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

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TABLE ND.2
CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a, b}
NONDUAL BENEFICIARIES, NEW MEXICO, 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	273,499	488	13,265	88,206	171,219	321	1,301,635	3,785	91,059	507,804	696,097	2,890
Age												
5 and younger	65,604	1	682	0	64,921	0	245,405	7	4,376	0	241,022	0
6-14	74,732	0	1,433	0	73,299	0	322,035	0	11,182	0	310,853	0
15-20	40,631	0	1,219	6,416	32,996	0	185,147	0	9,041	31,891	144,215	0
21-44	78,972	0	3,910	74,966	3	93	462,934	0	25,217	436,946	7	764
45-64	12,735	2	5,696	6,811	0	226	78,864	3	37,819	38,921	0	2,121
65-74	322	93	219	8	0	2	2,998	674	2,295	24	0	5
75-84	266	183	80	3	0	0	2,506	1,656	836	14	0	0
85 and older	237	209	26	2	0	0	1,746	1,445	293	8	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	170,124	302	6,306	77,843	85,352	321	862,140	2,266	43,884	466,884	346,216	2,890
Male	103,374	186	6,959	10,363	85,866	0	439,493	1,519	47,175	40,920	349,879	0
Unknown	1	0	0	0	1	0	2	0	0	0	2	0
Race												
White	51,870	184	3,015	20,709	27,823	139	175,386	1,188	13,017	101,104	58,838	1,239
African American	5,174	2	283	1,665	3,223	1	14,342	2	1,039	7,020	6,276	5
Other/unknown	216,455	302	9,967	65,832	140,173	181	1,111,907	2,595	77,003	399,680	630,983	1,646
Use of Nursing Facilities^c												
Entire year	341	78	263	0	0	0	3,699	825	2,874	0	0	0
Part year	264	43	217	4	0	0	2,117	369	1,727	21	0	0
None	272,894	367	12,785	88,202	171,219	321	1,295,819	2,591	86,458	507,783	696,097	2,890
Maintenance Assistance Status												
Cash	87,535	180	12,033	30,743	44,579	0	410,336	1,715	85,075	129,880	193,666	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0
Poverty-related	113,091	4	709	8,472	103,585	321	451,339	23	2,877	36,285	409,264	2,890
Other/unknown	72,873	304	523	48,991	23,055	0	439,960	2,047	3,107	341,639	93,167	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	114,694	455	7,633	48,799	57,489	318	915,392	3,711	73,919	371,611	463,276	2,875
FFS part year, with Rx claims	30,838	16	2,296	11,408	17,117	1	88,161	45	7,438	41,607	39,063	8
FFS part year, no Rx claims	127,967	17	3,336	27,999	96,613	2	298,082	29	9,702	94,586	193,758	7

Source: Data for this table are from the MAX 2006 file for New Mexico, released by CMS in 9/2009. 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.

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

Nondual Medicaid Beneficiaries

TABLE ND.3
ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC^{a, b}
NONDUAL BENEFICIARIES, NEW MEXICO, 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	21.4	1.0	\$47	\$47	\$2,590	1.8	273,499
Age							
5 and younger	19.2	0.4	15	34	2,557	0.6	65,604
6-14	15.7	0.4	17	42	1,614	1.1	74,732
15-20	21.7	0.7	26	39	1,955	1.3	40,631
21-44	26.1	1.3	56	43	2,862	1.9	78,972
45-64	35.2	6.2	370	60	7,875	4.7	12,735
65-74	42.2	13.6	766	56	20,956	3.7	322
75-84	25.2	7.0	333	48	14,831	2.2	266
85 and older	18.6	5.5	245	45	14,518	1.7	237
Unknown	0.0	0.0	0	0	0	0.0	0
Basis of Eligibility^e							
Aged	24.4	7.7	341	44	14,386	2.4	488
Disabled	43.0	7.6	491	65	13,332	3.7	13,265
Adults	25.4	1.0	37	36	2,314	1.6	88,206
Children	17.5	0.4	14	34	1,835	0.8	171,219
Unknown	82.6	19.9	1,460	73	19,155	7.6	321
Gender							
Female	22.9	1.1	48	44	2,529	1.9	170,124
Male	18.8	0.9	46	54	2,689	1.7	103,374
Unknown	0.0	0.0	0	0	242	0.0	1
Race							
White	20.7	1.1	58	53	2,880	2.0	51,870
African American	16.6	0.6	28	44	2,431	1.1	5,174
Other/unknown	21.7	1.0	45	45	2,524	1.8	216,455
Use of Nursing Facilities^f							
Entire year	91.8	69.7	4,205	60	60,367	7.0	341
Part year	85.6	38.5	2,330	61	54,661	4.3	264
None	21.2	0.9	40	45	2,467	1.6	272,894
Maintenance Assistance Status							
Cash	25.3	1.7	88	52	3,704	2.4	87,535
Medically needy	0.0	0.0	0	0	0	0.0	0
Poverty related	19.2	0.5	21	40	2,138	1.0	113,091
Other/unknown	20.1	0.9	37	41	1,952	1.9	72,873

Source: Data for this table are from the MAX 2006 file for New Mexico, released by CMS in 9/2009. 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.

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

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

Beneficiary Characteristics	Number of Rx, Percentage with:										Number		
	Mean Number of Rx	Mean Rx \$	Rx \$ as a Percentage of All Medicaid FFS \$ ^c	None	More than 0, but 1 or Less	More than 1, but 2 or Less	More than 2, but 5 or Less	More than 5, but 10 or Less	More than 10	Mean \$, All Medicaid FFS \$ ^d	Beneficiaries	Benefit Months	
All	0.2	\$10	1.8	78.6	17.1	2.3	1.6	0.4	0.1	\$544	273,499	1,301,635	
Age													
5 and younger	0.1	4	0.6	80.8	16.1	2.1	0.9	0.1	0.0	684	65,604	245,405	
6-14	0.1	4	1.1	84.3	13.0	1.7	0.9	0.1	0.0	375	74,732	322,035	
15-20	0.1	6	1.3	78.3	18.3	2.2	1.2	0.1	0.0	429	40,631	185,147	
21-44	0.2	10	1.9	73.9	21.2	2.4	1.9	0.5	0.1	488	78,972	462,934	
45-64	1.0	60	4.7	64.8	17.0	5.9	7.7	3.5	1.1	1,272	12,735	78,864	
65-74	1.5	82	3.7	57.8	19.9	4.3	8.4	6.8	2.8	2,251	322	2,998	
75-84	0.7	35	2.2	74.8	9.8	2.6	6.4	6.0	0.4	1,574	266	2,506	
85 and older	0.7	33	1.7	81.4	11.0	1.3	2.5	3.4	0.4	1,971	237	1,746	
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	1.0	44	2.4	75.6	10.9	2.9	4.9	4.9	0.8	1,855	488	3,785	
Disabled	1.1	72	3.7	57.0	22.3	6.6	8.7	4.0	1.3	1,942	13,265	91,059	
Adults	0.2	6	1.6	74.6	21.0	2.2	1.7	0.4	0.1	402	88,206	507,804	
Children	0.1	4	0.8	82.5	14.6	1.9	0.9	0.1	0.0	451	171,219	696,097	
Unknown	2.2	162	7.6	17.4	34.6	19.6	20.9	5.9	1.6	2,128	321	2,890	
Gender													
Female	0.2	9	1.9	77.1	18.6	2.3	1.6	0.4	0.1	499	170,124	862,140	
Male	0.2	11	1.7	81.2	14.6	2.3	1.6	0.4	0.1	633	103,374	439,493	
Unknown	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	121	1	2	
Race													
White	0.3	17	2.0	79.3	14.4	3.0	2.4	0.7	0.2	852	51,870	175,386	
African American	0.2	10	1.1	83.4	10.8	3.2	2.0	0.5	0.1	877	5,174	14,342	
Other/unknown	0.2	9	1.8	78.3	17.9	2.1	1.4	0.3	0.1	491	216,455	1,111,907	
Use of Nursing Facilities^f													
Entire year	6.4	388	7.0	8.2	12.3	5.6	20.8	34.6	18.5	5,565	341	3,699	
Part year	4.8	291	4.3	14.4	16.7	8.0	22.0	27.7	11.4	6,817	264	2,117	
None	0.2	8	1.6	78.8	17.1	2.3	1.5	0.3	0.1	520	272,894	1,295,819	
Maintenance Assistance Status													
Cash	0.4	19	2.4	74.7	18.1	3.4	2.8	0.9	0.2	790	87,535	410,336	
Medically needy	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0	
Poverty related	0.1	5	1.0	80.8	16.0	2.1	1.0	0.1	0.0	536	113,091	451,339	
Other/unknown	0.2	6	1.9	79.9	17.6	1.3	0.9	0.2	0.1	323	72,873	439,960	

