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STATISTICAL COMPENDIUM:
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2007
GEORGIA

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TABLE D.2
CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a, b}
DUAL ELIGIBLE BENEFICIARIES, GEORGIA, 2007

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown
All	153,778	65,822	86,948	817	37	154	1,637,587	679,319	953,439	3,234	365	1,230
Age												
5 and younger	15	0	14	0	1	0	174	0	162	0	12	0
6-14	27	0	26	0	1	0	303	0	292	0	11	0
15-20	335	0	318	4	13	0	3,622	0	3,476	17	129	0
21-44	24,646	0	24,001	605	14	26	264,452	0	261,591	2,523	129	209
45-64	37,360	0	37,074	188	5	93	400,062	0	398,718	571	48	725
65-74	35,480	18,268	17,156	19	2	35	384,120	188,635	195,045	120	24	296
75-84	31,684	25,039	6,644	1	0	0	339,550	264,118	75,429	3	0	0
85 and older	24,231	22,515	1,715	0	1	0	245,304	226,566	18,726	0	12	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	103,009	49,226	52,964	643	22	154	1,105,718	514,524	587,078	2,663	223	1,230
Male	50,769	16,596	33,984	174	15	0	531,869	164,795	366,361	571	142	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	68,306	32,825	35,017	383	22	59	711,632	327,677	381,878	1,408	198	471
African American	64,496	23,063	40,913	423	12	85	696,284	243,607	450,064	1,786	131	696
Other/unknown	20,976	9,934	11,018	11	3	10	229,671	108,035	121,497	40	36	63
Use of Nursing Facilities^c												
Entire year	19,183	16,689	2,494	0	0	0	200,540	173,594	26,946	0	0	0
Part year	12,755	10,717	2,037	1	0	0	121,651	101,562	20,087	2	0	0
None	121,840	38,416	82,417	816	37	154	1,315,396	404,163	906,406	3,232	365	1,230
Maintenance Assistance Status												
Cash	92,695	27,154	65,031	509	1	0	1,039,471	303,501	734,385	1,575	10	0
Medically needy	2,259	678	1,581	0	0	0	14,699	4,580	10,119	0	0	0
Poverty-related	5,659	1,926	3,342	221	16	154	55,895	19,886	33,326	1,314	139	1,230
Other/unknown	53,165	36,064	16,994	87	20	0	527,522	351,352	175,609	345	216	0
Dual Medicare Status^d												
Full dual, all year	144,925	61,416	82,533	785	37	154	1,546,993	633,407	909,090	2,901	365	1,230
Full dual, part year	8,853	4,406	4,415	32	0	0	90,594	45,912	44,349	333	0	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	152,254	65,576	86,226	347	32	73	1,630,870	678,045	949,698	1,973	337	817
FFS part year, with Rx claims	1,064	160	500	349	3	52	4,735	817	2,657	989	19	253
FFS part year, no Rx claims	460	86	222	121	2	29	1,982	457	1,084	272	9	160

Source: Data for this table are from the MAX 2007 file for Georgia, released by CMS in 4/2010. This table was produced on 10/06/2010.

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

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

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

d. The "Full dual, all year" group contains beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefits during all months of Medicaid enrollment in 2007. The "Full dual, part year" group contains beneficiaries who had such benefits for some, but not all, months of their enrollment. Refer to footnote g of Table 1 for more information about how we determined dual eligibility status.

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

TABLE D.3
ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC^{a, b}
DUAL ELIGIBLE BENEFICIARIES, GEORGIA, 2007

Beneficiary Characteristics	Percentage with at		Mean Rx \$		Mean \$, All Medicaid		Rx \$ as a Percentage	Number of Beneficiaries
	Least One Rx	Mean Number of Rx	Mean Rx \$	\$ per Rx	FFS \$ ^c	of All Medicaid FFS \$ ^d		
All	28.4	3.5	\$170	\$49	\$10,219	1.7	153,778	
Age								
5 and younger	53.3	3.8	825	217	7,516	11.0	15	
6-14	51.9	18.6	3,008	162	25,816	11.7	27	
15-20	65.7	12.4	3,706	298	10,352	35.8	335	
21-44	30.3	3.8	290	76	6,576	4.4	24,646	
45-64	32.6	4.8	226	47	8,320	2.7	37,360	
65-74	26.6	4.2	191	45	7,390	2.6	35,480	
75-84	24.3	2.0	45	23	11,924	0.4	31,684	
85 and older	27.4	2.0	41	21	18,748	0.2	24,231	
Unknown	0.0	0.0	0	0	0	0.0	0	
Basis of Eligibility^e								
Aged	26.2	2.2	59	26	14,356	0.4	65,822	
Disabled	29.8	4.4	253	57	7,150	3.5	86,948	
Adults	59.0	4.8	273	57	3,687	7.4	817	
Children	37.8	7.3	798	109	10,325	7.7	37	
Unknown	50.6	4.6	267	58	9,402	2.8	154	
Gender								
Female	29.3	3.5	158	45	10,293	1.5	103,009	
Male	26.6	3.4	193	57	10,068	1.9	50,769	
Unknown	0.0	0.0	0	0	0	0.0	0	
Race								
White	34.4	4.2	177	43	13,522	1.3	68,306	
African American	23.9	2.9	164	57	8,906	1.8	64,496	
Other/unknown	22.7	3.1	163	52	3,499	4.6	20,976	
Use of Nursing Facilities^f								
Entire year	38.6	4.3	111	26	35,448	0.3	19,183	
Part year	45.1	4.2	127	30	21,268	0.6	12,755	
None	25.0	3.3	184	56	5,090	3.6	121,840	
Maintenance Assistance Status								
Cash	25.0	3.3	184	56	4,432	4.1	92,695	
Medically needy	33.1	6.0	435	72	2,825	15.4	2,259	
Poverty related	29.6	3.6	219	61	2,485	8.8	5,659	
Other/unknown	33.9	3.7	129	35	21,447	0.6	53,165	

Source: Data for this table are from the MAX 2007 file for Georgia, released by CMS in 4/2010. This table was produced on 10/06/2010.

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

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

c. In eight states (DE, IA, IL, NE, NY, TN, TX, and WV) the expenditures in this column include only Rx drug expenditures for those enrolled in capitated managed care plans, and not expenditures for other services covered by the plans or long-term-care services not covered by the plans. As a result, the amounts shown in this column for all Medicaid fee-for-service expenditures are lower than they would otherwise be.

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

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

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

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

TABLE D.4
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a, b}
DUAL ELIGIBLE BENEFICIARIES, GEORGIA, 2007

Beneficiary Characteristics	Number of Rx, Percentage with:									Number		
	Mean Number of Rx	Mean Rx \$	Rx \$ as a Percentage of All Medicaid FFS \$ ^c	More than					Mean \$, All Medicaid FFS \$ ^d	Beneficiaries	Benefit Months	
				None	0, but 1 or Less	1, but 2 or Less	2, but 5 or Less	5, but 10 or Less				More than 10
All	0.3	\$16	1.7	71.6	22.0	2.6	2.5	1.1	0.2	\$960	153,778	1,637,587
Age												
5 and younger	0.3	71	11.0	46.7	53.3	0.0	0.0	0.0	0.0	648	15	174
6-14	1.7	268	11.7	48.1	22.2	0.0	18.5	11.1	0.0	2,301	27	303
15-20	1.1	343	35.8	34.3	38.5	9.9	13.7	3.6	0.0	957	335	3,622
21-44	0.4	27	4.4	69.7	22.3	3.2	3.3	1.2	0.2	613	24,646	264,452
45-64	0.4	21	2.7	67.4	23.8	3.3	3.4	1.7	0.4	777	37,360	400,062
65-74	0.4	18	2.6	73.4	19.6	2.4	2.8	1.5	0.4	683	35,480	384,120
75-84	0.2	4	0.4	75.7	20.9	1.7	1.1	0.5	0.1	1,113	31,684	339,550
85 and older	0.2	4	0.2	72.6	23.7	2.0	1.3	0.5	0.0	1,852	24,231	245,304
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	0.2	6	0.4	73.8	21.8	2.1	1.5	0.6	0.1	1,391	65,822	679,319
Disabled	0.4	23	3.5	70.2	22.2	2.8	3.0	1.5	0.3	652	86,948	953,439
Adults	1.2	69	7.4	41.0	20.6	12.0	15.3	8.7	2.4	932	817	3,234
Children	0.7	81	7.7	62.2	21.6	2.7	10.8	2.7	0.0	1,047	37	365
Unknown	0.6	33	2.8	49.4	27.9	7.8	8.4	6.5	0.0	1,177	154	1,230
Gender												
Female	0.3	15	1.5	70.7	23.1	2.5	2.3	1.1	0.2	959	103,009	1,105,718
Male	0.3	18	1.9	73.4	19.9	2.7	2.7	1.1	0.2	961	50,769	531,869
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	0.4	17	1.3	65.6	26.8	3.2	2.7	1.3	0.3	1,298	68,306	711,632
African American	0.3	15	1.8	76.1	18.4	2.1	2.3	1.0	0.2	825	64,496	696,284
Other/unknown	0.3	15	4.6	77.3	17.3	1.9	2.3	1.0	0.2	320	20,976	229,671
Use of Nursing Facilities^f												
Entire year	0.4	11	0.3	61.4	30.2	4.4	2.4	1.2	0.4	3,391	19,183	200,540
Part year	0.4	13	0.6	54.9	36.6	3.8	3.0	1.3	0.3	2,230	12,755	121,651
None	0.3	17	3.6	75.0	19.2	2.1	2.4	1.1	0.2	472	121,840	1,315,396
Maintenance Assistance Status												
Cash	0.3	16	4.1	75.0	19.6	1.9	2.2	1.1	0.2	395	92,695	1,039,471
Medically needy	0.9	67	15.4	66.9	15.5	5.1	7.5	4.3	0.8	434	2,259	14,699
Poverty related	0.4	22	8.8	70.4	21.1	3.9	3.4	1.1	0.1	252	5,659	55,895
Other/unknown	0.4	13	0.6	66.1	26.5	3.4	2.7	1.1	0.3	2,162	53,165	527,522

Source: Data for this table are from the MAX 2007 file for Georgia, released by CMS in 4/2010. This table was produced on 10/06/2010.

