39
15-20	61	19.4	690	0.9	70	56	17.8	649	0.5	32	90	28.6	1,061	0.7	29
21-44	75	4.2	859	0.8	83	352	19.9	4,094	0.5	33	772	43.7	8,581	0.7	39
45-64	31	1.8	348	0.5	45	553	32.9	6,167	0.6	58	731	43.5	8,054	0.8	37
65-74	0	0.0	0	0.0	0	5	71.4	52	1.1	77	1	14.3	2	1.0	11
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Nondual Medicaid Beneficiaries

TABLE ND.7B
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY,
 BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, NEW HAMPSHIRE, 2006

Beneficiary Characteristics	STIMULANTS/ANTI-OBESITY/ANOREXIANTS					ANTIASTHMATIC					ANTIDEPRESSANTS				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
Male, Other Eligibles															
All Ages	5,073	10.9	55,195	0.9	85	8,996	19.3	97,946	0.3	23	2,545	5.4	26,720	0.7	30
5 and younger	148	1.0	1,668	0.7	48	3,202	20.8	34,668	0.3	20	31	0.2	341	0.5	9
6-14	3,740	19.1	41,112	0.9	86	4,212	21.5	46,704	0.3	22	1,098	5.6	12,251	0.8	28
15-20	1,143	12.9	12,042	0.8	86	1,272	14.4	13,650	0.4	24	837	9.4	8,846	0.7	36
21-44	35	1.7	304	0.5	45	176	8.7	1,542	0.4	37	404	19.9	3,593	0.5	21
45-64	6	1.2	57	1.1	139	75	15.1	720	0.7	64	134	27.0	1,219	0.6	30
65-74	1	0.7	12	0.5	95	34	25.4	374	0.7	70	26	19.4	294	0.8	49
75-84	0	0.0	0	0.0	0	21	21.6	243	1.0	105	11	11.3	128	0.9	42
85 and older	0	0.0	0	0.0	0	4	7.5	45	0.3	21	4	7.5	48	1.1	44
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2006 file for New Hampshire, released by CMS in 10/2009. This table was produced on 02/11/2010.

a. Table ND.7B includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 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>.

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

Nondual Medicaid Beneficiaries

TABLE ND.7C
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY,
 BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, NEW HAMPSHIRE, 2006

Beneficiary Characteristics	ANALGESICS - Narcotic					ULCER DRUGS					MISC. ENDOCRINE				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	26,029	22.6	270,972	0.4	\$18	7,636	6.6	81,487	0.5	\$43	1,109	1.0	12,621	0.7	\$225
Female															
All Females	19,258	29.8	199,678	0.4	16	5,176	8.0	55,557	0.5	41	634	1.0	7,205	0.7	198
Female, Disabled															
All Ages	3,823	79.4	43,252	0.7	40	1,821	37.8	20,719	0.6	55	256	5.3	2,918	0.8	99
5 and younger	2	10.5	17	0.3	3	8	42.1	74	0.4	23	1	5.3	12	1.4	31
6-14	3	8.8	36	0.1	1	16	47.1	192	0.7	50	7	20.6	84	1.1	812
15-20	72	34.1	841	0.3	2	35	16.6	420	0.6	56	10	4.7	120	1.0	169
21-44	1,688	85.7	19,234	0.6	24	613	31.1	7,027	0.5	45	51	2.6	571	0.7	110
45-64	2,050	79.9	23,049	0.8	55	1,144	44.6	12,953	0.7	61	183	7.1	2,090	0.8	65
65-74	8	47.1	75	0.5	17	5	29.4	53	0.5	10	4	23.5	41	0.7	52
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	15,435	25.8	156,426	0.3	9	3,355	5.6	34,838	0.4	32	378	0.6	4,287	0.6	265
5 and younger	442	3.0	5,008	0.1	1	490	3.4	4,790	0.5	33	15	0.1	160	0.8	243
6-14	1,072	5.9	12,082	0.1	1	410	2.3	4,692	0.4	33	161	0.9	1,827	0.6	462
15-20	2,830	28.6	29,318	0.2	2	487	4.9	5,225	0.3	22	33	0.3	378	0.7	384
21-44	10,180	66.2	100,509	0.4	11	1,503	9.8	15,095	0.4	29	20	0.1	208	0.4	34
45-64	727	60.9	7,369	0.6	35	264	22.1	2,702	0.5	46	25	2.1	257	0.6	49
65-74	109	39.5	1,276	0.5	14	114	41.3	1,335	0.7	56	68	24.6	806	0.7	55
75-84	61	29.0	714	0.4	10	72	34.3	837	0.6	49	45	21.4	525	0.8	71
85 and older	14	9.7	150	0.7	39	15	10.3	162	0.8	38	11	7.6	126	0.7	60
Male															
All Males	6,771	13.4	71,294	0.4	23	2,460	4.9	25,930	0.5	48	475	0.9	5,416	0.7	261
Male, Disabled															
All Ages	1,863	48.6	20,410	0.8	62	839	21.9	9,482	0.7	65	89	2.3	1,047	0.9	161
5 and younger	6	25.0	70	0.3	2	29	120.8	348	0.9	76	2	8.3	24	0.8	259
6-14	2	5.1	24	0.1	1	12	30.8	144	1.0	147	3	7.7	36	1.1	60
15-20	72	22.9	840	0.3	3	49	15.6	576	0.7	62	10	3.2	120	1.1	174
21-44	776	43.9	8,553	0.6	35	300	17.0	3,424	0.6	57	43	2.4	505	0.8	219
45-64	1,006	59.8	10,911	0.9	87	449	26.7	4,990	0.7	68	31	1.8	362	0.8	79
65-74	1	14.3	12	0.1	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Nondual Medicaid Beneficiaries