Source: Data for this table are from the MAX 2006 file for New Mexico, released by CMS in 9/2009. 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 CHARACTERISTICS^{a, b, c}
 NONDUAL BENEFICIARIES, NEW MEXICO, 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	0.2	\$10	\$47	0.0	\$6	\$131	0.0	\$1	\$67	0.1	\$3	\$18
Age												
5 and younger	0.1	4	34	0.0	2	141	0.0	0	39	0.1	1	14
6-14	0.1	4	42	0.0	3	108	0.0	0	44	0.1	1	16
15-20	0.1	6	39	0.0	3	117	0.0	1	61	0.1	2	17
21-44	0.2	10	43	0.0	5	116	0.0	1	66	0.2	3	20
45-64	1.0	60	60	0.2	39	161	0.1	7	85	0.7	13	20
65-74	1.5	82	56	0.5	57	127	0.1	8	64	0.9	17	19
75-84	0.7	35	48	0.2	24	107	0.0	4	88	0.5	8	16
85 and older	0.7	33	45	0.2	22	96	0.1	4	69	0.5	8	18
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility^d												
Aged	1.0	44	44	0.3	31	100	0.0	3	71	0.6	10	15
Disabled	1.1	72	65	0.3	48	172	0.1	8	77	0.7	14	21
Adults	0.2	6	36	0.0	3	88	0.0	1	65	0.1	3	19
Children	0.1	4	34	0.0	2	105	0.0	0	45	0.1	1	15
Unknown	2.2	162	73	0.7	116	169	0.1	16	184	1.4	30	21
Gender												
Female	0.2	9	44	0.0	5	119	0.0	1	66	0.2	3	19
Male	0.2	11	54	0.0	7	154	0.0	1	70	0.1	3	18
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Race												
White	0.3	17	53	0.1	11	126	0.0	1	80	0.2	5	22
African American	0.2	10	44	0.1	7	117	0.0	1	66	0.2	3	17
Other/unknown	0.2	9	45	0.0	5	134	0.0	1	65	0.1	2	18
Use of Nursing Facilities^e												
Entire year	6.4	388	60	2.1	290	136	0.3	19	62	3.9	78	20
Part year	4.8	291	61	1.4	201	145	0.2	15	71	3.2	74	23
None	0.2	8	45	0.0	5	130	0.0	1	67	0.1	2	18
Maintenance Assistance Status												
Cash	0.4	19	52	0.1	12	157	0.0	2	69	0.2	4	18
Medically needy	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Poverty related	0.1	5	40	0.0	3	123	0.0	1	67	0.1	2	16
Other/unknown	0.2	6	41	0.0	3	88	0.0	1	60	0.1	2	22

Source: Data for this table are from the MAX 2006 file for New Mexico, released by CMS in 9/2009. 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 Mexico, 1.5 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 1 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 MEXICO, 2006

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per Rx				Users ^e				
	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total Number of Rx	Total Rx \$	Number of Users	As a Percentage of All Benes	Number of Benefit Months
		Generic	Generic	Generic		Generic	Generic	Generic		Generic							
Anti-infective Agents	0.2	0.0	0.0	0.2	\$8	\$3	\$1	\$4	\$32	\$151	\$42	\$19	36,817	\$1,176,037	24,644	9.0	156,173
Biologicals	0.1	0.1	0.0	0.0	20	20	0	0	186	194	194	33	2,333	433,280	2,016	0.7	21,521
Antineoplastic Agents	0.5	0.2	0.0	0.3	105	97	0	8	208	476	0	25	1,521	316,028	329	0.1	3,024
Endocrine/Metabolic Drugs	0.5	0.1	0.1	0.3	20	11	3	6	44	85	51	24	54,774	2,417,828	15,653	5.7	119,937
Cardiovascular Agents	0.8	0.2	0.1	0.6	34	15	12	8	42	90	127	14	23,760	1,000,033	4,157	1.5	29,187
Respiratory Agents	0.4	0.1	0.0	0.2	16	11	0	4	44	103	49	17	30,170	1,323,139	15,324	5.6	83,939
Gastrointestinal Agents	0.4	0.1	0.0	0.3	24	13	4	6	60	141	196	23	11,573	699,018	4,246	1.6	29,369
Genitourinary Agents	0.3	0.1	0.0	0.2	11	5	2	4	44	91	63	25	3,531	154,556	2,153	0.8	13,993
CNS Drugs	0.6	0.2	0.1	0.4	49	39	5	6	78	180	82	16	25,489	1,980,791	6,397	2.3	40,302
Stimulants/Anti-obesity/Anorexia	0.4	0.3	0.0	0.1	39	34	2	2	88	109	171	21	2,826	249,644	1,323	0.5	6,444
Miscellaneous Psychological/Neurological Agents	0.6	0.6	0.0	0.0	148	144	0	5	240	248	0	123	427	102,536	88	0.0	692
Analgesics and Anesthetics	0.3	0.0	0.0	0.3	8	4	1	4	24	197	59	12	34,026	810,625	15,150	5.5	103,037
Neuromuscular Agents	0.6	0.1	0.1	0.4	42	24	3	15	73	179	61	37	13,701	993,993	3,594	1.3	23,547
Nutritional Products	0.3	0.0	0.0	0.2	4	0	0	3	14	37	43	12	7,472	106,171	4,330	1.6	27,816
Hematological Agents	0.5	0.1	0.1	0.3	48	42	2	4	91	377	19	13	4,470	407,481	1,087	0.4	8,404
Topical Products	0.2	0.0	0.0	0.2	6	2	1	3	25	81	49	15	16,708	423,955	10,827	4.0	72,633
Miscellaneous Products	0.2	0.2	0.0	0.1	18	14	2	2	81	89	320	39	1,401	113,901	938	0.3	6,429
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	6	0	0	0	37	0	0	0	3,096	115,614	1,950	0.7	19,578
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.	274,095	12,824,630	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2006 file for New Mexico, released by CMS in 9/2009. 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 Mexico, 1.5 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.