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

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

c. In eight states (DE, IA, IL, NE, NY, TN, TX, and WV) the expenditures in this column include only Rx drug expenditures for those enrolled in capitated managed care plans, and not expenditures for other services covered by the plans or long-term-care services not covered by the plans. As a result, the amounts shown in this column for all Medicaid fee-for-service expenditures are lower than they would otherwise be.

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

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

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

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

TABLE D.5
AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC^{a, b, c}
DUAL ELIGIBLE BENEFICIARIES, GEORGIA, 2007

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	0.3	\$16	\$49	0.1	\$11	\$162	0.0	\$1	\$109	0.2	\$3	\$13
Age												
5 and younger	0.3	71	217	0.2	64	414	0.0	1	49	0.2	6	39
6-14	1.7	268	162	0.6	243	425	0.1	6	104	1.0	19	19
15-20	1.1	343	298	0.5	319	660	0.0	9	191	0.6	15	24
21-44	0.4	27	76	0.1	21	230	0.0	1	122	0.3	4	16
45-64	0.4	21	47	0.1	15	149	0.0	2	112	0.3	5	14
65-74	0.4	18	45	0.1	12	131	0.0	2	110	0.3	4	14
75-84	0.2	4	23	0.0	3	94	0.0	0	69	0.2	1	10
85 and older	0.2	4	21	0.0	2	87	0.0	0	79	0.2	2	9
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility^d												
Aged	0.2	6	26	0.0	3	101	0.0	0	80	0.2	2	10
Disabled	0.4	23	57	0.1	17	177	0.0	2	115	0.3	4	15
Adults	1.2	69	57	0.3	46	164	0.0	8	176	0.9	15	16
Children	0.7	81	109	0.2	59	274	0.0	6	116	0.5	13	28
Unknown	0.6	33	58	0.1	21	155	0.0	6	190	0.4	7	17
Gender												
Female	0.3	15	45	0.1	10	153	0.0	1	108	0.3	3	13
Male	0.3	18	57	0.1	14	177	0.0	1	110	0.2	3	14
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Race												
White	0.4	17	43	0.1	12	151	0.0	1	120	0.3	4	13
African American	0.3	15	57	0.1	11	179	0.0	1	99	0.2	3	14
Other/unknown	0.3	15	52	0.1	11	149	0.0	1	101	0.2	3	14
Use of Nursing Facilities^e												
Entire year	0.4	11	26	0.1	7	117	0.0	1	91	0.3	3	10
Part year	0.4	13	30	0.1	8	107	0.0	1	98	0.4	4	11
None	0.3	17	56	0.1	12	172	0.0	1	112	0.2	3	14
Maintenance Assistance Status												
Cash	0.3	16	56	0.1	12	176	0.0	1	113	0.2	3	14
Medically needy	0.9	67	72	0.3	51	196	0.0	6	113	0.6	11	17
Poverty related	0.4	22	61	0.1	16	164	0.0	2	108	0.2	4	17
Other/unknown	0.4	13	35	0.1	9	129	0.0	1	99	0.3	3	11

Source: Data for this table are from the MAX 2007 file for Georgia, released by CMS in 4/2010. This table was produced on 10/06/2010.

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

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

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

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

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

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

TABLE D.6
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, GEORGIA, 2007

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	As a Percentage of Dual Benes	Number of Benefit Months
		Generic	Generic	Generic		Generic	Generic	Generic		Generic							
Anti-infective Agents	0.3	0.1	0.0	0.2	\$33	\$28	\$0	\$4	\$117	\$344	\$125	\$22	19,609	\$2,302,510	6,900	4.5	70,615
Biologicals	0.5	0.5	0.0	0.0	1,192	1,192	0	0	2600	2,600	0	0	11	28,598	2	0.0	24
Antineoplastic Agents	0.3	0.1	0.0	0.2	75	62	0	14	265	894	0	64	1,748	463,771	638	0.4	6,150
Endocrine/Metabolic Drugs	0.5	0.2	0.0	0.3	37	33	0	4	73	163	75	13	33,871	2,463,235	6,618	4.3	66,165
Cardiovascular Agents	0.8	0.2	0.1	0.6	29	13	7	9	34	82	84	15	98,184	3,354,026	11,652	7.6	116,264
Respiratory Agents	0.4	0.2	0.0	0.2	29	23	3	3	67	110	89	18	25,020	1,686,194	5,632	3.7	58,098
Gastrointestinal Agents	0.4	0.2	0.0	0.2	29	22	4	3	74	147	165	14	26,635	1,981,688	6,711	4.4	68,012
Genitourinary Agents	0.3	0.2	0.0	0.1	19	16	2	2	63	81	88	22	5,189	329,007	1,696	1.1	17,024
CNS Drugs	0.6	0.1	0.0	0.5	21	15	1	5	36	180	96	10	164,893	5,940,858	26,923	17.5	286,181
Stimulants/Anti-obesity/Anorexia	0.4	0.3	0.0	0.1	47	44	0	3	122	158	71	26	713	87,270	174	0.1	1,868
Miscellaneous Psychological/Neurological Agents	0.5	0.5	0.0	0.0	79	79	0	0	160	161	0	50	5,166	824,656	1,185	0.8	10,453
Analgesics and Anesthetics	0.5	0.0	0.0	0.4	16	6	4	7	35	295	303	16	40,578	1,419,501	8,722	5.7	86,794
Neuromuscular Agents	0.6	0.1	0.0	0.4	26	18	1	7	47	178	189	15	56,651	2,655,456	9,768	6.4	102,814
Nutritional Products	0.3	0.0	0.0	0.3	4	0	0	4	14	20	16	14	9,337	130,447	3,225	2.1	32,402
Hematological Agents	0.5	0.1	0.0	0.4	15	12	0	3	32	189	0	7	35,809	1,136,364	7,462	4.9	78,239
Topical Products	0.3	0.1	0.0	0.2	15	12	0	4	53	98	80	21	12,023	633,710	4,011	2.6	41,268
Miscellaneous Products	0.4	0.2	0.0	0.1	212	200	0	12	551	812	0	90	1,070	589,265	286	0.2	2,776
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	25	0	0	0	127	0	0	0	747	94,578	339	0.2	3,789
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.	537,254	26,121,134	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2007 file for Georgia, released by CMS in 4/2010. This table was produced on 10/06/2010.

a. Table D.6 includes the beneficiaries represented by Cell G of Table 1. A beneficiary who used drugs from two or more categories was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users.

Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

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

d. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In Georgia, 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 2007.

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

TABLE D.7
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, GEORGIA, 2007

Top 10 Drug Groups	Users			Among Users			
	Total Medicaid Rx \$	Number of Users	As a Percentage of Dual Beneficiaries	Number of Benefit Months	Number of Rx per Benefit Month	\$ per Rx	Rx \$ per Benefit Month
ANTIPSYCHOTICS	\$3,501,960	3,401	2.2	34,223	0.4	\$232	\$102
ANTICONVULSANT	2,322,568	8,607	5.6	91,676	0.5	51	25
ANTIVIRAL	1,630,873	797	0.5	8,363	0.4	522	195
ANTIDIABETIC	1,405,686	5,642	3.7	56,692	0.4	63	25
ANTIASTHMATIC	1,366,726	5,031	3.3	51,918	0.3	84	26
ULCER DRUGS	1,363,951	6,106	4.0	62,649	0.3	70	22
ANTIDEPRESSANTS	1,113,795	6,590	4.3	64,922	0.4	48	17
MISC. ENDOCRINE	1,041,548	849	0.6	8,834	0.3	360	118
ANTIHYPERTENSIVE	1,013,049	8,189	5.3	82,021	0.4	34	12
ANTIHYPERLIPIDEMIC	1,000,849	4,526	2.9	46,984	0.4	59	21
Total	15,761,005	49,738	n.a.	508,282	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2007 file for Georgia, released by CMS in 4/2010. This table was produced on 10/06/2010.

a. Table D.7 includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2007. 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 2007. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

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

Dual Medicaid Beneficiaries

TABLE D.7A
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS COMBINED
 AND FIRST AND SECOND GROUPS SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, GEORGIA, 2007