TABLE ND.7C
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY,
 BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, NEW HAMPSHIRE, 2006

Beneficiary Characteristics	ANALGESICS - Narcotic						ULCER DRUGS					MISC. ENDOCRINE				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean		Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean		Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean		
				Rx per Month	Mean Rx \$ per Benefit				Rx per Month	Mean Rx \$ per Benefit				Rx per Month	Mean Rx \$ per Benefit	
Male, Other Eligibles																
All Ages	4,908	10.5	50,884	0.3	8	1,621	3.5	16,448	0.4	38	386	0.8	4,369	0.6	285	
5 and younger	645	4.2	7,196	0.1	1	685	4.4	6,585	0.4	32	13	0.1	147	0.8	513	
6-14	1,209	6.2	13,631	0.1	1	375	1.9	4,263	0.4	35	301	1.5	3,437	0.6	222	
15-20	1,603	18.1	17,098	0.2	1	251	2.8	2,735	0.4	40	64	0.7	701	0.8	575	
21-44	1,117	55.0	9,720	0.5	25	183	9.0	1,605	0.5	53	1	0.0	7	0.1	13	
45-64	276	55.6	2,578	0.7	34	60	12.1	510	0.5	60	1	0.2	11	0.4	25	
65-74	41	30.6	471	0.5	12	44	32.8	484	0.5	39	4	3.0	42	0.5	37	
75-84	11	11.3	121	0.3	2	14	14.4	162	0.7	87	2	2.1	24	0.3	59	
85 and older	6	11.3	69	0.9	115	9	17.0	104	0.7	23	0	0.0	0	0.0	0	
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	

Source: Data for this table are from the MAX 2006 file for New Hampshire, released by CMS in 10/2009. This table was produced on 02/11/2010.

a. Table ND.7C includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 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>.

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

Nondual Medicaid Beneficiaries

TABLE ND.7D
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR NINTH AND TENTH TOP DRUG GROUPS
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, NEW HAMPSHIRE, 2006

Beneficiary Characteristics	ANTIHYPERTENSIVE					ANTIDIABETIC						
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Beneficiaries	Number of Benefit Months
All	2,885	2.5	31,941	0.8	\$82	3,326	2.9	35,570	0.9	\$67	115,128	1,059,051
Female												
All Females	1,942	3.0	21,718	0.8	82	2,321	3.6	25,037	0.8	64	64,576	585,800
Female, Disabled												
All Ages	1,247	25.9	14,408	0.8	85	1,184	24.6	13,342	0.9	69	4,816	49,859
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	19	192
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	34	408
15-20	4	1.9	48	0.9	76	8	3.8	96	0.4	22	211	2,162
21-44	220	11.2	2,566	0.7	71	238	12.1	2,727	0.8	63	1,970	20,714
45-64	1,010	39.4	11,682	0.8	89	923	36.0	10,393	1.0	71	2,565	26,250
65-74	13	76.5	112	0.9	80	15	88.2	126	1.2	76	17	133
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Female, Other Eligibles												
All Ages	695	1.2	7,310	0.7	74	1,137	1.9	11,695	0.8	57	59,760	535,941
5 and younger	4	0.0	44	0.1	3	24	0.2	249	0.9	95	14,607	132,636
6-14	7	0.0	82	0.6	43	112	0.6	1,251	0.8	93	18,044	179,647
15-20	12	0.1	134	0.7	72	134	1.4	1,355	0.8	58	9,907	88,808
21-44	285	1.9	2,908	0.6	62	509	3.3	4,996	0.7	44	15,378	119,499
45-64	177	14.8	1,684	0.7	70	170	14.2	1,675	0.8	60	1,193	9,519
65-74	126	45.7	1,469	0.8	90	124	44.9	1,447	0.9	70	276	3,049
75-84	77	36.7	907	0.8	93	52	24.8	600	0.8	40	210	1,969
85 and older	7	4.8	82	1.1	123	12	8.3	122	1.3	31	145	814
Male												
All Males	943	1.9	10,223	0.8	82	1,005	2.0	10,533	0.9	74	50,552	473,251
Male, Disabled												
All Ages	653	17.0	7,358	0.8	85	585	15.3	6,397	0.9	70	3,834	37,650
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	24	274
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	39	452
15-20	6	1.9	69	0.4	32	6	1.9	72	0.9	21	315	3,333
21-44	148	8.4	1,716	0.8	77	128	7.2	1,415	0.9	78	1,766	17,841
45-64	498	29.6	5,561	0.9	88	450	26.8	4,908	0.9	68	1,682	15,697
65-74	1	14.3	12	0.9	89	1	14.3	2	0.5	35	7	41
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0