Nondual Medicaid Beneficiaries

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

Top 10 Drug Groups	Total Medicaid Rx \$	Users			Among Users			
		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	
CONTRACEPTIVES	\$1,441,083	10,703	3.9	88,155	0.4	\$41	\$16	
ANTIPSYCHOTICS	1,250,501	1,511	0.6	11,692	0.5	204	107	
ANTICONVULSANT	896,886	2,208	0.8	15,595	0.6	100	58	
ANTIASTHMATIC	884,171	10,221	3.7	61,559	0.3	54	14	
ANTIDIABETIC	870,134	3,562	1.3	28,810	0.4	73	30	
ANTIDEPRESSANTS	605,295	4,733	1.7	30,608	0.4	49	20	
ANTIHYPERLIPIDEMIC	557,893	1,380	0.5	10,612	0.4	124	53	
ULCER DRUGS	438,937	3,536	1.3	24,364	0.3	54	18	
PASSIVE IMMUNIZING AGENTS	388,172	118	0.0	799	0.3	1,703	486	
ANALGESICS - Narcotic	343,849	10,874	4.0	73,110	0.3	18	5	
Total	7,676,921	48,846	n.a.	345,304	n.a.	n.a.	n.a.	

Source: Data for this table are from the MAX 2006 file for New Mexico, released by CMS in 9/2009. 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 MEXICO, 2006

Beneficiary Characteristics	All Top 10 Drug Groups							CONTRACEPTIVES			ANTIPSYCHOTICS		
	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	122,564	\$7,676,921	10,703	3.9	88,155	0.4	\$16	1,511	0.6	11,692	0.5	\$107	
Female													
All Females	89,530	5,016,422	10,700	6.3	88,129	0.4	16	812	0.5	6,372	0.5	88	
Female, Disabled													
All Ages	27,420	2,344,283	187	3.0	1,808	0.3	14	432	6.9	3,683	0.7	134	
5 and younger	193	44,112	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
6-14	636	53,198	3	0.6	14	0.2	16	12	2.4	83	0.5	177	
15-20	934	99,771	50	10.7	483	0.2	12	25	5.3	241	0.3	101	
21-44	6,644	622,687	119	6.5	1,155	0.3	15	151	8.2	1,063	0.6	106	
45-64	18,060	1,451,090	15	0.5	156	0.3	13	231	7.5	2,151	0.7	151	
65-74	854	67,811	0	0.0	0	0.0	0	12	8.8	141	0.8	109	
75-84	98	5,607	0	0.0	0	0.0	0	1	2.3	4	1.0	120	
85 and older	1	7	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
Female, Other Eligibles													
All Ages	62,110	2,672,139	10,513	6.4	86,321	0.4	16	380	0.2	2,689	0.2	25	
5 and younger	1,910	144,033	1	0.0	12	0.1	5	1	0.0	1	1.0	97	
6-14	2,994	142,902	58	0.2	302	0.2	11	53	0.1	294	0.3	39	
15-20	6,565	273,322	1,678	7.2	11,253	0.3	13	95	0.4	726	0.2	28	
21-44	44,016	1,742,787	8,642	13.0	73,456	0.4	17	172	0.3	1,152	0.2	19	
45-64	5,612	314,875	134	2.4	1,298	0.5	20	45	0.8	348	0.2	9	
65-74	408	21,229	0	0.0	0	0.0	0	6	9.1	72	0.7	95	
75-84	373	21,756	0	0.0	0	0.0	0	6	5.8	72	0.8	62	
85 and older	232	11,235	0	0.0	0	0.0	0	2	1.4	24	0.5	18	
Male													
All Males	33,034	2,660,499	3	0.0	26	0.2	8	699	0.7	5,320	0.6	130	
Male, Disabled													
All Ages	19,823	1,880,029	2	0.0	24	0.1	7	458	6.6	3,864	0.6	154	
5 and younger	376	79,639	0	0.0	0	0.0	0	2	0.5	16	0.6	77	
6-14	1,040	67,171	0	0.0	0	0.0	0	35	3.7	252	0.4	77	
15-20	884	118,346	0	0.0	0	0.0	0	42	5.6	383	0.5	161	
21-44	5,036	473,354	1	0.0	12	0.1	5	175	8.4	1,376	0.6	136	
45-64	11,919	1,094,574	1	0.0	12	0.2	9	194	7.4	1,737	0.8	177	
65-74	491	41,430	0	0.0	0	0.0	0	9	10.8	89	0.7	189	
75-84	77	5,515	0	0.0	0	0.0	0	1	2.8	11	0.6	54	
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 MEXICO, 2006

Beneficiary Characteristics	All Top 10 Drug Groups			CONTRACEPTIVES					ANTIPSYCHOTICS				
	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	13,211	780,470	1	0.0	2	0.5	16	241	0.2	1,456	0.4	66	
5 and younger	2,610	211,123	0	0.0	0	0.0	0	1	0.0	1	1.0	111	
6-14	3,933	225,591	0	0.0	0	0.0	0	100	0.3	625	0.3	57	
15-20	2,022	103,138	0	0.0	0	0.0	0	82	0.5	484	0.3	55	
21-44	2,956	128,407	1	0.0	2	0.5	16	35	0.4	154	0.3	45	
45-64	1,097	65,226	0	0.0	0	0.0	0	8	0.6	36	0.5	52	
65-74	213	11,577	0	0.0	0	0.0	0	6	16.2	67	0.4	80	
75-84	218	20,454	0	0.0	0	0.0	0	3	3.7	28	1.4	399	
85 and older	162	14,954	0	0.0	0	0.0	0	6	9.1	61	0.7	123	
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 Mexico, released by CMS in 9/2009. 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>.

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

Nondual 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 MEXICO, 2006

Beneficiary Characteristics	ANTICONVULSANT					ANTIASTHMATIC					ANTIIDIABETIC				
	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	2,208	0.8	15,595	0.6	\$58	10,221	3.7	61,559	0.3	\$14	3,562	1.3	28,810	0.4	\$30
Female															
All Females	1,279	0.8	8,662	0.6	59	5,335	3.1	32,721	0.3	15	2,401	1.4	19,543	0.4	30
Female, Disabled															
All Ages	719	11.4	5,960	0.6	68	896	14.2	7,188	0.3	27	1,092	17.3	10,225	0.5	35
5 and younger	9	3.6	81	0.4	20	52	20.7	498	0.2	12	0	0.0	0	0.0	0
6-14	30	6.1	279	0.5	42	86	17.5	840	0.4	25	2	0.4	4	1.0	158
15-20	44	9.4	405	0.7	112	51	10.9	476	0.4	24	14	3.0	106	0.5	30
21-44	274	14.9	2,221	0.6	76	173	9.4	1,197	0.4	30	156	8.5	1,405	0.5	37
45-64	350	11.4	2,835	0.6	60	511	16.7	3,971	0.3	29	869	28.4	8,119	0.5	35
65-74	11	8.1	129	1.1	36	19	14.0	173	0.2	12	48	35.3	565	0.4	30
75-84	1	2.3	10	0.9	114	4	9.1	33	0.3	12	3	6.8	26	0.2	7
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	560	0.3	2,702	0.4	39	4,439	2.7	25,533	0.2	12	1,309	0.8	9,318	0.4	23
5 and younger	14	0.0	64	0.7	131	1,170	3.6	6,746	0.2	9	3	0.0	7	0.7	64
6-14	51	0.1	220	0.4	64	1,347	3.7	7,278	0.2	12	59	0.2	189	0.6	67
15-20	56	0.2	246	0.4	42	639	2.8	3,618	0.2	12	62	0.3	287	0.4	27
21-44	338	0.5	1,494	0.4	32	1,093	1.6	6,549	0.2	13	756	1.1	5,563	0.3	19
45-64	94	1.7	597	0.4	34	175	3.1	1,198	0.3	21	388	6.9	2,859	0.4	28
65-74	3	4.5	36	0.8	19	8	12.1	77	0.6	19	13	19.7	128	0.7	26
75-84	3	2.9	33	0.5	77	3	2.9	23	0.3	19	20	19.2	194	0.5	28
85 and older	1	0.7	12	1.0	56	4	2.8	44	0.3	7	8	5.5	91	0.4	21
Male															
All Males	929	0.9	6,933	0.6	56	4,886	4.7	28,838	0.3	13	1,161	1.1	9,267	0.4	32
Male, Disabled															
All Ages	664	9.5	5,837	0.6	57	700	10.1	5,891	0.3	19	686	9.9	6,512	0.5	34
5 and younger	18	4.2	155	0.3	64	86	20.0	820	0.3	12	0	0.0	0	0.0	0
6-14	39	4.1	306	0.5	32	157	16.7	1,300	0.3	17	1	0.1	1	2.0	208
15-20	59	7.9	594	0.6	76	42	5.6	402	0.2	7	3	0.4	36	0.2	4
21-44	240	11.6	2,027	0.6	56	121	5.8	944	0.4	20	118	5.7	1,111	0.3	25
45-64	295	11.2	2,629	0.7	57	279	10.6	2,249	0.3	24	544	20.6	5,152	0.5	36
65-74	11	13.3	108	0.8	44	15	18.1	176	0.2	14	16	19.3	170	0.8	46
75-84	2	5.6	18	0.4	22	0	0.0	0	0.0	0	4	11.1	42	0.3	49
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 MEXICO, 2006