Beneficiary Characteristics	All Top 10 Drug Groups		ANTIPSYCHOTICS					ANTICONVULSANT				
	Number of Rx	Rx \$	Number of Users	Users as % of Dual Benes	Benefit Number of Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Benefit Number of Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	194,641	\$15,761,005	3,401	2.2	34,223	0.4	\$102	8,607	5.6	91,676	0.5	\$25
Female												
All Females	127,692	9,640,412	1,982	1.9	19,798	0.4	90	5,759	5.6	61,652	0.5	22
Female, Disabled												
All Ages	100,261	8,436,735	1,414	2.7	15,278	0.4	103	4,160	7.9	45,965	0.5	26
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	41	8,540	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	693	745,759	23	17.8	261	0.4	95	36	27.9	403	0.6	110
21-44	20,269	2,166,881	587	5.0	6,408	0.4	112	1,259	10.8	13,584	0.5	38
45-64	47,193	3,348,243	594	2.7	6,183	0.4	87	2,063	9.3	22,677	0.5	20
65-74	30,719	2,121,652	194	1.6	2,248	0.6	129	662	5.4	7,713	0.5	19
75-84	1,121	39,661	12	0.2	144	0.4	31	114	2.1	1,302	0.4	4
85 and older	225	5,999	4	0.3	34	0.2	6	26	1.7	286	0.4	4
Female, Other Eligibles												
All Ages	27,431	1,203,677	568	1.1	4,520	0.4	44	1,599	3.2	15,687	0.5	10
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	5	75	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	52	12,234	2	22.2	24	1.3	227	1	11.1	12	1.5	565
21-44	783	80,923	53	10.0	170	0.4	108	89	16.8	299	0.5	58
45-64	461	27,536	9	4.0	49	0.3	33	31	13.7	138	0.3	17
65-74	9,665	482,857	118	1.0	1,085	0.4	47	436	3.8	4,468	0.5	12
75-84	9,310	347,130	183	1.0	1,523	0.4	42	614	3.3	6,321	0.5	7
85 and older	7,155	252,922	203	1.1	1,669	0.4	34	428	2.2	4,449	0.5	7
Male												
All Males	66,949	6,120,593	1,419	2.8	14,425	0.5	120	2,848	5.6	30,024	0.5	33
Male, Disabled												
All Ages	55,385	5,538,031	1,117	3.3	12,062	0.5	134	2,315	6.8	25,083	0.5	36
5 and younger	14	2,015	0	0.0	0	0.0	0	2	15.4	24	0.1	34
6-14	90	23,361	0	0.0	0	0.0	0	2	10.5	24	0.2	25
15-20	1,267	255,180	43	22.8	493	0.7	232	46	24.3	528	0.7	165
21-44	18,708	2,561,339	682	5.5	7,549	0.5	142	1,082	8.8	11,945	0.5	44
45-64	22,328	1,749,693	327	2.2	3,297	0.4	112	932	6.2	9,710	0.5	25
65-74	12,680	937,117	63	1.3	703	0.5	97	225	4.5	2,565	0.5	21
75-84	293	9,126	2	0.2	20	0.1	15	24	1.8	263	0.5	5
85 and older	5	200	0	0.0	0	0.0	0	2	1.1	24	0.1	1
Male, Other Eligibles												
All Ages	11,564	582,562	302	1.8	2,363	0.4	46	533	3.2	4,941	0.5	15
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	24	3,554	0	0.0	0	0.0	0	2	25.0	24	0.4	88
21-44	270	25,493	10	8.6	43	0.4	122	17	14.7	66	0.4	32
45-64	96	6,652	4	6.8	9	0.4	130	9	15.3	22	0.5	32
65-74	5,780	319,407	91	1.3	803	0.4	60	257	3.7	2,506	0.5	19
75-84	3,647	165,238	123	1.9	973	0.4	39	157	2.4	1,466	0.5	11
85 and older	1,747	62,218	74	2.3	535	0.4	33	91	2.8	857	0.5	8
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 2007 file for Georgia, released by CMS in 4/2010. This table was produced on 10/06/2010.
 a. Table D.7A includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2007. 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 2007. 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.

TABLE D.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}
 DUAL ELIGIBLE BENEFICIARIES, GEORGIA, 2007

Beneficiary Characteristics	ANTIVIRAL					ANTIDIABETIC					ANTIASTHMATIC				
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	797	0.5	8,363	0.4	\$195	5,642	3.7	56,692	0.4	\$25	5,031	3.3	51,918	0.3	\$26
Female															
All Females	408	0.4	4,352	0.3	152	3,901	3.8	39,892	0.4	25	3,380	3.3	35,444	0.3	26
Female, Disabled															
All Ages	369	0.7	4,030	0.3	159	2,807	5.3	30,430	0.4	28	2,727	5.1	29,761	0.3	27
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	1	14.3	12	0.5	243	0	0.0	0	0.0	0	4	57.1	48	0.3	9
15-20	5	3.9	51	0.6	510	9	7.0	108	0.3	32	30	23.3	336	0.2	20
21-44	174	1.5	1,877	0.3	146	358	3.1	3,607	0.4	29	507	4.4	5,356	0.2	18
45-64	139	0.6	1,502	0.3	162	1,471	6.6	15,683	0.4	26	1,371	6.2	14,680	0.3	29
65-74	49	0.4	576	0.3	166	918	7.5	10,475	0.5	30	781	6.4	8,972	0.4	31
75-84	0	0.0	0	0.0	0	45	0.8	485	0.2	7	27	0.5	294	0.2	17
85 and older	1	0.1	12	0.1	1	6	0.4	72	0.1	9	7	0.5	75	0.1	8
Female, Other Eligibles															
All Ages	39	0.1	322	0.2	56	1,094	2.2	9,462	0.3	17	653	1.3	5,683	0.3	18
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	10	1.9	44	0.5	321	58	11.0	206	0.5	31	44	8.3	167	0.4	31
45-64	3	1.3	16	0.2	1	43	18.9	145	0.4	30	40	17.6	182	0.4	31
65-74	16	0.1	162	0.1	20	474	4.1	4,493	0.3	20	249	2.2	2,378	0.2	18
75-84	7	0.0	74	0.1	10	330	1.8	3,030	0.3	12	178	1.0	1,671	0.3	16
85 and older	3	0.0	26	0.1	5	189	1.0	1,588	0.3	13	142	0.7	1,285	0.2	16
Male															
All Males	389	0.8	4,011	0.4	242	1,741	3.4	16,800	0.4	25	1,651	3.3	16,474	0.3	28
Male, Disabled															
All Ages	381	1.1	3,953	0.4	242	1,250	3.7	12,699	0.4	28	1,252	3.7	13,102	0.4	30
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	7.7	12	0.1	4
6-14	3	15.8	36	0.2	84	1	5.3	12	0.2	11	2	10.5	24	0.2	21
15-20	3	1.6	36	0.1	11	1	0.5	12	0.2	18	16	8.5	186	0.4	23
21-44	193	1.6	1,983	0.5	263	248	2.0	2,545	0.3	25	244	2.0	2,506	0.2	18
45-64	150	1.0	1,544	0.4	195	660	4.4	6,228	0.4	25	565	3.8	5,487	0.3	26
65-74	32	0.6	354	0.6	363	336	6.7	3,854	0.5	34	414	8.3	4,778	0.5	40
75-84	0	0.0	0	0.0	0	4	0.3	48	0.4	37	9	0.7	97	0.5	26
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	0.6	12	0.1	15
Male, Other Eligibles															
All Ages	8	0.0	58	0.3	281	491	2.9	4,101	0.3	15	399	2.4	3,372	0.3	20
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	1	0.9	2	3.0	3,779	14	12.1	61	0.5	36	4	3.4	11	0.5	26
45-64	0	0.0	0	0.0	0	13	22.0	24	0.6	57	3	5.1	12	0.4	25
65-74	4	0.1	40	0.2	210	219	3.2	1,936	0.3	17	201	2.9	1,878	0.3	23
75-84	1	0.0	3	0.3	2	182	2.8	1,590	0.3	11	128	2.0	1,016	0.3	20
85 and older	2	0.1	13	0.2	26	63	1.9	490	0.4	13	63	1.9	455	0.2	7
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 2007 file for Georgia, released by CMS in 4/2010. This table was produced on 10/06/2010.
 a. Table D.7B includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2007. 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 2007. 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.