Nondual Medicaid Beneficiaries

TABLE ND.7D
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR NINTH AND TENTH TOP DRUG GROUPS
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, NEW HAMPSHIRE, 2006

Beneficiary Characteristics	ANTIHYPERTENSIVE						ANTIDIABETIC					
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean		Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean		Number of Beneficiaries	Number of Benefit Months
				Rx per Month	Mean Rx \$ per Benefit				Rx per Month	Mean Rx \$ per Benefit		
Male, Other Eligibles												
All Ages	290	0.6	2,865	0.7	73	420	0.9	4,136	0.9	80	46,718	435,601
5 and younger	2	0.0	24	0.4	34	14	0.1	160	0.6	75	15,417	139,540
6-14	10	0.1	120	0.6	53	89	0.5	961	0.9	93	19,627	195,765
15-20	17	0.2	190	0.8	71	74	0.8	768	0.9	103	8,864	81,201
21-44	83	4.1	745	0.6	60	97	4.8	847	0.8	77	2,030	13,039
45-64	90	18.1	792	0.7	70	78	15.7	662	0.9	74	496	3,399
65-74	47	35.1	521	0.8	83	41	30.6	436	0.8	46	134	1,376
75-84	36	37.1	414	0.9	98	22	22.7	243	0.9	48	97	886
85 and older	5	9.4	59	1.1	96	5	9.4	59	1.1	85	53	395
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0

Source: Data for this table are from the MAX 2006 file for New Hampshire, released by CMS in 10/2009. This table was produced on 02/11/2010.

a. Table ND.7D includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 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>.

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

Nondual Medicaid Beneficiaries

TABLE ND.8
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BENEFICIARY CHARACTERISTIC^{a, b}
 NONDUAL BENEFICIARIES, NEW HAMPSHIRE, 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
All	\$639	9.6	177	1,875
Age				
0-64	977	12.7	88	928
65-74	614	11.5	18	212
75-84	343	7.2	30	306
85 and older	130	3.6	41	429
Unknown	0	0.0	0	0
Gender				
Female	618	9.8	120	1,290
Male	683	9.0	57	585
Unknown	0	0.0	0	0
Race				
White	641	9.5	171	1,803
African American	0	0	0	0
Other/unknown	589	12.1	6	72
Basis of Eligibility^c				
Aged	307	6.5	89	947
Disabled	980	12.7	83	868
Adults	0	0.0	0	0
Children	930	12.0	5	60
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 2006 file for New Hampshire, released by CMS in 10/2009. This table was produced on 02/11/2010.

a. Table ND.8 includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their 2006 Medicaid enrollment. A total of 243 beneficiaries who were in nursing facilities for part of their enrollment and their 2,364 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.