Beneficiary Characteristics	ANTICONVULSANT					ANTIASTHMATIC					ANTIDIABETIC				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of		Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of		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				Rx per Benefit Month	Mean Rx \$ per Benefit Month				Rx per Benefit Month	Mean Rx \$ per Benefit Month
Male, Other Eligibles															
All Ages	265	0.3	1,096	0.5	51	4,186	4.3	22,947	0.3	12	475	0.5	2,755	0.4	25
5 and younger	26	0.1	98	0.3	22	1,611	4.9	9,225	0.2	9	3	0.0	26	0.2	13
6-14	78	0.2	331	0.5	74	1,846	5.0	9,887	0.3	13	45	0.1	137	0.7	71
15-20	44	0.3	180	0.4	52	518	3.2	2,833	0.3	13	54	0.3	291	0.4	30
21-44	82	1.0	304	0.5	44	167	2.0	674	0.4	20	223	2.6	1,208	0.3	21
45-64	30	2.1	129	0.4	43	30	2.1	196	0.2	12	140	10.0	990	0.3	22
65-74	3	8.1	36	0.8	12	9	24.3	83	1.2	50	1	2.7	7	0.4	2
75-84	1	1.2	6	0.3	20	3	3.7	25	0.1	8	7	8.5	72	0.5	44
85 and older	1	1.5	12	0.2	0	2	3.0	24	0.7	78	2	3.0	24	1.3	19
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 Mexico, released by CMS in 9/2009. 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>.
 Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription (s) or pharmacy benefit; \$ = Medicaid reimbursement.

Nondual 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 MEXICO, 2006

Beneficiary Characteristics	ANTIDEPRESSANTS					ANTIHYPERTENSIVES					ULCER DRUGS				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Mean Rx \$ Benefit per Benefit Month		Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Mean Rx \$ Benefit per Benefit Month		Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Mean Rx \$ Benefit per Benefit Month	
				Month	Month				Month	Month				Month	Month
All	4,733	1.7	30,608	0.4	\$20	1,380	0.5	10,612	0.4	\$53	3,536	1.3	24,364	0.3	\$18
Female															
All Females	3,433	2.0	21,335	0.4	20	798	0.5	6,183	0.4	51	2,317	1.4	16,263	0.3	17
Female, Disabled															
All Ages	1,167	18.5	9,302	0.5	24	459	7.3	4,037	0.4	55	780	12.4	6,439	0.4	26
5 and younger	0	0.0	0	0.0	0	1	0.4	1	1.0	4	6	2.4	41	0.4	47
6-14	18	3.7	141	0.3	13	0	0.0	0	0.0	0	14	2.8	122	0.6	26
15-20	32	6.8	300	0.3	14	2	0.4	13	0.3	13	26	5.6	241	0.3	22
21-44	351	19.1	2,473	0.5	22	50	2.7	433	0.5	59	179	9.8	1,329	0.5	34
45-64	741	24.2	6,172	0.5	25	390	12.7	3,422	0.4	54	525	17.2	4,434	0.4	24
65-74	20	14.7	176	0.5	44	15	11.0	166	0.4	69	24	17.6	236	0.4	14
75-84	5	11.4	40	0.7	57	1	2.3	2	1.0	110	5	11.4	24	0.8	20
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	5.3	12	0.1	1
Female, Other Eligibles															
All Ages	2,266	1.4	12,033	0.3	16	339	0.2	2,146	0.4	43	1,537	0.9	9,824	0.2	11
5 and younger	2	0.0	15	0.1	3	27	0.1	57	0.5	8	120	0.4	548	0.3	10
6-14	118	0.3	802	0.3	9	2	0.0	13	0.2	6	154	0.4	1,126	0.2	5
15-20	304	1.3	1,824	0.3	14	5	0.0	14	0.5	35	203	0.9	1,268	0.2	5
21-44	1,461	2.2	6,913	0.3	15	126	0.2	781	0.3	33	826	1.2	5,163	0.2	9
45-64	359	6.4	2,235	0.4	22	163	2.9	1,148	0.4	51	200	3.5	1,387	0.3	25
65-74	8	12.1	76	0.9	32	6	9.1	48	0.6	43	8	12.1	84	0.7	40
75-84	6	5.8	72	0.6	12	9	8.7	73	0.7	71	14	13.5	112	0.5	22
85 and older	8	5.5	96	0.5	27	1	0.7	12	0.2	13	12	8.3	136	0.5	33
Male															
All Males	1,300	1.3	9,273	0.4	20	582	0.6	4,429	0.4	55	1,219	1.2	8,101	0.4	21
Male, Disabled															
All Ages	720	10.3	6,083	0.4	23	372	5.3	3,328	0.5	61	570	8.2	4,773	0.4	26
5 and younger	1	0.2	12	0.2	4	0	0.0	0	0.0	0	25	5.8	179	0.2	13
6-14	61	6.5	613	0.4	13	0	0.0	0	0.0	0	25	2.7	271	0.3	29
15-20	47	6.3	431	0.3	9	0	0.0	0	0.0	0	25	3.3	221	0.4	18
21-44	237	11.4	1,918	0.4	24	71	3.4	625	0.4	54	142	6.8	1,078	0.4	25
45-64	364	13.8	3,014	0.5	26	294	11.2	2,623	0.5	63	341	12.9	2,904	0.4	28
65-74	8	9.6	78	0.5	30	6	7.2	68	0.7	53	9	10.8	90	0.6	39
75-84	2	5.6	17	0.8	45	1	2.8	12	0.3	71	3	8.3	30	0.6	12
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 MEXICO, 2006