TABLE D.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}
 DUAL ELIGIBLE BENEFICIARIES, GEORGIA, 2007

Beneficiary Characteristics	ULCER DRUGS					ANTIDEPRESSANTS					MISC. ENDOCRINE				
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	6,106	4.0	62,649	0.3	\$22	6,590	4.3	64,922	0.4	\$17	849	0.6	8,834	0.3	\$118
Female															
All Females	4,110	4.0	42,522	0.3	22	4,576	4.4	45,517	0.4	17	711	0.7	7,440	0.3	122
Female, Disabled															
All Ages	3,037	5.7	33,209	0.3	23	3,380	6.4	36,029	0.4	19	444	0.8	4,900	0.3	172
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	3	42.9	36	0.1	19	0	0.0	0	0.0	0	2	28.6	24	0.3	181
15-20	14	10.9	155	0.2	15	29	22.5	333	0.4	20	4	3.1	41	0.3	15,379
21-44	630	5.4	6,686	0.3	19	960	8.2	10,016	0.4	20	45	0.4	489	0.3	66
45-64	1,472	6.6	15,672	0.3	23	1,758	7.9	18,398	0.3	18	196	0.9	2,090	0.3	40
65-74	865	7.1	10,039	0.4	27	595	4.9	6,871	0.4	20	180	1.5	2,070	0.4	43
75-84	41	0.8	480	0.2	15	34	0.6	381	0.2	5	12	0.2	144	0.2	14
85 and older	12	0.8	141	0.2	11	4	0.3	30	0.3	8	5	0.3	42	0.1	10
Female, Other Eligibles															
All Ages	1,073	2.1	9,313	0.3	16	1,196	2.4	9,488	0.3	13	267	0.5	2,540	0.3	27
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	56	10.6	219	0.3	21	113	21.4	368	0.4	28	1	0.2	4	0.3	79
45-64	38	16.7	162	0.3	24	61	26.9	228	0.4	23	3	1.3	23	0.2	38
65-74	352	3.1	3,390	0.3	19	288	2.5	2,680	0.3	14	109	1.0	1,074	0.3	26
75-84	347	1.9	3,094	0.3	14	382	2.1	3,269	0.3	12	78	0.4	732	0.3	34
85 and older	280	1.5	2,448	0.3	15	352	1.8	2,943	0.3	11	76	0.4	707	0.3	20
Male															
All Males	1,996	3.9	20,127	0.3	22	2,014	4.0	19,405	0.4	17	138	0.3	1,394	0.3	95
Male, Disabled															
All Ages	1,472	4.3	15,531	0.3	24	1,511	4.4	15,377	0.4	17	113	0.3	1,154	0.3	101
5 and younger	6	46.2	66	0.1	17	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	4	21.1	48	0.3	23	0	0.0	0	0.0	0	4	21.1	34	0.6	516
15-20	26	13.8	294	0.3	26	35	18.5	381	0.5	28	9	4.8	96	0.4	277
21-44	392	3.2	4,172	0.3	20	622	5.0	6,545	0.4	18	43	0.3	438	0.3	86
45-64	669	4.5	6,641	0.3	24	687	4.6	6,551	0.3	16	41	0.3	405	0.3	62
65-74	366	7.3	4,218	0.4	27	158	3.2	1,803	0.4	21	16	0.3	181	0.4	53
75-84	9	0.7	92	0.2	18	9	0.7	97	0.2	3	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	524	3.1	4,596	0.3	17	503	3.0	4,028	0.3	13	25	0.1	240	0.3	67
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	1	12.5	7	0.6	86	1	12.5	12	0.4	64	0	0.0	0	0.0	0
21-44	19	16.4	64	0.4	21	34	29.3	117	0.5	21	1	0.9	2	0.5	159
45-64	5	8.5	9	0.6	37	17	28.8	47	0.6	39	0	0.0	0	0.0	0
65-74	254	3.7	2,386	0.3	17	193	2.8	1,704	0.4	15	11	0.2	124	0.4	109
75-84	166	2.6	1,469	0.3	18	166	2.6	1,436	0.3	10	11	0.2	92	0.2	21
85 and older	79	2.4	661	0.3	13	92	2.8	712	0.4	13	2	0.1	22	0.1	17
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 2007 file for Georgia, released by CMS in 4/2010. This table was produced on 10/06/2010.
 a. Table D.7C includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2007. 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 2007. 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.

TABLE D.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}
 DUAL ELIGIBLE BENEFICIARIES, GEORGIA, 2007

Beneficiary Characteristics	ANTIHYPERTENSIVE					ANTIHYPERLIPIDEMIC					Number of Beneficiaries	Number of Benefit Months
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month		
All	8,189	5.3	82,021	0.4	\$12	4,526	2.9	46,984	0.4	\$21	153,778	1,637,587
Female												
All Females	5,207	5.1	52,880	0.4	13	2,931	2.8	30,940	0.4	21	103,009	1,105,718
Female, Disabled												
All Ages	3,673	6.9	39,603	0.4	14	2,161	4.1	23,789	0.4	23	52,964	587,078
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12
6-14	2	28.6	24	0.4	7	0	0.0	0	0.0	0	7	76
15-20	12	9.3	119	0.2	4	2	1.6	21	0.4	8	129	1,406
21-44	512	4.4	5,034	0.3	11	213	1.8	2,155	0.4	20	11,655	126,953
45-64	1,896	8.6	20,074	0.4	13	1,067	4.8	11,521	0.3	21	22,138	241,898
65-74	1,166	9.6	13,373	0.4	17	832	6.8	9,568	0.4	28	12,173	139,240
75-84	68	1.3	792	0.2	8	40	0.8	449	0.2	9	5,322	60,659
85 and older	17	1.1	187	0.1	3	7	0.5	75	0.2	9	1,539	16,834
Female, Other Eligibles												
All Ages	1,534	3.1	13,277	0.3	9	770	1.5	7,151	0.3	15	50,045	518,640
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
6-14	1	100.0	11	0.5	7	0	0.0	0	0.0	0	1	11
15-20	0	0.0	0	0.0	0	1	11.1	12	0.2	2	9	77
21-44	67	12.7	256	0.4	13	24	4.5	59	0.5	22	529	2,466
45-64	60	26.4	271	0.3	11	23	10.1	91	0.3	8	227	1,155
65-74	566	5.0	5,312	0.3	10	345	3.0	3,444	0.3	18	11,423	120,198
75-84	460	2.5	4,280	0.3	9	241	1.3	2,279	0.3	14	18,620	199,107
85 and older	380	2.0	3,147	0.3	10	136	0.7	1,266	0.3	11	19,236	195,626
Male												
All Males	2,982	5.9	29,141	0.4	11	1,595	3.1	16,044	0.4	21	50,769	531,869
Male, Disabled												
All Ages	2,261	6.7	22,986	0.4	12	1,211	3.6	12,633	0.4	23	33,984	366,361
5 and younger	1	7.7	12	0.1	2	0	0.0	0	0.0	0	13	150
6-14	8	42.1	84	0.4	4	2	10.5	24	0.4	5	19	216
15-20	23	12.2	242	0.5	11	3	1.6	36	0.6	32	189	2,070
21-44	525	4.3	5,365	0.3	11	217	1.8	2,274	0.4	21	12,346	134,638
45-64	1,151	7.7	11,037	0.4	11	631	4.2	6,184	0.3	19	14,936	156,820
65-74	535	10.7	6,060	0.5	15	348	7.0	4,013	0.4	29	4,983	55,805
75-84	17	1.3	174	0.2	3	10	0.8	102	0.2	9	1,322	14,770
85 and older	1	0.6	12	0.1	1	0	0.0	0	0.0	0	176	1,892
Male, Other Eligibles												
All Ages	721	4.3	6,155	0.3	9	384	2.3	3,411	0.3	16	16,785	165,508
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
15-20	1	12.5	7	0.4	6	1	12.5	7	0.3	3	8	69
21-44	29	25.0	103	0.5	12	14	12.1	71	0.6	38	116	395
45-64	17	28.8	43	0.5	11	8	13.6	16	0.5	31	59	189
65-74	381	5.5	3,507	0.3	9	203	2.9	1,950	0.3	16	6,901	68,877
75-84	209	3.3	1,806	0.3	8	126	2.0	1,116	0.3	15	6,420	65,014
85 and older	84	2.6	689	0.3	10	32	1.0	251	0.3	11	3,280	30,952
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 2007 file for Georgia, released by CMS in 4/2010. This table was produced on 10/06/2010.
 a. Table D.7D includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2007. 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 2007. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.
 Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy; \$ = Medicaid reimbursement.

TABLE D.8
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BENEFICIARY CHARACTERISTIC^{a, b}
 DUAL ELIGIBLE BENEFICIARIES, GEORGIA, 2007

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	\$11	0.4	19,183	200,540
Age				
0-64	35	0.8	1,722	18,592
65-74	17	0.6	2,907	31,041
75-84	8	0.4	6,135	64,261
85 and older	5	0.3	8,419	86,646
Unknown	0	0.0	0	0
Gender				
Female	9	0.4	14,072	147,859
Male	15	0.5	5,111	52,681
Unknown	0	0.0	0	0
Race				
White	10	0.4	12,698	130,870
African American	11	0.3	6,262	67,347
Other/unknown	35	0.6	223	2,323
Basis of Eligibility^c				
Aged	8	0.4	16,689	173,594
Disabled	30	0.7	2,494	26,946
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 2007 file for Georgia, released by CMS in 4/2010. This table was produced on 10/06/2010.

a. Table D.8 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their 2007 Medicaid enrollment. A total of 12,755 beneficiaries who were in nursing facilities for part of their enrollment and their 121,651 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.

TABLE D.9
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d, e}
DUAL ELIGIBLE BENEFICIARIES, GEORGIA, 2007