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

Nondual Medicaid Beneficiaries

TABLE ND.9
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d, e}
 NONDUAL BENEFICIARIES, NEW HAMPSHIRE, 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 All-Year Nursing Facility Residents	Number of Benefit Months
Anti-infective Agents	0.5	0.1	0.0	0.4	\$24	\$16	\$0	\$8	\$50	\$131	\$69	\$22	557	\$27,810	101	57.1	1,142
Biologicals	0.1	0.0	0.0	0.1	2	0	0	2	26	15	0	30	10	257	10	5.6	112
Antineoplastic Agents	1.0	0.2	0.0	0.7	50	38	0	12	52	165	0	16	46	2,392	4	2.3	48
Endocrine/Metabolic Drugs	2.1	0.7	0.2	1.2	70	50	7	13	34	73	44	11	1,722	58,233	75	42.4	833
Cardiovascular Agents	3.0	0.5	0.3	2.2	87	31	32	24	29	63	107	11	2,863	82,264	85	48.0	941
Respiratory Agents	1.1	0.8	0.0	0.4	86	76	0	10	76	101	0	25	776	58,599	59	33.3	680
Gastrointestinal Agents	1.6	0.8	0.0	0.9	112	101	0	12	69	132	0	13	1,718	118,657	95	53.7	1,056
Genitourinary Agents	0.9	0.5	0.0	0.3	66	56	2	8	75	107	58	25	334	24,939	35	19.8	379
CNS Drugs	2.6	1.2	0.1	1.3	221	184	4	32	85	151	45	25	3,773	321,135	130	73.4	1,455
Stimulants/Anti-obesity/Anorexia	0.2	0.1	0.0	0.1	14	14	0	0	69	112	0	5	5	345	2	1.1	24
Miscellaneous Psychological/Neurological Agents	1.1	1.1	0.0	0.0	250	249	0	1	221	225	0	51	342	75,726	27	15.3	303
Analgesics and Anesthetics	1.5	0.3	0.2	1.0	90	45	34	12	62	142	208	12	1,214	75,102	77	43.5	831
Neuromuscular Agents	2.4	0.9	0.1	1.5	214	166	5	43	89	192	87	29	2,065	183,765	76	42.9	859
Nutritional Products	1.0	0.0	0.0	1.0	12	0	0	12	12	0	7	12	452	5,416	43	24.3	458
Hematological Agents	1.6	0.5	0.0	1.1	176	158	0	17	108	297	0	16	962	103,542	54	30.5	589
Topical Products	0.9	0.3	0.0	0.6	48	34	3	11	51	135	57	17	1,016	51,692	96	54.2	1,086
Miscellaneous Products	0.4	0.2	0.1	0.1	37	24	4	9	98	144	59	61	77	7,510	18	10.2	201
Unknown Therapeutic Category	0.1	0.0	0.0	0.0	1	0	0	0	14	0	0	0	1	14	1	0.6	12
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.	17,933	1,197,398	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2006 file for New Hampshire, released by CMS in 10/2009. This table was produced on 02/11/2010.
 a. Table ND.9 includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2006. A total of 243 beneficiaries who were in nursing facilities for part of their enrollment and their 2,364 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 Hampshire, 0.2 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 ND.10
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS,
 BY TOP-10 DRUG GROUP^{a, b, c, d}
 NONDUAL BENEFICIARIES, NEW HAMPSHIRE, 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	\$240,003	92	52.0	1,027	1.4	\$172	\$234	
ANTICONVULSANT	160,259	89	50.3	1,035	1.5	100	155	
ULCER DRUGS	101,679	100	56.5	1,128	1.0	88	90	
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	76,514	30	16.9	339	1.1	202	226	
ANTIDEPRESSANTS	71,219	119	67.2	1,327	1.3	42	54	
ANTICOAGULANTS	69,257	29	16.4	315	1.5	145	220	
ANTIASTHMATIC	51,755	63	35.6	720	0.9	83	72	
ANTIHYPERTENSIVE	46,683	38	21.5	435	1.2	87	107	
ANTIDIABETIC	42,780	66	37.3	735	1.4	42	58	
ANALGESICS - Narcotic	36,265	80	45.2	858	0.9	48	42	
Total	896,414	706	n.a.	7,919	n.a.	n.a.	n.a.	

Source: Data for this table are from the MAX 2006 file for New Hampshire, released by CMS in 10/2009. This table was produced on 02/11/2010.

a. Table ND.10 includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2006. A total of 243 beneficiaries who were in nursing facilities for part of their enrollment and their 2,364 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.

Nondual Medicaid Beneficiaries

TABLE ND.10A
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR TOP 10 DRUG GROUPS COMBINED AND FIRST
 AND SECOND TOP DRUG GROUPS SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c, d}
 NONDUAL BENEFICIARIES, NEW HAMPSHIRE, 2006

Beneficiary Characteristics	All Top 10 Drug Groups			ANTIPSYCHOTICS				ANTICONVULSANT				
	Number of Rx	Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
All	9,647	\$896,414	92	52.0	1,027	1.4	\$234	89	50.3	1,035	1.5	\$155
Female												
All Females	6,941	623,205	65	54.2	742	1.4	219	60	50.0	701	1.5	171
Female, Disabled												
All Ages	4,002	434,344	28	53.8	318	1.7	307	41	78.8	477	1.7	224
64 or younger	4,002	434,344	28	53.8	318	1.7	307	41	78.8	477	1.7	224
65-74	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles												
All Ages	2,939	188,861	37	54.4	424	1.1	153	19	27.9	224	1.2	57
64 or younger	120	5,212	0	0.0	0	0.0	0	3	150.0	36	1.3	48
65-74	1,123	79,791	12	80.0	144	1.0	202	9	60.0	108	0.8	13
75-84	992	66,031	11	47.8	128	1.2	146	6	26.1	68	1.7	134
85 and older	704	37,827	14	50.0	152	1.2	112	1	3.6	12	1.5	41
Male												
All Males	2,706	273,209	27	47.4	285	1.3	272	29	50.9	334	1.6	122
Male, Disabled												
All Ages	1,912	185,972	17	54.8	174	1.1	297	24	77.4	282	1.4	87
64 or younger	1,912	185,972	17	54.8	174	1.1	297	24	77.4	282	1.4	87
65-74	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male, Other Eligibles												
All Ages	794	87,237	10	38.5	111	1.5	233	5	19.2	52	2.5	311
64 or younger	230	43,225	1	33.3	12	2.1	826	2	66.7	24	4.2	635
65-74	208	19,787	5	166.7	60	1.6	192	1	33.3	12	0.4	58
75-84	262	20,940	4	57.1	39	1.1	113	2	28.6	16	1.6	13
85 and older	94	3,285	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Unknown	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2006 file for New Hampshire, released by CMS in 10/2009. This table was produced on 02/11/2010.