Beneficiary Characteristics	ANTIDEPRESSANTS					ANTIHYPERLIPIDEMIC					ULCER DRUGS				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Mean Rx \$ Benefit per Benefit Month		Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Mean Rx \$ Benefit per Benefit Month		Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Mean Rx \$ Benefit per Benefit Month	
				Rx per Month	Mean Rx \$ Benefit				Rx per Month	Mean Rx \$ Benefit				Rx per Month	Mean Rx \$ Benefit
Male, Other Eligibles															
All Ages	580	0.6	3,190	0.4	16	210	0.2	1,101	0.3	37	649	0.7	3,328	0.3	13
5 and younger	2	0.0	15	0.1	1	25	0.1	72	0.4	6	161	0.5	696	0.3	14
6-14	175	0.5	1,164	0.3	10	1	0.0	1	1.0	10	117	0.3	742	0.2	7
15-20	145	0.9	859	0.3	14	4	0.0	19	0.3	31	93	0.6	464	0.2	9
21-44	187	2.2	774	0.4	20	94	1.1	474	0.3	37	192	2.2	886	0.3	15
45-64	60	4.3	252	0.5	16	79	5.6	481	0.3	42	65	4.6	343	0.3	15
65-74	3	8.1	36	0.5	17	2	5.4	4	0.5	37	4	10.8	32	0.7	24
75-84	4	4.9	43	1.2	51	4	4.9	40	0.7	43	11	13.4	106	0.5	18
85 and older	4	6.1	47	0.7	57	1	1.5	10	0.1	8	6	9.1	59	0.6	40
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 Mexico, released by CMS in 9/2009. 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>.

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

Nondual 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 MEXICO, 2006

Beneficiary Characteristics	PASSIVE IMMUNIZING AGENTS					ANALGESICS - Narcotic					Number of Beneficiaries	Number of Benefit Months
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month		
All	118	0.0	799	0.3	\$486	10,874	4.0	73,110	0.3	\$5	273,499	1,301,635
Female												
All Females	50	0.0	375	0.3	481	7,631	4.5	51,666	0.3	5	170,124	862,140
Female, Disabled												
All Ages	9	0.1	97	0.3	1,177	1,514	24.0	12,240	0.4	12	6,306	43,884
5 and younger	7	2.8	73	0.2	477	1	0.4	12	0.1	0	251	1,561
6-14	0	0.0	0	0.0	0	14	2.8	137	0.1	1	492	3,801
15-20	0	0.0	0	0.0	0	42	9.0	424	0.1	1	468	3,441
21-44	2	0.1	24	0.6	3,307	422	23.0	2,915	0.4	12	1,835	11,852
45-64	0	0.0	0	0.0	0	1,004	32.8	8,410	0.4	12	3,061	21,115
65-74	0	0.0	0	0.0	0	28	20.6	310	0.3	20	136	1,451
75-84	0	0.0	0	0.0	0	3	6.8	32	0.6	14	44	446
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	19	217
Female, Other Eligibles												
All Ages	41	0.0	278	0.2	238	6,117	3.7	39,426	0.2	3	163,818	818,256
5 and younger	34	0.1	218	0.3	298	94	0.3	649	0.2	1	32,106	119,839
6-14	0	0.0	0	0.0	0	390	1.1	2,785	0.1	1	36,077	152,578
15-20	2	0.0	11	0.2	24	944	4.1	6,103	0.2	1	23,181	104,276
21-44	5	0.0	49	0.1	18	4,040	6.1	25,023	0.2	3	66,500	404,110
45-64	0	0.0	0	0.0	0	622	11.0	4,591	0.3	4	5,639	35,141
65-74	0	0.0	0	0.0	0	7	10.6	64	0.6	18	66	428
75-84	0	0.0	0	0.0	0	13	12.5	127	0.3	3	104	919
85 and older	0	0.0	0	0.0	0	7	4.8	84	0.4	7	145	965
Male												
All Males	68	0.1	424	0.3	490	3,243	3.1	21,444	0.3	5	103,374	439,493
Male, Disabled												
All Ages	17	0.2	147	0.3	613	1,083	15.6	8,305	0.3	8	6,959	47,175
5 and younger	16	3.7	135	0.3	415	4	0.9	37	0.1	1	431	2,815
6-14	0	0.0	0	0.0	0	27	2.9	282	0.1	1	941	7,381
15-20	0	0.0	0	0.0	0	36	4.8	361	0.2	1	751	5,600
21-44	0	0.0	0	0.0	0	386	18.6	2,708	0.3	7	2,075	13,365
45-64	1	0.0	12	0.3	2,831	616	23.4	4,773	0.3	9	2,635	16,704
65-74	0	0.0	0	0.0	0	12	14.5	126	0.3	2	83	844
75-84	0	0.0	0	0.0	0	2	5.6	18	0.5	7	36	390
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	7	76

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 MEXICO, 2006

Beneficiary Characteristics	PASSIVE IMMUNIZING AGENTS						ANALGESICS - Narcotic					
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of		Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of		Number of Beneficiaries	Number of Benefit Months
				Rx per Month	Mean Rx \$ per Benefit Month				Rx per Month	Mean Rx \$ per Benefit Month		
Male, Other Eligibles												
All Ages	51	0.1	277	0.3	425	2,160	2.2	13,139	0.2	3	96,415	392,318
5 and younger	48	0.1	263	0.3	429	162	0.5	1,090	0.2	1	32,816	121,190
6-14	2	0.0	2	1.0	2,498	427	1.1	3,299	0.1	1	37,222	158,275
15-20	0	0.0	0	0.0	0	502	3.1	3,377	0.2	1	16,230	71,828
21-44	1	0.0	12	0.1	3	869	10.1	4,294	0.3	5	8,562	33,607
45-64	0	0.0	0	0.0	0	195	13.9	1,028	0.3	4	1,400	5,904
65-74	0	0.0	0	0.0	0	2	5.4	24	0.5	5	37	275
75-84	0	0.0	0	0.0	0	2	2.4	15	0.5	5	82	751
85 and older	0	0.0	0	0.0	0	1	1.5	12	0.1	0	66	488
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	2

Source: Data for this table are from the MAX 2006 file for New Mexico, released by CMS in 9/2009. 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>.

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

Nondual 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 MEXICO, 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	\$388	6.4	341	3,699
Age				
0-64	482	7.6	231	2,540
65-74	283	5.4	41	444
75-84	120	3.0	29	280
85 and older	114	2.6	40	435
Unknown	0	0.0	0	0
Gender				
Female	382	6.7	187	2,077
Male	395	6.1	154	1,622
Unknown	0	0.0	0	0
Race				
White	455	7.5	165	1,783
African American	425	8.9	7	67
Other/unknown	322	5.3	169	1,849
Basis of Eligibility^c				
Aged	141	3.4	78	825
Disabled	458	7.3	263	2,874
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 Mexico, released by CMS in 9/2009. 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 264 beneficiaries who were in nursing facilities for part of their enrollment and their 2,117 benefit months were excluded from the analysis. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