Therapeutic Category	Number of Rx per Benefit Month Among Users												Total Rx \$		Number of Users	As a Percentage of Dual All-Year Nursing Facility Residents	Number of Benefit Months
	\$ per Benefit Month Among Users				\$ per Rx												
	Patented Total	Patent Brand-Name	Off-Patent Brand-Name	Generic	Patented Total	Patent Brand-Name	Off-Patent Brand-Name	Generic	Total	Patent Brand-Name	Off-Patent Brand-Name	Generic	Total Number of Rx	Total Rx \$			
Anti-infective Agents	0.3	0.1	0.0	0.2	\$18	\$14	\$0	\$3	\$66	\$168	\$254	\$18	1,030	\$68,442	428	2.2	3,816
Biologicals	0.0	0.0	0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0.0	0
Antineoplastic Agents	0.3	0.0	0.0	0.3	32	11	0	21	102	942	0	69	213	21,711	82	0.4	676
Endocrine/Metabolic Drugs	0.5	0.2	0.0	0.3	24	20	0	4	48	111	67	13	2,002	96,682	451	2.4	3,981
Cardiovascular Agents	1.0	0.1	0.1	0.8	27	8	7	11	27	71	79	14	7,937	213,155	903	4.7	7,993
Respiratory Agents	0.3	0.1	0.0	0.3	12	8	1	3	34	102	81	11	1,643	56,035	479	2.5	4,710
Gastrointestinal Agents	0.5	0.1	0.0	0.4	21	13	3	5	39	106	90	12	2,646	102,485	550	2.9	4,969
Genitourinary Agents	0.4	0.3	0.0	0.1	21	18	2	2	57	66	74	22	644	36,666	197	1.0	1,707
CNS Drugs	0.7	0.1	0.0	0.6	13	7	0	5	18	115	77	9	39,346	722,298	5,440	28.4	56,773
Stimulants/Anti-obesity/Anorexia	0.2	0.0	0.0	0.2	12	10	0	2	58	348	0	10	14	814	7	0.0	68
Miscellaneous Psychological/Neurological Agents	0.6	0.6	0.0	0.0	65	64	0	0	113	113	0	48	2,080	234,931	422	2.2	3,636
Analgesics and Anesthetics	0.6	0.0	0.1	0.5	16	2	8	6	27	89	132	11	2,230	60,242	427	2.2	3,804
Neuromuscular Agents	0.8	0.1	0.0	0.7	23	13	1	8	29	130	157	12	7,857	226,466	979	5.1	9,910
Nutritional Products	0.3	0.0	0.0	0.3	4	0	0	4	13	16	22	13	1,295	16,934	410	2.1	3,840
Hematological Agents	0.6	0.0	0.0	0.6	10	7	0	3	17	211	0	6	12,345	213,565	1,988	10.4	20,885
Topical Products	0.3	0.1	0.0	0.2	17	13	0	4	50	103	72	18	1,172	58,113	379	2.0	3,468
Miscellaneous Products	0.3	0.0	0.0	0.2	27	22	0	6	95	467	0	23	68	6,442	28	0.1	236
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	11	0	0	0	70	0	0	0	35	2,456	20	0.1	232
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.	82,557	2,137,437	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2007 file for Georgia, released by CMS in 4/2010. This table was produced on 10/06/2010.

- a. Table D.9 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2007. A total of 12,755 beneficiaries who were in nursing facilities for part of their enrollment and their 121,651 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 2007. 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 Georgia, 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 D.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}
 DUAL ELIGIBLE BENEFICIARIES, GEORGIA, 2007

Top 10 Drug Groups in Nursing Facilities	Total Medicaid Rx \$	Number of Users	Users				Among 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	\$287,711	439	2.3	3,923	0.5	\$154	\$73	
ANTIANKXIETY AGENTS	242,676	4,512	23.5	48,185	0.6	8	5	
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	234,155	553	2.9	4,794	0.4	113	49	
ANTICONVULSANT	183,687	929	4.8	9,696	0.7	26	19	
HEMATOPOIETIC AGENTS	152,125	3,000	15.6	32,484	0.5	9	5	
ANTIDEPRESSANTS	111,798	658	3.4	5,941	0.4	44	19	
ULCER DRUGS	73,899	494	2.6	4,541	0.4	39	16	
ANTIDIABETIC	70,810	416	2.2	3,901	0.4	42	18	
ANTIHYPERTENSIVE	68,786	568	3.0	5,091	0.4	31	14	
HYPNOTICS	64,219	682	3.6	7,474	0.8	11	9	
Total	1,489,866	12,251	n.a.	126,030	n.a.	n.a.	n.a.	

Source: Data for this table are from the MAX 2007 file for Georgia, released by CMS in 4/2010. This table was produced on 10/06/2010.

a. Table D.10 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2007. A total of 12,755 beneficiaries who were in nursing facilities for part of their enrollment and their 121,651 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 2007. 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 2007 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.

TABLE D.10A
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR TOP 10 DRUG GROUPS COMBINED AND FIRST AND SECOND TOP DRUG GROUPS SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c, d}
DUAL ELIGIBLE BENEFICIARIES, GEORGIA, 2007

Beneficiary Characteristics	All Top 10 Drug Groups		ANTIPSYCHOTICS					ANTIANSXIETY AGENTS				
	Number of Rx	Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
All	71,257	\$1,489,866	439	2.3	3,923	0.5	\$73	4,512	23.5	48,185	0.6	\$5
Female												
All Females	52,380	978,222	284	2.0	2,568	0.5	59	3,460	24.6	37,133	0.6	5
Female, Disabled												
All Ages	8,171	270,421	48	3.6	501	0.6	127	353	26.3	3,843	0.7	7
64 or younger	5,492	189,449	30	3.8	295	0.5	95	222	28.1	2,429	0.7	7
65-74	1,708	73,124	18	9.3	206	0.8	172	52	26.8	606	0.7	7
75-84	602	4,213	0	0.0	0	0.0	0	48	23.0	486	0.6	5
85 and older	369	3,635	0	0.0	0	0.0	0	31	21.2	322	0.7	5
Female, Other Eligibles												
All Ages	44,209	707,801	236	1.9	2,067	0.4	43	3,107	24.4	33,290	0.6	5
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	6,986	133,520	44	3.3	428	0.4	50	365	27.2	3,998	0.7	6
75-84	16,730	272,670	83	1.9	689	0.4	50	1,139	26.6	12,263	0.6	5
85 and older	20,493	301,611	109	1.5	950	0.4	35	1,603	22.5	17,029	0.6	4
Male												
All Males	18,877	511,644	155	3.0	1,355	0.5	100	1,052	20.6	11,052	0.6	5
Male, Disabled												
All Ages	6,116	238,136	47	4.1	474	0.7	183	273	23.7	2,942	0.6	6
64 or younger	5,309	218,565	43	4.6	437	0.7	195	232	24.9	2,512	0.6	6
65-74	631	17,958	4	2.9	37	0.2	46	26	19.0	265	0.6	6
75-84	158	1,473	0	0.0	0	0.0	0	12	16.9	129	0.5	5
85 and older	18	140	0	0.0	0	0.0	0	3	20.0	36	0.2	2
Male, Other Eligibles												
All Ages	12,761	273,508	108	2.7	881	0.4	55	779	19.7	8,110	0.6	5
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	5,030	117,986	37	3.0	356	0.4	72	264	21.4	2,871	0.6	6
75-84	4,708	98,042	45	2.9	357	0.5	50	302	19.1	3,119	0.5	5
85 and older	3,023	57,480	26	2.3	168	0.4	30	213	18.6	2,120	0.5	4
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 2007 file for Georgia, released by CMS in 4/2010. This table was produced on 10/06/2010.

a. Table D.10A includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2007. A total of 12,755 beneficiaries who were in nursing facilities for part of their enrollment and their 121,651 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 2007. 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 2007 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

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

TABLE D.10B
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY
AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c, d}
DUAL ELIGIBLE BENEFICIARIES, GEORGIA, 2007

Beneficiary Characteristics	MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL					ANTICONVULSANT					HEMATOPOIETIC AGENTS				
	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	553	2.9	4,794	0.4	\$49	929	4.8	9,696	0.7	\$19	3,000	15.6	32,484	0.5	\$5
Female															
All Females	393	2.8	3,475	0.4	49	625	4.4	6,566	0.7	15	2,248	16.0	24,449	0.5	5
Female, Disabled															
All Ages	32	2.4	343	0.6	77	113	8.4	1,220	0.8	29	187	14.0	2,101	0.6	13
64 or younger	25	3.2	259	0.6	76	84	10.6	889	0.8	31	106	13.4	1,224	0.6	19
65-74	7	3.6	84	0.8	80	24	12.4	273	0.8	28	27	13.9	295	0.7	4
75-84	0	0.0	0	0.0	0	4	1.9	46	0.6	5	26	12.4	281	0.6	3
85 and older	0	0.0	0	0.0	0	1	0.7	12	0.1	1	28	19.2	301	0.4	6
Female, Other Eligibles															
All Ages	361	2.8	3,132	0.4	46	512	4.0	5,346	0.7	12	2,061	16.2	22,348	0.5	4
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	33	2.5	260	0.3	46	125	9.3	1,321	0.8	20	241	18.0	2,642	0.6	4
75-84	149	3.5	1,306	0.5	50	200	4.7	2,029	0.7	10	698	16.3	7,703	0.5	4
85 and older	179	2.5	1,566	0.4	42	187	2.6	1,996	0.6	9	1,122	15.8	12,003	0.5	3
Male															
All Males	160	3.1	1,319	0.4	49	304	5.9	3,130	0.7	27	752	14.7	8,035	0.5	5
Male, Disabled															
All Ages	17	1.5	190	0.4	47	120	10.4	1,300	0.8	41	124	10.7	1,362	0.6	8
64 or younger	14	1.5	165	0.3	46	108	11.6	1,156	0.8	43	102	11.0	1,109	0.6	9
65-74	3	2.2	25	0.6	56	10	7.3	120	0.9	29	11	8.0	121	0.7	6
75-84	0	0.0	0	0.0	0	1	1.4	12	0.1	1	10	14.1	120	0.6	5
85 and older	0	0.0	0	0.0	0	1	6.7	12	0.2	1	1	6.7	12	0.7	5
Male, Other Eligibles															
All Ages	143	3.6	1,129	0.4	49	184	4.6	1,830	0.6	17	628	15.9	6,673	0.5	4
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	28	2.3	241	0.4	57	85	6.9	907	0.6	23	203	16.4	2,245	0.5	3
75-84	75	4.8	597	0.4	40	59	3.7	576	0.6	13	233	14.8	2,441	0.5	5
85 and older	40	3.5	291	0.5	62	40	3.5	347	0.6	10	192	16.8	1,987	0.6	5
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 2007 file for Georgia, released by CMS in 4/2010. This table was produced on 10/06/2010.

a. Table D.10B includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2007. A total of 12,755 beneficiaries who were in nursing facilities for part of their enrollment and their 121,651 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 2007. 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 2007 Medicaid reimbursement for all-year nursing facility residents in this state.

