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

LIST OF TABLES

OVERVIEW OF STUDY POPULATION

TABLE 1. OVERVIEW OF BENEFICIARY SELECTION CRITERIA FOR STUDY POPULATION

FOR ALL MEDICAID BENEFICIARIES

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

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

BENEFICIARY CHARACTERISTIC

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

BENEFICIARY CHARACTERISTIC

TABLE 5. AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY

BRAND STATUS AND BENEFICIARY CHARACTERISTIC

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

THERAPEUTIC CATEGORY

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

FOR ALL NONDUAL BENEFICIARIES

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

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

BY BENEFICIARY CHARACTERISTIC

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

BENEFICIARY CHARACTERISTIC

TABLE ND.5. AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH,

BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC

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

THERAPEUTIC CATEGORY

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

TABLE ND.8. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING

FACILITY RESIDENTS, BY BENEFICIARY CHARACTERISTIC

TABLE ND.9. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING

FACILITY RESIDENTS, BY BRAND STATUS AND THERAPEUTIC CATEGORY

TABLE ND.10-10D. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS

AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY TOP 10 DRUG GROUP

TABLE ND.11. USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D

AMONG NONDUALS, BY BENEFICIARY CHARACTERISTIC

TABLE ND.12. USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D

AMONG NONDUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC

TABLE ND.13. USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D

FOR SELECTED DRUG CATEGORIES AMONG NONDUALS

FOR DUAL ELIGIBLE BENEFICIARIES

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

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

BY BENEFICIARY CHARACTERISTIC

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

BENEFICIARY CHARACTERISTIC

TABLE D.5. AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY

BRAND STATUS AND BENEFICIARY CHARACTERISTIC

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

THERAPEUTIC CATEGORY

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

TABLE D.8. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING

FACILITY RESIDENTS, BY BENEFICIARY CHARACTERISTIC

TABLE D.9. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING

FACILITY RESIDENTS, BY BRAND STATUS AND THERAPEUTIC CATEGORY

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

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

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

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

SUPPLEMENTAL TABLES

SUPPLEMENTAL TABLE 1. MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES

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

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

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

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

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

APPENDIX TABLES

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

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

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

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

TABLE ND.2
CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a, b}
NONDUAL BENEFICIARIES, MARYLAND, 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	267,572	4,864	27,639	96,150	138,495	424	1,117,263	48,274	172,430	570,423	321,960	4,176
Age												
5 and younger	58,420	1	1,111	0	57,308	0	122,463	2	7,097	0	115,364	0
6-14	53,130	1	1,881	12	51,236	0	121,127	12	14,866	19	106,230	0
15-20	35,038	2	1,868	3,807	29,361	0	121,263	24	13,131	9,515	98,593	0
21-44	96,019	9	8,362	87,036	585	27	590,012	89	46,068	541,867	1,746	242
45-64	17,780	37	12,109	5,256	1	377	89,624	237	66,779	18,775	2	3,831
65-74	3,865	2,204	1,606	35	0	20	38,392	21,632	16,442	215	0	103
75-84	2,461	1,857	600	4	0	0	26,019	19,074	6,913	32	0	0
85 and older	855	753	102	0	0	0	8,338	7,204	1,134	0	0	0
Unknown	4	0	0	0	4	0	25	0	0	0	25	0
Gender												
Female	179,253	3,320	12,608	90,718	72,183	424	856,090	33,302	82,508	556,376	179,728	4,176
Male	88,319	1,544	15,031	5,432	66,312	0	261,173	14,972	89,922	14,047	142,232	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	82,229	970	9,966	37,362	33,699	232	393,844	9,286	59,733	236,827	85,696	2,302
African American	133,746	1,688	14,461	46,691	70,784	122	526,776	16,902	91,444	254,391	162,851	1,188
Other/unknown	51,597	2,206	3,212	12,097	34,012	70	196,643	22,086	21,253	79,205	73,413	686
Use of Nursing Facilities^c												
Entire year	1,838	496	1,340	1	1	0	19,289	5,130	14,146	1	12	0
Part year	1,465	264	1,173	26	1	1	11,964	2,570	9,215	160	8	11
None	264,269	4,104	25,126	96,123	138,493	423	1,086,010	40,574	149,069	570,262	321,940	4,165
Maintenance Assistance Status												
Cash	55,275	2,306	15,547	17,382	20,040	0	226,835	25,884	113,852	45,202	41,897	0
Medically needy	32,350	2,478	11,482	10,058	8,332	0	129,573	22,093	54,318	30,178	22,984	0
Poverty-related	117,288	80	101	15,109	101,574	424	255,571	297	412	47,128	203,558	4,176
Other/unknown	62,659	0	509	53,601	8,549	0	505,284	0	3,848	447,915	53,521	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	84,640	4,791	14,431	48,560	16,440	418	643,825	47,797	121,668	393,379	76,849	4,132
FFS part year, with Rx claims	42,414	62	7,831	17,167	17,348	6	139,187	408	30,994	66,678	41,063	44
FFS part year, no Rx claims	140,518	11	5,377	30,423	104,707	0	334,251	69	19,768	110,366	204,048	0