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

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

Nondual 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 MEXICO, 2006

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per Rx				Users		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	Total Number of Rx	Total Rx \$		Number of Users	As a Percentage of All-Year Nursing Facility Residents
Anti-infective Agents	0.4	0.1	0.0	0.3	\$33	\$21	\$2	\$10	\$75	\$199	\$129	\$32	772	\$58,171	160	46.9	1,788
Biologicals	0.1	0.0	0.0	0.1	3	0	0	3	34	27	0	36	46	1,566	46	13.5	532
Antineoplastic Agents	0.3	0.0	0.0	0.3	15	0	0	15	57	0	0	57	9	513	4	1.2	35
Endocrine/Metabolic Drugs	1.4	0.4	0.1	0.9	53	41	2	10	38	92	38	11	2,329	88,036	149	43.7	1,663
Cardiovascular Agents	1.8	0.5	0.1	1.3	53	37	2	14	29	79	30	11	3,655	107,092	184	54.0	2,022
Respiratory Agents	0.8	0.4	0.0	0.4	44	33	1	10	55	90	60	24	1,103	61,187	127	37.2	1,391
Gastrointestinal Agents	1.0	0.3	0.0	0.7	50	32	2	15	51	104	244	23	1,923	98,129	177	51.9	1,965
Genitourinary Agents	0.7	0.3	0.1	0.3	44	27	5	12	60	86	67	34	530	31,536	61	17.9	712
CNS Drugs	2.0	1.1	0.1	0.8	201	180	7	14	101	170	70	17	5,510	557,883	246	72.1	2,774
Stimulants/Anti-obesity/Aorexia	0.7	0.1	0.0	0.6	20	13	0	7	30	230	0	12	24	718	3	0.9	36
Miscellaneous Psychological/Neurological Agents	0.8	0.8	0.0	0.0	224	223	0	1	266	267	0	166	268	71,376	27	7.9	319
Analgesics and Anesthetics	1.1	0.3	0.1	0.8	54	27	9	18	51	104	168	24	1,761	89,231	148	43.4	1,657
Neuromuscular Agents	1.5	0.4	0.1	1.0	86	48	2	36	57	134	20	34	3,007	171,387	178	52.2	1,996
Nutritional Products	0.8	0.0	0.0	0.8	9	0	0	9	11	0	0	11	728	8,082	82	24.0	919
Hematological Agents	1.0	0.1	0.0	0.9	48	36	0	12	48	335	14	14	986	47,719	91	26.7	990
Topical Products	0.5	0.1	0.1	0.3	19	8	6	6	40	80	60	20	895	35,461	161	47.2	1,819
Miscellaneous Products	0.4	0.1	0.0	0.3	11	7	0	4	29	53	0	17	106	3,082	23	6.7	272
Unknown Therapeutic Category	0.4	0.0	0.0	0.0	10	0	0	0	24	0	0	0	109	2,660	22	6.5	254
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.	23,761	1,433,829	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2006 file for New Mexico, released by CMS in 9/2009. 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 264 beneficiaries who were in nursing facilities for part of their enrollment and their 2,117 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 Mexico, 1.5 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.

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

Nondual Medicaid Beneficiaries

TABLE ND.10
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS,
 BY TOP-10 DRUG GROUP^{a, b, c, d}
 NONDUAL BENEFICIARIES, NEW MEXICO, 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	\$423,303	215	63.0	2,480	1.0	\$179	\$171	
ANTICONVULSANT	148,214	178	52.2	2,050	1.0	72	72	
ANTIDEPRESSANTS	113,803	211	61.9	2,392	0.8	57	48	
ULCER DRUGS	80,262	173	50.7	1,916	0.7	57	42	
ANTIDIABETIC	73,299	141	41.3	1,527	0.9	52	48	
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	71,489	35	10.3	415	0.7	259	172	
ANTIHYPERLIPIDEMIC	50,311	72	21.1	806	0.8	75	62	
ANALGESICS - Narcotic	48,215	137	40.2	1,555	0.7	46	31	
ANTIASTHMATIC	40,816	104	30.5	1,163	0.5	68	35	
DERMATOLOGICAL	29,588	348	102.1	3,926	0.2	31	8	
Total	1,079,300	1,614	n.a.	18,230	n.a.	n.a.	n.a.	

Source: Data for this table are from the MAX 2006 file for New Mexico, released by CMS in 9/2009. 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 264 beneficiaries who were in nursing facilities for part of their enrollment and their 2,117 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 MEXICO, 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	12,774	\$1,079,300	215	63.0	2,480	1.0	\$171	178	52.2	2,050	1.0	\$72
Female												
All Females	7,284	596,295	122	65.2	1,391	1.0	153	86	46.0	984	1.1	77
Female, Disabled												
All Ages	6,423	551,588	111	80.4	1,259	1.0	161	81	58.7	924	1.1	79
64 or younger	5,897	514,035	101	83.5	1,147	1.0	166	73	60.3	828	1.1	84
65-74	489	35,237	9	81.8	108	0.9	112	8	72.7	96	1.4	38
75-84	37	2,316	1	25.0	4	1.0	120	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	861	44,707	11	22.4	132	0.7	81	5	10.2	60	0.9	46
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	402	22,631	6	46.2	72	0.7	95	3	23.1	36	0.8	19
75-84	184	9,732	3	20.0	36	0.8	93	1	6.7	12	1.1	117
85 and older	275	12,344	2	9.5	24	0.5	18	1	4.8	12	1.0	56
Male												
All Males	5,490	483,005	93	60.4	1,089	0.9	193	92	59.7	1,066	0.9	68
Male, Disabled												
All Ages	4,879	443,598	81	64.8	950	1.0	206	89	71.2	1,030	0.9	70
64 or younger	4,548	417,000	75	68.2	888	1.0	207	83	75.5	958	0.9	72
65-74	290	24,967	6	50.0	62	0.8	199	6	50.0	72	0.9	45
75-84	18	128	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	23	1,503	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male, Other Eligibles												
All Ages	611	39,407	12	41.4	139	0.6	102	3	10.3	36	0.8	12
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	242	13,226	6	120.0	67	0.4	80	3	60.0	36	0.8	12
75-84	128	7,286	1	11.1	12	1.3	113	0	0.0	0	0.0	0
85 and older	241	18,895	5	33.3	60	0.7	124	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 Mexico, released by CMS in 9/2009. 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 264 beneficiaries who were in nursing facilities for part of their enrollment and their 2,117 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 MEXICO, 2006

Beneficiary Characteristics	ANTIDEPRESSANTS					ULCER DRUGS					ANTIDIABETIC				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
All	211	61.9	2,392	0.8	\$48	173	50.7	1,916	0.7	\$42	141	41.3	1,527	0.9	\$48
Female															
All Females	125	66.8	1,438	0.9	48	102	54.5	1,138	0.7	40	83	44.4	905	0.9	48
Female, Disabled															
All Ages	110	79.7	1,258	0.9	51	81	58.7	903	0.8	42	68	49.3	725	0.9	53
64 or younger	104	86.0	1,194	0.9	49	75	62.0	860	0.7	42	63	52.1	675	0.9	51
65-74	4	36.4	48	0.9	109	3	27.3	36	1.2	27	4	36.4	48	1.0	82
75-84	2	50.0	16	1.0	83	3	75.0	7	1.0	21	1	25.0	2	1.5	50
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	30.6	180	0.7	27	21	42.9	235	0.6	36	15	30.6	180	0.7	28
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	38.5	60	0.9	31	6	46.2	72	0.7	32	8	61.5	96	0.8	33
75-84	3	20.0	36	0.7	10	4	26.7	39	0.7	41	3	20.0	36	0.3	4
85 and older	7	33.3	84	0.5	31	11	52.4	124	0.6	36	4	19.0	48	0.7	35
Male															
All Males	86	55.8	954	0.8	47	71	46.1	778	0.7	44	58	37.7	622	1.0	48
Male, Disabled															
All Ages	79	63.2	870	0.8	46	58	46.4	637	0.8	47	53	42.4	567	1.0	49
64 or younger	77	70.0	849	0.8	47	54	49.1	589	0.8	47	50	45.5	534	0.9	48
65-74	2	16.7	21	0.8	32	3	25.0	36	0.9	66	3	25.0	33	1.7	71
75-84	0	0.0	0	0.0	0	1	100.0	12	0.9	7	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	7	24.1	84	0.8	48	13	44.8	141	0.6	31	5	17.2	55	1.0	44
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	2	40.0	24	0.6	16	3	60.0	31	0.6	20	1	20.0	7	0.4	2
75-84	2	22.2	24	1.2	59	6	66.7	64	0.6	24	2	22.2	24	0.9	81
85 and older	3	20.0	36	0.8	63	4	26.7	46	0.7	47	2	13.3	24	1.3	19
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 Mexico, released by CMS in 9/2009. 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 264 beneficiaries who were in nursing facilities for part of their enrollment and their 2,117 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 MEXICO, 2006