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

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

TABLE D.10C
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY
AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c, d}
DUAL ELIGIBLE BENEFICIARIES, GEORGIA, 2007

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	658	3.4	5,941	0.4	\$19	494	2.6	4,541	0.4	\$16	416	2.2	3,901	0.4	\$18
Female															
All Females	449	3.2	4,011	0.4	18	324	2.3	2,894	0.4	17	272	1.9	2,544	0.4	17
Female, Disabled															
All Ages	80	6.0	856	0.6	33	62	4.6	675	0.6	21	68	5.1	702	0.6	25
64 or younger	67	8.5	722	0.5	31	45	5.7	487	0.5	26	56	7.1	568	0.5	26
65-74	13	6.7	134	0.7	44	17	8.8	188	0.7	10	12	6.2	134	0.6	23
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	369	2.9	3,155	0.4	14	262	2.1	2,219	0.4	15	204	1.6	1,842	0.4	14
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	57	4.3	511	0.4	16	46	3.4	411	0.4	17	62	4.6	600	0.4	18
75-84	148	3.5	1,257	0.4	15	103	2.4	852	0.4	15	63	1.5	540	0.4	14
85 and older	164	2.3	1,387	0.4	12	113	1.6	956	0.4	14	79	1.1	702	0.4	12
Male															
All Males	209	4.1	1,930	0.4	21	170	3.3	1,647	0.4	16	144	2.8	1,357	0.4	20
Male, Disabled															
All Ages	54	4.7	568	0.6	37	48	4.2	521	0.6	18	34	2.9	381	0.6	33
64 or younger	49	5.3	519	0.6	33	41	4.4	437	0.6	17	32	3.4	357	0.6	32
65-74	5	3.6	49	0.9	78	7	5.1	84	0.3	23	2	1.5	24	0.4	36
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	155	3.9	1,362	0.4	14	122	3.1	1,126	0.3	15	110	2.8	976	0.3	15
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	53	4.3	503	0.4	16	60	4.9	597	0.3	16	36	2.9	370	0.3	15
75-84	60	3.8	535	0.3	11	33	2.1	284	0.4	12	57	3.6	476	0.4	14
85 and older	42	3.7	324	0.4	14	29	2.5	245	0.3	14	17	1.5	130	0.5	20
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 2007 file for Georgia, released by CMS in 4/2010. This table was produced on 10/06/2010.

a. Table D.10C includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2007. A total of 12,755 beneficiaries who were in nursing facilities for part of their enrollment and their 121,651 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 2007. 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 2007 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

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

TABLE D.10D
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR NINTH AND TENTH TOP DRUG GROUPS
 SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, GEORGIA, 2007

Beneficiary Characteristics	ANTIHYPERTENSIVE					HYPNOTICS					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-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents
All	568	3.0	5,091	0.4	\$14	682	3.6	7,474	0.8	\$9	19,183	200,540
Female												
All Females	380	2.7	3,371	0.4	15	454	3.2	5,018	0.7	9	14,072	147,859
Female, Disabled												
All Ages	90	6.7	990	0.6	21	101	7.5	1,147	0.9	10	1,340	14,415
64 or younger	67	8.5	730	0.5	22	71	9.0	811	0.9	10	791	8,456
65-74	22	11.3	248	0.6	21	17	8.8	191	1.0	11	194	2,114
75-84	0	0.0	0	0.0	0	11	5.3	123	1.0	6	209	2,274
85 and older	1	0.7	12	0.1	1	2	1.4	22	1.0	6	146	1,571
Female, Other Eligibles												
All Ages	290	2.3	2,381	0.4	12	353	2.8	3,871	0.6	9	12,732	133,444
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	50	3.7	454	0.4	14	81	6.0	926	0.7	9	1,340	14,412
75-84	93	2.2	773	0.4	9	127	3.0	1,398	0.7	8	4,277	45,173
85 and older	147	2.1	1,154	0.4	14	145	2.0	1,547	0.5	10	7,115	73,859
Male												
All Males	188	3.7	1,720	0.4	11	228	4.5	2,456	0.9	8	5,111	52,681
Male, Disabled												
All Ages	46	4.0	509	0.5	17	102	8.8	1,120	0.9	8	1,154	12,531
64 or younger	43	4.6	495	0.5	14	87	9.3	951	0.9	8	931	10,136
65-74	3	2.2	14	0.9	111	13	9.5	145	1.1	7	137	1,464
75-84	0	0.0	0	0.0	0	2	2.8	24	1.1	12	71	775
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	15	156
Male, Other Eligibles												
All Ages	142	3.6	1,211	0.4	9	126	3.2	1,336	0.8	8	3,957	40,150
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	66	5.3	653	0.4	9	51	4.1	561	1.0	9	1,236	13,051
75-84	48	3.0	356	0.4	7	53	3.4	583	0.7	7	1,578	16,039
85 and older	28	2.4	202	0.4	11	22	1.9	192	0.6	4	1,143	11,060
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 2007 file for Georgia, released by CMS in 4/2010. This table was produced on 10/06/2010.

- a. Table D.10D includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2007. A total of 12,755 beneficiaries who were in nursing facilities for part of their enrollment and their 121,651 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 2007. 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 2007 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.
 Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.11
USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
AMONG DUALS, BY BENEFICIARY CHARACTERISTIC^{a,b}
GEORGIA, 2007

Beneficiary Characteristics	Number of Beneficiaries with at Least One Part D Excluded Rx	Percentage of Beneficiaries with at Least One Part D Excluded Rx	Number of Part D Excluded Rx per Beneficiary	Total Number Part D Excluded Rx	Part D Excluded Rx \$ per Beneficiary	Total Part D Excluded Rx \$	\$ per Part D Excluded Rx	Part D Excluded Rx \$ as a Percentage of All Dual Rx \$	Total Number of Beneficiaries
All	37,004	24.1	1.4	220,782	\$12	\$1,773,063	\$8	6.8	153,778
Age									
5 and younger	8	53.3	3.4	51	93	1,396	27	11.3	15
6-14	17	63.0	2.2	59	48	1,303	22	1.6	27
15-20	90	26.9	1.1	357	16	5,228	15	0.4	335
21-44	4,653	18.9	1.0	25,031	9	223,461	9	3.1	24,646
45-64	9,742	26.1	1.6	60,755	14	517,723	9	6.1	37,360
65-74	8,300	23.4	1.5	51,654	11	399,022	8	5.9	35,480
75-84	7,827	24.7	1.5	47,078	11	349,763	7	24.3	31,684
85 and older	6,367	26.3	1.5	35,797	11	275,167	8	27.5	24,231
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Basis of Eligibility^c									
Aged	15,942	24.2	1.4	93,977	11	734,582	8	19.1	65,822
Disabled	20,831	24.0	1.5	126,304	12	1,033,846	8	4.7	86,948
Adults	179	21.9	0.4	355	4	3,263	9	1.5	817
Children	5	13.5	0.5	19	9	343	18	1.2	37
Unknown	47	30.5	0.8	127	7	1,029	8	2.5	154
Gender									
Female	26,824	26.0	1.6	159,935	12	1,275,395	8	7.8	103,009
Male	10,180	20.1	1.2	60,847	10	497,668	8	5.1	50,769
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Race									
White	20,112	29.4	1.9	131,744	16	1,120,027	9	9.2	68,306
African American	13,027	20.2	1.0	67,584	7	483,324	7	4.6	64,496
Other/unknown	3,865	18.4	1.0	21,454	8	169,712	8	5.0	20,976
Use of Nursing Facilities^d									
Entire year	6,890	35.9	2.6	50,258	22	425,699	8	19.9	19,183
Part year	5,119	40.1	2.1	26,425	18	223,853	8	13.9	12,755
None	24,995	20.5	1.2	144,099	9	1,123,511	8	5.0	121,840
Maintenance Assistance Status									
Cash	20,168	21.8	1.3	118,610	10	906,588	8	5.3	92,695
Medically needy	422	18.7	0.8	1,724	8	17,167	10	1.7	2,259
Poverty related	946	16.7	0.5	2,993	5	27,266	9	2.2	5,659
Other/unknown	15,468	29.1	1.8	97,455	15	822,042	8	12.0	53,165

Source: Data for this table are from the MAX 2007 file for Georgia, released by CMS in 4/2010. This table was produced on 10/06/2010.

a. Table D.11 includes the beneficiaries represented by Cell G of Table 1. Beneficiaries include all dual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2007.

b. The statute establishing the Medicare Part D prescription program that started in 2007 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 2007 receive the remainder of their prescription drug coverage through Part D. Excluded drugs include benzodiazepines; barbiturates; nonprescription (OTC) medications; prescription vitamins and minerals (not including prenatal vitamins and fluoride preparations); and drugs used for anorexia, weight loss, or weight gain. Other excluded drugs include those that promote fertility; those used for cosmetic purposes or hair growth, for symptomatic relief of coughs and colds; or drugs for which the manufacturer requires that associated tests or monitoring services be purchased exclusively from the manufacturer.