Source: Data for this table are from the MAX 2007 file for Maryland, released by CMS in 3/2010. This table was produced on 04/19/2011.

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

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

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

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

TABLE ND.3
ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC^{a, b}
NONDUAL BENEFICIARIES, MARYLAND, 2007

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	24.0	3.4	\$330	\$98	\$6,465	5.1	267,572
Age							
5 and younger	12.1	0.5	88	173	3,942	2.2	58,420
6-14	15.4	1.6	287	174	3,493	8.2	53,130
15-20	23.5	2.6	393	152	6,976	5.6	35,038
21-44	27.6	2.3	206	91	5,903	3.5	96,019
45-64	50.8	15.8	1,263	80	21,936	5.8	17,780
65-74	74.1	29.7	1,859	63	16,499	11.3	3,865
75-84	70.8	26.5	1,610	61	13,644	11.8	2,461
85 and older	54.0	17.3	927	54	17,974	5.2	855
Unknown	0.0	0.0	0	0	2,056	0.0	4
Basis of Eligibility^e							
Aged	68.0	24.1	1,473	61	15,443	9.5	4,864
Disabled	56.5	18.7	1,934	104	30,439	6.4	27,639
Adults	25.9	1.2	75	60	3,834	1.9	96,150
Children	14.4	1.0	141	143	3,168	4.5	138,495
Unknown	91.3	26.4	2,188	83	14,214	15.4	424
Gender							
Female	24.6	3.0	238	80	5,453	4.4	179,253
Male	22.6	4.2	516	124	8,519	6.1	88,319
Unknown	0.0	0.0	0	0	0	0.0	0
Race							
White	31.0	4.3	393	92	6,980	5.6	82,229
African American	22.1	3.2	321	102	6,751	4.8	133,746
Other/unknown	17.6	2.4	252	103	4,903	5.1	51,597
Use of Nursing Facilities^f							
Entire year	92.6	86.4	5,964	69	82,631	7.2	1,838
Part year	93.6	60.3	4,582	76	79,323	5.8	1,465
None	23.1	2.5	267	108	5,531	4.8	264,269
Maintenance Assistance Status							
Cash	36.8	9.0	901	101	12,779	7.1	55,275
Medically needy	36.8	7.3	598	82	13,385	4.5	32,350
Poverty related	14.8	0.6	86	132	2,762	3.1	117,288
Other/unknown	23.2	1.5	145	96	4,253	3.4	62,659

Source: Data for this table are from the MAX 2007 file for Maryland, released by CMS in 3/2010. This table was produced on 04/19/2011.

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

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

c. In eight states (DE, IA, IL, NE, NY, 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 ND.4
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a, b}
 NONDUAL BENEFICIARIES, MARYLAND, 2007