Beneficiary Characteristics	MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL						ANTHYPERLIPIDEMIC						ANALGESICS - Narcotic					
	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	35	10.3	415	0.7	\$172		72	21.1	806	0.8	\$62		137	40.2	1,555	0.7	\$31	
Female																		
All Females	24	12.8	284	0.6	184		39	20.9	438	0.9	61		93	49.7	1,081	0.7	34	
Female, Disabled																		
All Ages	19	13.8	224	0.7	214		34	24.6	378	0.9	62		77	55.8	889	0.7	40	
64 or younger	17	14.0	200	0.7	225		32	26.4	364	0.9	62		73	60.3	841	0.7	37	
65-74	2	18.2	24	0.8	117		1	9.1	12	0.7	52		4	36.4	48	0.9	96	
75-84	0	0.0	0	0.0	0		1	25.0	2	1.0	110		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	5	10.2	60	0.5	72		5	10.2	60	0.8	56		16	32.7	192	0.5	10	
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	4	30.8	48	0.6	89		2	15.4	24	0.8	36		4	30.8	48	0.6	22	
75-84	1	6.7	12	0.2	6		2	13.3	24	1.0	97		5	33.3	60	0.4	3	
85 and older	0	0.0	0	0.0	0		1	4.8	12	0.2	13		7	33.3	84	0.4	7	
Male																		
All Males	11	7.1	131	0.7	147		33	21.4	368	0.8	64		44	28.6	474	0.7	23	
Male, Disabled																		
All Ages	9	7.2	107	0.7	155		30	24.0	334	0.8	67		41	32.8	438	0.8	25	
64 or younger	8	7.3	95	0.7	159		28	25.5	313	0.8	67		39	35.5	414	0.8	26	
65-74	1	8.3	12	0.8	126		2	16.7	21	0.9	67		2	16.7	24	0.1	1	
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	6.9	24	0.7	114		3	10.3	34	0.7	32		3	10.3	36	0.4	3	
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	1	20.0	12	1.0	164		0	0.0	0	0.0	0		2	40.0	24	0.5	5	
75-84	0	0.0	0	0.0	0		2	22.2	24	1.0	42		0	0.0	0	0.0	0	
85 and older	1	6.7	12	0.4	63		1	6.7	10	0.1	8		1	6.7	12	0.1	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 Mexico, released by CMS in 9/2009. 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 264 beneficiaries who were in nursing facilities for part of their enrollment and their 2,117 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 MEXICO, 2006

Beneficiary Characteristics	ANITIASTHMATIC					DERMATOLOGICAL					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	104	30.5	1,163	0.5	\$35	348	102.1	3,926	0.2	\$8	341	3,699
Female												
All Females	52	27.8	588	0.4	33	187	100.0	2,128	0.2	6	187	2,077
Female, Disabled												
All Ages	43	31.2	484	0.4	37	162	117.4	1,840	0.2	6	138	1,542
64 or younger	40	33.1	448	0.4	39	144	119.0	1,650	0.2	6	121	1,367
65-74	3	27.3	36	0.1	4	14	127.3	168	0.2	7	11	132
75-84	0	0.0	0	0.0	0	4	100.0	22	0.2	2	4	19
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	24
Female, Other Eligibles												
All Ages	9	18.4	104	0.5	16	25	51.0	288	0.3	7	49	535
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	6	46.2	72	0.6	19	4	30.8	48	0.4	4	13	144
75-84	0	0.0	0	0.0	0	10	66.7	120	0.2	3	15	160
85 and older	3	14.3	32	0.3	10	11	52.4	120	0.4	12	21	231
Male												
All Males	52	33.8	575	0.6	37	161	104.5	1,798	0.3	9	154	1,622
Male, Disabled												
All Ages	43	34.4	472	0.5	33	131	104.8	1,453	0.3	9	125	1,332
64 or younger	40	36.4	436	0.5	34	112	101.8	1,233	0.3	9	110	1,173
65-74	3	25.0	36	0.4	16	15	125.0	174	0.1	3	12	124
75-84	0	0.0	0	0.0	0	2	200.0	24	0.3	2	1	12
85 and older	0	0.0	0	0.0	0	2	100.0	22	1.0	68	2	23
Male, Other Eligibles												
All Ages	9	31.0	103	1.1	58	30	103.4	345	0.3	12	29	290
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	6	120.0	67	1.4	61	11	220.0	117	0.2	3	5	44
75-84	1	11.1	12	0.1	5	1	11.1	12	0.1	1	9	89
85 and older	2	13.3	24	0.7	78	18	120.0	216	0.4	18	15	157
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 Mexico, released by CMS in 9/2009. 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 264 beneficiaries who were in nursing facilities for part of their enrollment and their 2,117 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 MEXICO, 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	20,084	7.3	0.2	63,192	\$2	\$559,440	\$9	4.4	273,499	
Age										
5 and younger	6,276	9.6	0.2	14,926	2	129,909	9	13.0	65,604	
6-14	4,788	6.4	0.1	10,307	2	116,376	11	9.1	74,732	
15-20	2,291	5.6	0.1	5,085	1	46,296	9	4.4	40,631	
21-44	4,327	5.5	0.2	13,566	1	115,951	9	2.6	78,972	
45-64	2,158	16.9	1.3	16,432	10	130,319	8	2.8	12,735	
65-74	114	35.4	4.6	1,489	32	10,163	7	4.1	322	
75-84	68	25.6	2.4	646	21	5,595	9	6.3	266	
85 and older	62	26.2	3.1	741	20	4,831	7	8.3	237	
Unknown	0	0.0	0.0	0	0	0	0	0.0	0	
Basis of Eligibility^c										
Aged	117	24.0	3.1	1,493	23	11,096	7	6.7	488	
Disabled	3,006	22.7	1.8	23,888	18	232,805	10	3.6	13,265	
Adults	4,278	4.9	0.1	9,843	1	78,701	8	2.4	88,206	
Children	12,548	7.3	0.2	27,418	1	231,669	8	9.6	171,219	
Unknown	135	42.1	1.7	550	16	5,169	9	1.1	321	
Gender										
Female	12,125	7.1	0.2	38,669	2	324,521	8	4.0	170,124	
Male	7,959	7.7	0.2	24,523	2	234,919	10	5.0	103,374	
Unknown	0	0.0	0.0	0	0	0	0	0.0	1	
Race										
White	2,473	4.8	0.2	8,806	2	92,205	10	3.1	51,870	
African American	207	4.0	0.1	443	1	5,288	12	3.7	5,174	
Other/unknown	17,404	8.0	0.2	53,943	2	461,947	9	4.8	216,455	
Use of Nursing Facilities^d										
Entire year	289	84.8	17.4	5,921	142	48,412	8	3.4	341	
Part year	182	68.9	7.6	2,010	75	19,864	10	3.2	264	
None	19,613	7.2	0.2	55,261	2	491,164	9	4.6	272,894	
Maintenance Assistance Status										
Cash	8,831	10.1	0.4	36,910	4	332,083	9	4.3	87,535	
Medically needy	0	0.0	0.0	0	0	0	0	0.0	0	
Poverty related	8,086	7.2	0.1	16,705	1	143,659	9	6.0	113,091	
Other/unknown	3,167	4.3	0.1	9,577	1	83,698	9	3.1	72,873	

Source: Data for this table are from the MAX 2006 file for New Mexico, released by CMS in 9/2009. 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.