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

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

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

TABLE D.12
USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
AMONG DUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a,b}
GEORGIA, 2007

Beneficiary Characteristics	Number Rx per Benefit Month	Rx \$ per Benefit Month	\$ per Rx	Barbiturate \$ per Benefit Month	Benzodiazapine \$ per Benefit Month	Number of Benefit Months
All	0.1	\$1	\$8	\$0	\$1	1,637,587
Age						
5 and younger	0.3	8	27	0	3	174
6-14	0.2	4	22	0	0	303
15-20	0.1	1	15	0	0	3,622
21-44	0.1	1	9	0	1	264,452
45-64	0.2	1	9	0	1	400,062
65-74	0.1	1	8	0	1	384,120
75-84	0.1	1	7	0	1	339,550
85 and older	0.1	1	8	0	1	245,304
Unknown	0.0	0	0	0	0	0
Basis of Eligibility^c						
Aged	0.1	1	8	0	1	679,319
Disabled	0.1	1	8	0	1	953,439
Adults	0.1	1	9	0	1	3,234
Children	0.1	1	18	0	0	365
Unknown	0.1	1	8	0	0	1,230
Gender						
Female	0.1	1	8	0	1	1,105,718
Male	0.1	1	8	0	1	531,869
Unknown	0.0	0	0	0	0	0
Race						
White	0.2	2	9	0	1	711,632
African American	0.1	1	7	0	0	696,284
Other/unknown	0.1	1	8	0	0	229,671
Use of Nursing Facilities^d						
Entire year	0.3	2	8	0	2	200,540
Part year	0.2	2	8	0	1	121,651
None	0.1	1	8	0	1	1,315,396
Maintenance Assistance Status						
Cash	0.1	1	8	0	1	1,039,471
Medically needy	0.1	1	10	0	1	14,699
Poverty related	0.1	0	9	0	0	55,895
Other/unknown	0.2	2	8	0	1	527,522

Source: Data for this table are from the MAX 2007 file for Georgia, released by CMS in 4/2010. This table was produced on 10/06/2010.

a. Table D.12 includes the beneficiaries represented by Cell G of Table 1. Beneficiaries include all dual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2007.

b. The statute establishing the Medicare Part D prescription program that started in 2007 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 2007 receive the remainder of their prescription drug coverage through Part D. Excluded drugs include benzodiazepines; barbiturates; nonprescription (OTC) medications; prescription vitamins and minerals (not including prenatal vitamins and fluoride preparations); and drugs used for anorexia, weight loss, or weight gain. Other excluded drugs include those that promote fertility; those used for cosmetic purposes or hair growth, for symptomatic relief of coughs and colds; or drugs for which the manufacturer requires that associated tests or monitoring services be purchased exclusively from the manufacturer.

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

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

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

TABLE D.13
USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D FOR SELECTED DRUG CATEGORIES AMONG DUALS^{a,b,c}
GEORGIA, 2007

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	42,639	\$42	\$1,773,063	100.0	220,782	\$8	100.0
Anorexia or weight loss/gain	1	24	24	0.0	1	24	0.0
Fertility drugs	0	0	0	0.0	0	0	0.0
Drugs for cosmetic purposes	4	7	26	0.0	4	7	0.0
Cough and cold medications	109	32	3,527	0.2	146	24	0.1
Vitamins and minerals	2,814	41	114,281	6.4	8,253	14	3.7
Non-prescription drugs	14,125	26	371,843	21.0	63,431	6	28.7
Barbiturates	1,599	49	78,679	4.4	14,382	5	6.5
Benzodiazepines	23,368	51	1,189,594	67.1	133,176	9	60.3
Other Part D Excl Rx Drugs	619	24	15,089	0.9	1,389	11	0.6

Source: Data for this table are from the MAX 2007 file for Georgia, released by CMS in 4/2010. This table was produced on 10/06/2010.

a. Table D.13 includes the beneficiaries represented by Cell G of Table 1. Beneficiaries include all dual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2007. A user is a beneficiary who had at least one prescription filled for a Part D excluded drug in 2007. A beneficiary who used drugs from two or more Part D excluded categories was counted as a user for each category. Therefore, the sum of users across drug categories may exceed the total number of individual users as noted on Table D11.

b. Includes OTC drugs as well as prescription drugs.

c. The statute establishing the Medicare Part D prescription program that started in 2007 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 2007 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.

SUPPLEMENTAL TABLE 1
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES^{a, b}
 GEORGIA, 2007

Total Number of Dual Eligible Beneficiaries: 153,778
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries: \$26,121,134
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary: \$169

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	110,112	71.6	\$0	0.0
1-500	35,718	23.2	2,823,377	10.8
501-1,000	2,577	1.7	1,855,310	7.1
1,001-1,500	1,274	0.8	1,568,262	6.0
1,501-2,000	835	0.5	1,448,737	5.5
2,001-2,500	616	0.4	1,378,035	5.3
2,501-3,000	455	0.3	1,244,731	4.8
3,001-3,500	360	0.2	1,161,213	4.4
3,501-4,000	288	0.2	1,078,027	4.1
4,001-4,500	224	0.1	948,578	3.6
4,501-5,000	166	0.1	784,442	3.0
5,001-5,500	165	0.1	870,224	3.3
5,501-6,000	117	0.1	672,492	2.6
6,001-6,500	97	0.1	605,527	2.3
6,501-7,000	101	0.1	680,838	2.6
7,001-7,500	83	0.1	601,704	2.3
7,501-8,000	55	0.0	425,423	1.6
8,001-8,500	47	0.0	386,607	1.5
8,501-9,000	51	0.0	447,071	1.7
9,001-9,500	37	0.0	342,738	1.3
9,501-10,000	41	0.0	400,033	1.5
10,001+	359	0.2	6,397,765	24.5

Source: Data for this table are from the MAX 2007 file for Georgia, released by CMS in 4/2010. This table was produced on 10/06/2010.

- a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2007.
- b. Medicaid reimbursement amounts in this table do not reflect federally required rebates from drug manufacturers to states.

SUPPLEMENTAL TABLE 1A
 MEDICAID PHARMACY REIMBURSEMENT FOR DISABLED DUAL ELIGIBLE BENEFICIARIES UNDER AGE 65^{a, b, c}
 GEORGIA, 2007

Total Number of Disabled Dual Eligible Beneficiaries, Age < 65: 61,433
 Total Pharmacy Reimbursement for Disabled Dual Eligible Beneficiaries, Age < 65: \$16,621,062
 Mean Pharmacy Reimbursement per Disabled Dual Eligible Beneficiary, Age < 65: \$270

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Disabled Dual Beneficiaries,		Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
			Age < 65		
\$0	42,105		68.5	\$0	0.0
1-500	14,645		23.8	1,336,447	8.0
501-1,000	1,462		2.4	1,048,800	6.3
1,001-1,500	686		1.1	844,547	5.1
1,501-2,000	474		0.8	825,027	5.0
2,001-2,500	382		0.6	851,406	5.1
2,501-3,000	266		0.4	731,811	4.4
3,001-3,500	214		0.3	692,291	4.2
3,501-4,000	184		0.3	687,122	4.1
4,001-4,500	129		0.2	545,835	3.3
4,501-5,000	94		0.2	445,972	2.7
5,001-5,500	105		0.2	553,961	3.3
5,501-6,000	72		0.1	413,701	2.5
6,001-6,500	59		0.1	367,565	2.2
6,501-7,000	63		0.1	424,207	2.6
7,001-7,500	58		0.1	420,057	2.5
7,501-8,000	41		0.1	317,780	1.9
8,001-8,500	27		0.0	221,752	1.3
8,501-9,000	41		0.1	359,705	2.2
9,001-9,500	26		0.0	240,436	1.4
9,501-10,000	27		0.0	263,369	1.6
10,001+	273		0.4	5,029,271	30.3

Source: Data for this table are from the MAX 2007 file for Georgia, released by CMS in 4/2010. This table was produced on 10/06/2010.

- a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2007.
- b. Medicaid reimbursement amounts in this table do not reflect federally required rebates from drug manufacturers to states.
- c. This table is limited to dual eligible beneficiaries who were under age 65 and also indicated as disabled in the MAX files. Therefore, dual eligible beneficiaries under age 65 in "adults" or "children" basis-of-eligibility categories in Table D.2 are excluded because they were not classified as disabled in the MAX files. Disabled dual eligible beneficiaries age 65 and older are included in Supplemental Tables 1B through 1E, depending on their age.

Dual Medicaid Beneficiaries

SUPPLEMENTAL TABLE 1B
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 AND OLDER^{a, b}
 GEORGIA, 2007

Total Number of Dual Eligible Beneficiaries, Age 65+: 91,395
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65+: \$9,222,145
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65+: \$100

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 65+	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	67,611	74.0	\$0	0.0
1-500	20,668	22.6	1,427,341	15.5
501-1,000	1,035	1.1	750,208	8.1
1,001-1,500	557	0.6	686,803	7.4
1,501-2,000	350	0.4	605,116	6.6
2,001-2,500	225	0.2	506,315	5.5
2,501-3,000	187	0.2	507,518	5.5
3,001-3,500	140	0.2	449,422	4.9
3,501-4,000	101	0.1	379,256	4.1
4,001-4,500	95	0.1	402,743	4.4
4,501-5,000	70	0.1	329,224	3.6
5,001-5,500	60	0.1	316,263	3.4
5,501-6,000	44	0.0	253,129	2.7
6,001-6,500	37	0.0	231,603	2.5
6,501-7,000	38	0.0	256,631	2.8
7,001-7,500	25	0.0	181,647	2.0
7,501-8,000	13	0.0	99,714	1.1
8,001-8,500	19	0.0	156,699	1.7
8,501-9,000	10	0.0	87,366	0.9
9,001-9,500	11	0.0	102,302	1.1
9,501-10,000	14	0.0	136,664	1.5
10,001+	85	0.1	1,356,181	14.7

Source: Data for this table are from the MAX 2007 file for Georgia, released by CMS in 4/2010. This table was produced on 10/06/2010.

a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2007.