a. Table ND.10A includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2006. A total of 243 beneficiaries who were in nursing facilities for part of their enrollment and their 2,364 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 ND.10B
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY
 AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c, d}
 NONDUAL BENEFICIARIES, NEW HAMPSHIRE, 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 \$
All	100	56.5	1,128	1.0	\$90	30	16.9	339	1.1	\$226	119	67.2	1,327	1.3	\$54
Female															
All Females	65	54.2	743	1.0	68	22	18.3	254	1.1	251	91	75.8	1,013	1.3	51
Female, Disabled															
All Ages	33	63.5	370	1.0	81	10	19.2	120	1.1	419	44	84.6	471	1.3	56
64 or younger	33	63.5	370	1.0	81	10	19.2	120	1.1	419	44	84.6	471	1.3	56
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	32	47.1	373	1.1	55	12	17.6	134	1.1	101	47	69.1	542	1.2	46
64 or younger	3	150.0	36	2.1	97	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	13	86.7	156	0.9	31	3	20.0	36	0.8	110	16	106.7	192	1.2	55
75-84	10	43.5	116	0.9	66	6	26.1	65	1.3	104	14	60.9	164	1.1	40
85 and older	6	21.4	65	1.1	73	3	10.7	33	1.1	86	17	60.7	186	1.3	42
Male															
All Males	35	61.4	385	1.0	133	8	14.0	85	1.2	150	28	49.1	314	1.3	63
Male, Disabled															
All Ages	25	80.6	265	1.1	136	1	3.2	12	1.5	220	19	61.3	206	1.4	69
64 or younger	25	80.6	265	1.1	136	1	3.2	12	1.5	220	19	61.3	206	1.4	69
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male, Other Eligibles															
All Ages	10	38.5	120	0.8	125	7	26.9	73	1.2	138	9	34.6	108	1.2	50
64 or younger	3	100.0	36	1.3	330	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	2	66.7	24	0.4	27	2	66.7	24	1.4	171	3	100.0	36	0.9	9
75-84	3	42.9	36	0.5	57	3	42.9	27	1.4	173	4	57.1	48	1.4	75
85 and older	2	15.4	24	0.8	16	2	15.4	22	0.7	59	2	15.4	24	1.3	63
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2006 file for New Hampshire, released by CMS in 10/2009. This table was produced on 02/11/2010.
 a. Table ND.10B includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2006. A total of 243 beneficiaries who were in nursing facilities for part of their enrollment and their 2,364 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 ND.10C
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY
 AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c, d}
 NONDUAL BENEFICIARIES, NEW HAMPSHIRE, 2006

Beneficiary Characteristics	ANTICOAGULANTS					ANTIASTHMATIC					ANTIHYPERLIPIDEMIC							
	Number of Users	Users as % of All-Year Nursing Facility Residents		Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents		Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents		Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
		Residents	Among Users					Residents	Among Users					Residents	Among Users			
All	29	16.4	315	1.5	\$220	63	35.6	720	0.9	\$72	38	21.5	435	1.2	\$107			
Female																		
All Females	18	15.0	208	1.7	278	43	35.8	501	0.8	65	27	22.5	313	1.3	108			
Female, Disabled																		
All Ages	10	19.2	115	2.1	446	27	51.9	313	0.8	72	18	34.6	205	1.3	120			
64 or younger	10	19.2	115	2.1	446	27	51.9	313	0.8	72	18	34.6	205	1.3	120			
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0			
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0			
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0			
Female, Other Eligibles																		
All Ages	8	11.8	93	1.3	70	16	23.5	188	0.8	52	9	13.2	108	1.1	85			
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	5	33.3	60	1.2	42	8	53.3	96	1.2	88	5	33.3	60	1.0	95			
75-84	2	8.7	24	1.6	161	8	34.8	92	0.3	15	4	17.4	48	1.2	72			
85 and older	1	3.6	9	1.3	15	0	0.0	0	0.0	0	0	0.0	0	0.0	0			
Male																		
All Males	11	19.3	107	1.1	107	20	35.1	219	1.0	89	11	19.3	122	1.2	106			
Male, Disabled																		
All Ages	9	29.0	83	1.3	135	12	38.7	123	0.9	62	9	29.0	98	1.2	106			
64 or younger	9	29.0	83	1.3	135	12	38.7	123	0.9	62	9	29.0	98	1.2	106			
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0			
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0			
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0			
Male, Other Eligibles																		
All Ages	2	7.7	24	0.3	9	8	30.8	96	1.1	123	2	7.7	24	1.3	105			
64 or younger	0	0.0	0	0.0	0	4	133.3	48	1.2	129	0	0.0	0	0.0	0			
65-74	1	33.3	12	0.1	0	1	33.3	12	1.1	93	1	33.3	12	1.4	114			
75-84	1	14.3	12	0.6	17	3	42.9	36	1.0	125	1	14.3	12	1.2	96			
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0			
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0			