Beneficiary Characteristics	Mean Number of Rx	Mean Rx \$	Number of Rx, Percentage with:							Mean \$, All Medicaid FFS ^d	Number	
			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		Beneficiaries	Benefit Months
All	0.8	\$79	5.1	76.0	13.8	3.0	3.7	2.1	1.4	\$1,548	267,572	1,117,263
Age												
5 and younger	0.2	42	2.2	87.9	8.9	1.8	1.2	0.2	0.1	1,880	58,420	122,463
6-14	0.7	126	8.2	84.6	7.3	2.4	2.8	1.7	1.2	1,532	53,130	121,127
15-20	0.7	114	5.6	76.5	14.3	2.9	3.4	2.0	1.0	2,016	35,038	121,263
21-44	0.4	34	3.5	72.4	19.5	2.6	2.8	1.5	1.1	961	96,019	590,012
45-64	3.1	251	5.8	49.2	15.2	7.1	12.1	9.1	7.4	4,352	17,780	89,624
65-74	3.0	187	11.3	25.9	21.0	12.5	23.7	12.6	4.2	1,661	3,865	38,392
75-84	2.5	152	11.8	29.2	22.4	10.8	24.3	11.1	2.2	1,291	2,461	26,019
85 and older	1.8	95	5.2	46.0	19.8	7.6	17.1	8.3	1.3	1,843	855	8,338
Unknown	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	329	4	25
Basis of Eligibility^e												
Aged	2.4	149	9.5	32.0	22.8	11.7	21.2	9.8	2.4	1,556	4,864	48,274
Disabled	3.0	310	6.4	43.5	17.5	7.5	14.0	10.0	7.5	4,879	27,639	172,430
Adults	0.2	13	1.9	74.1	19.4	2.5	2.3	1.0	0.6	646	96,150	570,423
Children	0.4	61	4.5	85.6	8.9	2.0	1.9	1.0	0.7	1,363	138,495	321,960
Unknown	2.7	222	15.4	8.7	32.5	19.3	28.5	9.2	1.7	1,443	424	4,176
Gender												
Female	0.6	50	4.4	75.4	15.7	2.8	3.3	1.8	1.1	1,142	179,253	856,090
Male	1.4	174	6.1	77.4	10.1	3.3	4.5	2.8	1.9	2,881	88,319	261,173
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	0.9	82	5.6	69.0	17.2	3.4	4.9	3.2	2.4	1,457	82,229	393,844
African American	0.8	82	4.8	77.9	12.9	2.9	3.4	1.9	1.1	1,714	133,746	526,776
Other/unknown	0.6	66	5.1	82.4	10.9	2.3	2.7	1.0	0.6	1,287	51,597	196,643
Use of Nursing Facilities^f												
Entire year	8.2	568	7.2	7.4	5.4	4.6	16.9	35.6	30.1	7,874	1,838	19,289
Part year	7.4	561	5.8	6.4	7.2	6.1	24.2	28.7	27.4	9,713	1,465	11,964
None	0.6	65	4.8	76.9	13.9	2.9	3.5	1.7	1.0	1,346	264,269	1,086,010
Maintenance Assistance Status												
Cash	2.2	220	7.1	63.2	14.5	5.4	8.2	5.2	3.5	3,114	55,275	226,835
Medically needy	1.8	149	4.5	63.2	15.2	5.7	8.3	4.8	2.8	3,342	32,350	129,573
Poverty related	0.3	39	3.1	85.2	9.7	2.1	1.8	0.7	0.5	1,268	117,288	255,571
Other/unknown	0.2	18	3.4	76.8	20.4	0.9	1.0	0.6	0.3	527	62,659	505,284

Source: Data for this table are from the MAX 2007 file for Maryland, released by CMS in 3/2010. This table was produced on 04/19/2011.