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

TABLE ND.12
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
 AMONG NONDUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a,b}
 NEW MEXICO, 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	0.0	\$0	\$9	\$0	\$0	1,301,635
Age						
5 and younger	0.1	1	9	0	0	245,405
6-14	0.0	0	11	0	0	322,035
15-20	0.0	0	9	0	0	185,147
21-44	0.0	0	9	0	0	462,934
45-64	0.2	2	8	0	0	78,864
65-74	0.5	3	7	0	0	2,998
75-84	0.3	2	9	0	1	2,506
85 and older	0.4	3	7	0	0	1,746
Unknown	0.0	0	0	0	0	0
Basis of Eligibility^c						
Aged	0.4	3	7	0	0	3,785
Disabled	0.3	3	10	0	0	91,059
Adults	0.0	0	8	0	0	507,804
Children	0.0	0	8	0	0	696,097
Unknown	0.2	2	9	0	1	2,890
Gender						
Female	0.0	0	8	0	0	862,140
Male	0.1	1	10	0	0	439,493
Unknown	0.0	0	0	0	0	2
Race						
White	0.1	1	10	0	0	175,386
African American	0.0	0	12	0	0	14,342
Other/unknown	0.0	0	9	0	0	1,111,907
Use of Nursing Facilities^d						
Entire year	1.6	13	8	0	2	3,699
Part year	0.9	9	10	0	2	2,117
None	0.0	0	9	0	0	1,295,819
Maintenance Assistance Status						
Cash	0.1	1	9	0	0	410,336
Medically needy	0.0	0	0	0	0	0
Poverty related	0.0	0	9	0	0	451,339
Other/unknown	0.0	0	9	0	0	439,960

Source: Data for this table are from the MAX 2006 file for New Mexico, released by CMS in 9/2009. 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 MEXICO, 2006

Drug Category	Number of Users	Rx \$ per User	Total Rx \$	Rx \$ as a		Number Rx as a	
				Percentage of All Part D Excluded Rx \$	Total Number Rx. \$ per Rx	Percentage of All Part D Excluded Rx	Excluded Rx
All	23,193	\$24	\$559,440	100.0	63,192	\$9	100.0
Anorexia or weight loss/gain	0	0	0	0.0	0	0	0.0
Fertility drugs	0	0	0	0.0	0	0	0.0
Drugs for cosmetic purposes	0	0	0	0.0	0	0	0.0
Cough and cold medications	3,897	23	89,374	16.0	4,352	21	6.9
Vitamins and minerals	1,183	37	43,762	7.8	3,072	14	4.9
Non-prescription drugs	15,055	23	344,007	61.5	48,632	7	77.0
Barbiturates	128	40	5,129	0.9	704	7	1.1
Benzodiazepines	2,049	22	44,729	8.0	5,222	9	8.3
Other Part D Excl Rx Drugs	881	37	32,439	5.8	1,210	27	1.9

Source: Data for this table are from the MAX 2006 file for New Mexico, released by CMS in 9/2009. 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 MEXICO, 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	454,337	606	37,930	112,188	303,292	321	4,313,153	5,317	412,089	977,664	2,915,185	2,898
Age												
5 and younger	117,304	1	1,953	0	115,350	0	1,088,370	7	21,395	0	1,066,968	0
6-14	134,966	0	4,869	0	130,097	0	1,367,401	0	55,910	0	1,311,491	0
15-20	69,165	0	3,825	7,499	57,841	0	646,077	0	42,691	66,671	536,715	0
21-44	106,487	0	11,103	95,288	3	93	954,085	0	119,936	833,372	8	769
45-64	25,072	3	15,461	9,382	0	226	243,780	26	164,138	77,492	0	2,124
65-74	726	129	582	13	0	2	7,805	1,188	6,529	83	0	5
75-84	354	242	108	4	0	0	3,596	2,398	1,172	26	0	0
85 and older	262	231	29	2	0	0	2,036	1,698	318	20	0	0
Unknown	1	0	0	0	1	0	3	0	0	0	3	0
Gender												
Female	266,906	364	19,031	96,414	150,776	321	2,521,531	3,103	209,313	854,417	1,451,800	2,898
Male	187,430	242	18,899	15,774	152,515	0	1,791,620	2,214	202,776	123,247	1,463,383	0
Unknown	1	0	0	0	1	0	2	0	0	0	2	0
Race												
White	99,018	206	11,200	27,559	59,914	139	914,619	1,481	118,704	232,441	560,746	1,247
African American	9,920	4	987	2,428	6,500	1	92,276	28	10,332	20,750	61,161	5
Other/unknown	345,399	396	25,743	82,201	236,878	181	3,306,258	3,808	283,053	724,473	2,293,278	1,646
Use of Nursing Facilities^c												
Entire year	341	78	263	0	0	0	3,721	825	2,896	0	0	0
Part year	265	43	218	4	0	0	2,573	388	2,153	32	0	0
None	453,731	485	37,449	112,184	303,292	321	4,306,859	4,104	407,040	977,632	2,915,185	2,898
Maintenance Assistance Status												
Cash	155,363	286	35,821	45,312	73,944	0	1,537,771	3,088	392,195	406,316	736,172	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0
Poverty related	195,742	4	1,213	8,725	185,479	321	1,843,153	23	12,063	59,691	1,768,478	2,898
Other/unknown	103,232	316	896	58,151	43,869	0	932,229	2,206	7,831	511,657	410,535	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	114,694	455	7,633	48,799	57,489	318	915,392	3,711	73,919	371,611	463,276	2,875
FFS part year, with Rx claims	30,838	16	2,296	11,408	17,117	1	304,434	161	21,817	112,732	169,712	12
FFS part year, no Rx claims	127,967	17	3,336	27,999	96,613	2	1,254,699	127	31,746	271,033	951,782	11
MC all year, with Rx claims	337	0	47	39	251	0	3,414	0	546	419	2,449	0
MC all year, no Rx claims	180,501	118	24,618	23,943	131,822	0	1,835,214	1,318	284,061	221,869	1,327,966	0

Source: Data for this table are from the MAX 2006 file for New Mexico, released by CMS in 9/2009. 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 MEXICO, 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	454,337	4,313,153	273,499	1,301,635	0	3,011,518
Fee-for-service (FFS) all year	114,694	915,392	114,694	915,392	0	0
FFS part year, with Rx claims	30,838	304,434	30,838	88,161	0	216,273
FFS part year, with no Rx claims	127,967	1,254,699	127,967	298,082	0	956,617
Managed care (MC) all year, with Rx claims	337	3,414	0	0	0	3,414
MC all year, with no Rx claims	180,501	1,835,214	0	0	0	1,835,214

Source: Data for this table are from the MAX 2006 file for New Mexico, released by CMS in 9/2009. 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