Source: Data for this table are from the MAX 2006 file for New Hampshire, released by CMS in 10/2009. This table was produced on 02/11/2010.
 a. Table ND.10C includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2006. A total of 243 beneficiaries who were in nursing facilities for part of their enrollment and their 2,364 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 ND.10D
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR NINTH AND TENTH TOP DRUG GROUPS
 SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c, d}
 NONDUAL BENEFICIARIES, NEW HAMPSHIRE, 2006

Beneficiary Characteristics	ANTIDIABETIC					ANALGESICS - Narcotic					All-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$		
All	66	37.3	735	1.4	\$58	80	45.2	858	0.9	\$42	177	1,875
Female												
All Females	58	48.3	640	1.4	61	59	49.2	628	0.7	20	120	1,290
Female, Disabled												
All Ages	30	57.7	304	1.7	66	34	65.4	362	0.6	12	52	546
64 or younger	30	57.7	304	1.7	66	34	65.4	362	0.6	12	52	546
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Female, Other Eligibles												
All Ages	28	41.2	336	1.2	56	25	36.8	266	0.8	30	68	744
64 or younger	0	0.0	0	0.0	0	1	50.0	12	0.1	0	2	24
65-74	14	93.3	168	1.1	70	6	40.0	72	1.0	24	15	176
75-84	8	34.8	96	1.3	52	12	52.2	126	0.8	27	23	248
85 and older	6	21.4	72	1.5	29	6	21.4	56	0.7	50	28	296
Male												
All Males	8	14.0	95	1.0	40	21	36.8	230	1.4	104	57	585
Male, Disabled												
All Ages	8	25.8	95	1.0	40	18	58.1	194	1.4	123	31	322
64 or younger	8	25.8	95	1.0	40	18	58.1	194	1.4	123	31	322
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Male, Other Eligibles												
All Ages	0	0.0	0	0.0	0	3	11.5	36	1.2	6	26	263
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	36
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	36
75-84	0	0.0	0	0.0	0	2	28.6	24	0.6	6	7	58
85 and older	0	0.0	0	0.0	0	1	7.7	12	2.3	7	13	133
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0

Source: Data for this table are from the MAX 2006 file for New Hampshire, released by CMS in 10/2009. This table was produced on 02/11/2010.
 a. Table ND.10D includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2006. A total of 243 beneficiaries who were in nursing facilities for part of their enrollment and their 2,364 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 ND.11
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
 AMONG NONDUALS, BY BENEFICIARY CHARACTERISTIC^{a,b}
 NEW HAMPSHIRE, 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 Nondual Rx \$	Total Number of Beneficiaries	
All	19,424	16.9	1.1	131,908	\$14	\$1,564,502	\$12	1.9	115,128	
Age										
5 and younger	3,861	12.8	0.4	10,750	4	105,956	10	2.1	30,067	
6-14	4,232	11.2	0.5	17,560	6	217,090	12	1.2	37,744	
15-20	2,322	12.0	0.6	10,927	7	132,849	12	1.2	19,297	
21-44	5,814	27.5	2.1	44,880	24	510,887	11	2.1	21,144	
45-64	2,807	47.3	6.9	41,014	92	544,431	13	2.4	5,936	
65-74	205	47.2	7.7	3,326	76	32,854	10	2.2	434	
75-84	112	36.4	7.1	2,192	45	14,011	6	1.8	308	
85 and older	71	35.9	6.4	1,259	32	6,424	5	3.8	198	
Unknown	0	0.0	0.0	0	0	0	0	0.0	0	
Basis of Eligibility^c										
Aged	377	41.2	7.3	6,651	56	51,599	8	2.1	915	
Disabled	4,119	47.6	7.0	60,935	92	799,283	13	2.3	8,650	
Adults	4,710	24.9	1.5	27,903	16	299,457	11	2.2	18,938	
Children	10,218	11.8	0.4	36,419	5	414,163	11	1.3	86,625	
Unknown	0	0.0	0.0	0	0	0	0	0.0	0	
Gender										
Female	12,563	19.5	1.4	89,834	17	1,078,798	12	2.2	64,576	
Male	6,861	13.6	0.8	42,074	10	485,704	12	1.4	50,552	
Unknown	0	0.0	0.0	0	0	0	0	0.0	0	
Race										
White	17,558	17.0	1.2	123,932	13	1,391,402	11	1.8	103,423	
African American	533	17.5	0.8	2,403	38	116,913	49	7.7	3,049	
Other/unknown	1,333	15.4	0.6	5,573	6	56,187	10	1.5	8,656	
Use of Nursing Facilities^d										
Entire year	159	89.8	28.5	5,039	182	32,248	6	2.7	177	
Part year	204	84.0	14.2	3,451	117	28,536	8	2.1	243	
None	19,061	16.6	1.1	123,418	13	1,503,718	12	1.9	114,708	
Maintenance Assistance Status										
Cash	5,778	27.6	2.7	55,779	29	603,262	11	2.0	20,925	
Medically needy	1,266	27.0	2.2	10,459	48	223,645	21	3.6	4,695	
Poverty related	6,681	10.2	0.3	20,504	4	242,595	12	1.3	65,564	
Other/unknown	5,699	23.8	1.9	45,166	21	495,000	11	1.7	23,944	