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

Dual Medicaid Beneficiaries

SUPPLEMENTAL TABLE 1C
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 TO 74^{a, b}
 GEORGIA, 2007

Total Number of Dual Eligible Beneficiaries, Age 65-74: 35,480
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65-74: \$6,781,501
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65-74: \$191

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 65-74	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	26,040	73.4	\$0	0.0
1-500	7,332	20.7	592,344	8.7
501-1,000	583	1.6	423,268	6.2
1,001-1,500	334	0.9	411,373	6.1
1,501-2,000	234	0.7	404,580	6.0
2,001-2,500	165	0.5	373,698	5.5
2,501-3,000	147	0.4	399,313	5.9
3,001-3,500	108	0.3	346,693	5.1
3,501-4,000	79	0.2	296,262	4.4
4,001-4,500	82	0.2	347,797	5.1
4,501-5,000	57	0.2	267,191	3.9
5,001-5,500	50	0.1	263,375	3.9
5,501-6,000	37	0.1	213,165	3.1
6,001-6,500	33	0.1	206,325	3.0
6,501-7,000	35	0.1	236,325	3.5
7,001-7,500	23	0.1	166,876	2.5
7,501-8,000	11	0.0	84,452	1.2
8,001-8,500	16	0.0	132,469	2.0
8,501-9,000	9	0.0	78,692	1.2
9,001-9,500	10	0.0	92,965	1.4
9,501-10,000	14	0.0	136,664	2.0
10,001+	81	0.2	1,307,674	19.3

Source: Data for this table are from the MAX 2007 file for Georgia, released by CMS in 4/2010. This table was produced on 10/06/2010.

a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2007.

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

Dual Medicaid Beneficiaries

SUPPLEMENTAL TABLE 1D
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 75 TO 84^{a, b}
 GEORGIA, 2007

Total Number of Dual Eligible Beneficiaries, Age 75-84: 31,684
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 75-84: \$1,438,570
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 75-84: \$45

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 75-84	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	23,991	75.7	\$0	0.0
1-500	7,118	22.5	468,307	32.6
501-1,000	241	0.8	174,111	12.1
1,001-1,500	135	0.4	167,596	11.7
1,501-2,000	66	0.2	114,210	7.9
2,001-2,500	29	0.1	63,328	4.4
2,501-3,000	25	0.1	67,802	4.7
3,001-3,500	24	0.1	77,003	5.4
3,501-4,000	15	0.0	56,215	3.9
4,001-4,500	7	0.0	29,408	2.0
4,501-5,000	8	0.0	38,229	2.7
5,001-5,500	5	0.0	26,425	1.8
5,501-6,000	5	0.0	28,633	2.0
6,001-6,500	4	0.0	25,278	1.8
6,501-7,000	1	0.0	6,962	0.5
7,001-7,500	2	0.0	14,771	1.0
7,501-8,000	0	0.0	0	0.0
8,001-8,500	3	0.0	24,230	1.7
8,501-9,000	1	0.0	8,674	0.6
9,001-9,500	1	0.0	9,337	0.6
9,501-10,000	0	0.0	0	0.0
10,001+	3	0.0	38,051	2.6

Source: Data for this table are from the MAX 2007 file for Georgia, released by CMS in 4/2010. This table was produced on 10/06/2010.

- a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2007.
- b. Medicaid reimbursement amounts in this table do not reflect federally required rebates from drug manufacturers to states.

Dual Medicaid Beneficiaries

SUPPLEMENTAL TABLE 1E
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 85 AND OLDER^{a, b}
 GEORGIA, 2007

Total Number of Dual Eligible Beneficiaries, Age 85+: 24,231
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 85+: \$1,002,074
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 85+: \$41

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 85+	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	17,580	72.6	\$0	0.0
1-500	6,218	25.7	366,690	36.6
501-1,000	211	0.9	152,829	15.3
1,001-1,500	88	0.4	107,834	10.8
1,501-2,000	50	0.2	86,326	8.6
2,001-2,500	31	0.1	69,289	6.9
2,501-3,000	15	0.1	40,403	4.0
3,001-3,500	8	0.0	25,726	2.6
3,501-4,000	7	0.0	26,779	2.7
4,001-4,500	6	0.0	25,538	2.5
4,501-5,000	5	0.0	23,804	2.4
5,001-5,500	5	0.0	26,463	2.6
5,501-6,000	2	0.0	11,331	1.1
6,001-6,500	0	0.0	0	0.0
6,501-7,000	2	0.0	13,344	1.3
7,001-7,500	0	0.0	0	0.0
7,501-8,000	2	0.0	15,262	1.5
8,001-8,500	0	0.0	0	0.0
8,501-9,000	0	0.0	0	0.0
9,001-9,500	0	0.0	0	0.0
9,501-10,000	0	0.0	0	0.0
10,001+	1	0.0	10,456	1.0

Source: Data for this table are from the MAX 2007 file for Georgia, released by CMS in 4/2010. This table was produced on 10/06/2010.

a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2007.

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

Dual Medicaid Beneficiaries

APPENDIX TABLE A.3
CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY^{a, b}
DUAL ELIGIBLE BENEFICIARIES, GEORGIA, 2007

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	155,863	66,639	87,556	1,343	47	278	1,668,635	689,667	964,228	11,140	508	3,092
Age												
5 and younger	15	0	14	0	1	0	174	0	162	0	12	0
6-14	27	0	26	0	1	0	306	0	294	0	12	0
15-20	343	0	319	4	20	0	3,775	0	3,528	34	213	0
21-44	25,057	0	24,071	930	16	40	272,421	0	264,076	7,705	175	465
45-64	38,023	0	37,463	381	6	173	410,371	0	405,145	3,182	60	1,984
65-74	35,959	18,636	17,229	27	2	65	390,452	193,550	196,019	216	24	643
75-84	32,063	25,365	6,697	1	0	0	344,151	268,125	76,023	3	0	0
85 and older	24,376	22,638	1,737	0	1	0	246,985	227,992	18,981	0	12	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	104,480	49,818	53,318	1,038	28	278	1,127,888	522,041	593,833	8,611	311	3,092
Male	51,383	16,821	34,238	305	19	0	540,747	167,626	370,395	2,529	197	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	69,642	33,436	35,387	676	27	116	730,534	335,371	387,938	5,659	282	1,284
African American	65,190	23,263	41,131	648	15	133	707,498	246,178	454,287	5,366	166	1,501
Other/unknown	21,031	9,940	11,038	19	5	29	230,603	108,118	122,003	115	60	307
Use of Nursing Facilities^c												
Entire year	20,276	17,333	2,943	0	0	0	214,106	181,462	32,644	0	0	0
Part year	13,018	10,879	2,138	1	0	0	125,872	103,934	21,934	4	0	0
None	122,569	38,427	82,475	1,342	47	278	1,328,657	404,271	909,650	11,136	508	3,092
Maintenance Assistance Status												
Cash	93,360	27,162	65,224	973	1	0	1,050,650	303,667	738,495	8,478	10	0
Medically needy	2,259	678	1,581	0	0	0	14,721	4,585	10,136	0	0	0
Poverty related	5,803	1,926	3,343	232	24	278	58,609	19,918	33,830	1,529	240	3,092
Other/unknown	54,441	36,873	17,408	138	22	0	544,655	361,497	181,767	1,133	258	0
Dual Status^d												
Full dual, all year	147,009	62,233	83,140	1,311	47	278	1,577,338	643,632	919,299	10,807	508	3,092
Full dual, part year	8,854	4,406	4,416	32	0	0	91,297	46,035	44,929	333	0	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	152,254	65,576	86,226	347	32	73	1,630,870	678,045	949,698	1,973	337	817
FFS part year, with Rx claims	1,064	160	500	349	3	52	10,912	1,743	5,356	3,203	36	574
FFS part year, no Rx claims	460	86	222	121	2	29	4,561	917	2,262	1,028	20	334
MC all year, with Rx claims	822	452	362	7	0	1	9,239	5,040	4,144	49	0	6
MC all year, no Rx claims	1,263	365	246	519	10	123	13,053	3,922	2,768	4,887	115	1,361
	0	0	0	0	0	0	0	0	0	0	0	0

Source: Data for this table are from the MAX 2007 file for Georgia, released by CMS in 4/2010. This table was produced on 10/06/2010.

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

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

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

d. The "Full dual, all year" group contains beneficiaries who had Medicare as well as Medicaid pharmacy benefits during all months of Medicaid enrollment in 2007. The "Full dual, part year" group contains beneficiaries who had such benefits for some, but not all, months of their enrollment. Refer to footnote g of Table 1 for more information about how we determined dual eligibility status.

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

APPENDIX TABLE A.4
MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS^a
DUAL ELIGIBLE BENEFICIARIES, GEORGIA, 2007

Beneficiary Characteristics	Beneficiaries and Benefit Months in Cell F of Table 1		Included in Cell G of Table 1		Excluded from Cell G of Table 1	
	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months
All	155,863	1,668,635	153,778	1,637,587	0	31,048
Fee-for-service (FFS) all year	152,254	1,630,870	152,254	1,630,870	0	0
FFS part year, with Rx claims	1,064	10,912	1,064	4,735	0	6,177
FFS part year, with no Rx claims	460	4,561	460	1,982	0	2,579
Managed care (MC) all year, with Rx claims	822	9,239	0	0	0	9,239
MC all year, with no Rx claims	1,263	13,053	0	0	0	13,053

Source: Data for this table are from the MAX 2007 file for Georgia, released by CMS in 4/2010. This table was produced on 10/06/2010.

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

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