Source: Data for this table are from the MAX 2006 file for New Hampshire, released by CMS in 10/2009. This table was produced on 02/11/2010.

a. Table ND.11 includes the beneficiaries represented by Cell K of Table 1. Beneficiaries include all nondual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 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.

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

Nondual Medicaid Beneficiaries

TABLE ND.12
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
 AMONG NONDUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a,b}
 NEW HAMPSHIRE, 2006

Beneficiary Characteristics	Number Rx per Benefit Month	Rx \$ per Benefit Month	\$ per Rx	Barbiturate \$ per Benefit Month	Benzodiazepine \$ per Benefit Month	Number of Benefit Months
All	0.1	\$1	\$12	\$0	\$1	1,059,051
Age						
5 and younger	0.0	0	10	0	0	272,642
6-14	0.0	1	12	0	0	376,272
15-20	0.1	1	12	0	0	175,504
21-44	0.3	3	11	0	2	171,093
45-64	0.7	10	13	0	4	54,865
65-74	0.7	7	10	0	3	4,599
75-84	0.8	5	6	0	1	2,867
85 and older	1.0	5	5	0	1	1,209
Unknown	0.0	0	0	0	0	0
Basis of Eligibility^c						
Aged	0.8	6	8	0	2	8,489
Disabled	0.7	9	13	0	4	87,509
Adults	0.2	2	11	0	1	144,750
Children	0.0	1	11	0	0	818,303
Unknown	0.0	0	0	0	0	0
Gender						
Female	0.2	2	12	0	1	585,800
Male	0.1	1	12	0	0	473,251
Unknown	0.0	0	0	0	0	0
Race						
White	0.1	1	11	0	1	951,957
African American	0.1	4	49	0	0	28,249
Other/unknown	0.1	1	10	0	0	78,845
Use of Nursing Facilities^d						
Entire year	2.7	17	6	0	5	1,875
Part year	1.5	12	8	0	4	2,364
None	0.1	1	12	0	1	1,054,812
Maintenance Assistance Status						
Cash	0.3	3	11	0	2	200,481
Medically needy	0.3	6	21	0	2	37,404
Poverty related	0.0	0	12	0	0	590,921
Other/unknown	0.2	2	11	0	1	230,245

Source: Data for this table are from the MAX 2006 file for New Hampshire, released by CMS in 10/2009. This table was produced on 02/11/2010.

a. Table ND.12 includes the beneficiaries represented by Cell K of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits. Beneficiaries include all nondual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 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.

TABLE ND.13
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D FOR SELECTED DRUG CATEGORIES AMONG NONDUALS^{a,b,c}
 NEW HAMPSHIRE, 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 \$				Excluded Rx	
All	23,676	\$66	\$1,564,502	100.0		131,908	\$12	100.0	
Anorexia or weight loss/gain	13	231	3,004	0.2		69	44	0.1	
Fertility drugs	0	0	0	0.0		0	0	0.0	
Drugs for cosmetic purposes	153	14	2,171	0.1		306	7	0.2	
Cough and cold medications	2,052	78	159,144	10.2		5,225	30	4.0	
Vitamins and minerals	3,454	40	136,656	8.7		12,908	11	9.8	
Non-prescription drugs	10,297	42	429,377	27.4		54,321	8	41.2	
Barbiturates	191	74	14,045	0.9		2,068	7	1.6	
Benzodiazepines	6,771	91	613,991	39.2		53,744	11	40.7	
Other Part D Excl Rx Drugs	745	277	206,114	13.2		3,267	63	2.5	

Source: Data for this table are from the MAX 2006 file for New Hampshire, released by CMS in 10/2009. This table was produced on 02/11/2010.

a. Table ND.13 includes the beneficiaries represented by Cell K of Table 1. Beneficiaries include all nondual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 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 ND11.

b. Includes OTC drugs as well as prescription drugs.

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

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

Nondual Medicaid Beneficiaries

APPENDIX TABLE A.1
 CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY^{a, b}
 NONDUAL BENEFICIARIES, NEW HAMPSHIRE, 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
All	115,128	915	8,650	18,938	86,625	0	1,059,051	8,489	87,509	144,750	818,303	0
Age												
5 and younger	30,067	0	43	0	30,024	0	272,642	0	466	0	272,176	0
6-14	37,744	0	73	0	37,671	0	376,272	0	860	0	375,412	0
15-20	19,297	0	526	0	18,771	0	175,504	0	5,495	0	170,009	0
21-44	21,144	0	3,736	17,250	158	0	171,093	0	38,555	131,844	694	0
45-64	5,936	0	4,247	1,688	1	0	54,865	0	41,947	12,906	12	0
65-74	434	410	24	0	0	0	4,599	4,425	174	0	0	0
75-84	308	307	1	0	0	0	2,867	2,855	12	0	0	0
85 and older	198	198	0	0	0	0	1,209	1,209	0	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	64,576	631	4,816	16,425	42,704	0	585,800	5,832	49,859	128,367	401,742	0
Male	50,552	284	3,834	2,513	43,921	0	473,251	2,657	37,650	16,383	416,561	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	103,423	633	8,220	17,084	77,486	0	951,957	5,551	83,239	131,130	732,037	0
African American	3,049	24	131	644	2,250	0	28,249	246	1,251	4,910	21,842	0
Other/unknown	8,656	258	299	1,210	6,889	0	78,845	2,692	3,019	8,710	64,424	0
Use of Nursing Facilities^c												
Entire year	177	89	83	0	5	0	1,875	947	868	0	60	0
Part year	243	51	175	10	7	0	2,364	503	1,699	78	84	0
None	114,708	775	8,392	18,928	86,613	0	1,054,812	7,039	84,942	144,672	818,159	0
Maintenance Assistance Status												
Cash	20,925	466	4,818	4,823	10,818	0	200,481	5,122	52,378	38,109	104,872	0
Medically needy	4,695	167	847	2,139	1,542	0	37,404	950	6,923	14,656	14,875	0
Poverty related	65,564	11	3	4,041	61,509	0	590,921	73	11	23,670	567,167	0
Other/unknown	23,944	271	2,982	7,935	12,756	0	230,245	2,344	28,197	68,315	131,389	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	115,128	915	8,650	18,938	86,625	0	1,059,051	8,489	87,509	144,750	818,303	0
FFS part year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
FFS part year, no Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
MC all year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
MC all year, no Rx claims	0	0	0	0	0	0	0	0	0	0	0	0

Source: Data for this table are from the MAX 2006 file for New Hampshire, released by CMS in 10/2009. This table was produced on 02/11/2010.

a. Table A.1 includes the beneficiaries represented by Cell J of Table 1. Benefit months are months during which beneficiaries had pharmacy benefit coverage.
 b. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services. The total includes some beneficiaries with unknown basis of eligibility and some whose age categories are not consistent with basis of eligibility.
 c. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.
 Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; FFS = fee-for-service pharmacy benefit; MAX = Medicaid Analytic Extract; MC = managed care; Rx = pharmacy benefit.

APPENDIX TABLE A.2
 MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS^a
 NONDUAL BENEFICIARIES, NEW HAMPSHIRE, 2006

	Beneficiaries and		Included in Cell K of Table 1		Excluded from Cell K of Table 1	
	Benefit Months in Cell J of Table 1					
	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months
All	115,128	1,059,051	115,128	1,059,051	0	0
Fee-for-service (FFS) all year	115,128	1,059,051	115,128	1,059,051	0	0
FFS part year, with Rx claims	0	0	0	0	0	0
FFS part year, with no Rx claims	0	0	0	0	0	0
Managed care (MC) all year, with Rx claims	0	0	0	0	0	0
MC all year, with no Rx claims	0	0	0	0	0	0

Source: Data for this table are from the MAX 2006 file for New Hampshire, released by CMS in 10/2009. 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 & Medicaid Services; FFS = fee-for-service pharmacy benefit; MAX = Medicaid Analytic Extract; MC = managed care; Rx = pharmacy benefit.

Nondual Medicaid Beneficiaries