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

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

c. In eight states (DE, IA, IL, NE, NY, 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 ND.5
 AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC^{a, b, c}
 NONDUAL BENEFICIARIES, MARYLAND, 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	0.8	\$79	\$98	0.3	\$65	\$218	0.0	\$3	\$113	0.5	\$11	\$23
Age												
5 and younger	0.2	42	173	0.1	37	500	0.0	1	88	0.2	4	24
6-14	0.7	126	174	0.4	112	285	0.0	3	123	0.3	11	36
15-20	0.7	114	152	0.4	99	269	0.0	4	156	0.4	11	30
21-44	0.4	34	91	0.1	27	201	0.0	1	131	0.2	6	25
45-64	3.1	251	80	1.0	199	205	0.1	8	102	2.1	43	21
65-74	3.0	187	63	1.0	143	144	0.1	9	93	1.9	36	19
75-84	2.5	152	61	0.9	117	130	0.1	8	88	1.5	27	18
85 and older	1.8	95	54	0.7	73	112	0.1	4	74	1.1	18	17
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility^d												
Aged	2.4	149	61	0.9	115	132	0.1	7	88	1.5	27	18
Disabled	3.0	310	104	1.0	256	249	0.1	10	116	1.9	44	23
Adults	0.2	13	60	0.1	9	122	0.0	0	115	0.1	3	24
Children	0.4	61	143	0.2	54	252	0.0	1	120	0.2	6	27
Unknown	2.7	222	83	0.9	181	197	0.1	10	137	1.7	31	19
Gender												
Female	0.6	50	80	0.2	39	178	0.0	2	109	0.4	9	23
Male	1.4	174	124	0.6	150	271	0.0	5	117	0.8	20	24
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Race												
White	0.9	82	92	0.3	66	197	0.0	3	122	0.5	13	24
African American	0.8	82	102	0.3	68	234	0.0	2	108	0.5	11	23
Other/unknown	0.6	66	103	0.2	56	228	0.0	2	103	0.4	8	22
Use of Nursing Facilities^e												
Entire year	8.2	568	69	2.5	445	177	0.2	20	93	5.5	102	19
Part year	7.4	561	76	2.2	437	200	0.2	19	89	5.0	105	21
None	0.6	65	108	0.2	55	228	0.0	2	121	0.3	9	25
Maintenance Assistance Status												
Cash	2.2	220	101	0.8	182	240	0.1	7	113	1.4	31	23
Medically needy	1.8	149	82	0.7	121	185	0.1	6	106	1.1	23	21
Poverty related	0.3	39	132	0.1	35	266	0.0	1	132	0.2	4	23
Other/unknown	0.2	18	96	0.1	14	162	0.0	1	118	0.1	3	34

Source: Data for this table are from the MAX 2007 file for Maryland, released by CMS in 3/2010. This table was produced on 04/19/2011.

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 Maryland, 0.3 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

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

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

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

TABLE ND.6
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d}
 NONDUAL BENEFICIARIES, MARYLAND, 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 of Users	As a Percentage of All Benes	Number of Benefit Months
		Generic	Generic	Generic		Generic	Generic	Generic		Generic							
Anti-infective Agents	0.5	0.2	0.0	0.3	\$114	\$101	\$1	\$12	\$207	\$492	\$145	\$35	66,307	\$13,753,106	18,611	7.0	120,881
Biologicals	0.3	0.3	0.0	0.0	716	716	0	0	2342	2,342	0	0	573	1,342,164	243	0.1	1,875
Antineoplastic Agents	0.6	0.3	0.0	0.3	183	166	2	15	330	613	2,497	54	3,877	1,281,219	806	0.3	6,991
Endocrine/Metabolic Drugs	0.6	0.3	0.0	0.3	38	29	1	9	68	115	83	28	100,177	6,777,666	21,183	7.9	176,838
Cardiovascular Agents	1.4	0.3	0.1	1.1	53	27	7	19	37	100	80	18	138,962	5,171,994	12,234	4.6	98,322
Respiratory Agents	0.7	0.3	0.0	0.3	55	48	2	5	82	144	80	16	53,134	4,377,399	12,045	4.5	80,284
Gastrointestinal Agents	0.8	0.3	0.0	0.4	67	50	4	13	89	154	148	32	55,348	4,917,748	8,569	3.2	73,612
Genitourinary Agents	0.5	0.2	0.0	0.3	26	15	1	11	55	85	62	37	11,504	635,764	3,447	1.3	24,518
CNS Drugs	1.6	0.7	0.0	0.9	171	154	2	16	104	209	92	18	195,368	20,402,198	22,731	8.5	118,968
Stimulants/Anti-obesity/Anorexia	1.7	1.4	0.0	0.3	195	182	1	12	112	132	57	35	31,856	3,571,902	5,295	2.0	18,306
Miscellaneous Psychological/Neurological Agents	0.5	0.5	0.0	0.0	110	106	0	5	213	223	0	106	4,115	875,455	973	0.4	7,936
Analgesics and Anesthetics	0.7	0.0	0.0	0.6	23	6	3	14	34	142	239	24	63,465	2,165,599	13,923	5.2	95,482
Neuromuscular Agents	1.3	0.5	0.1	0.7	116	87	10	19	93	173	191	28	89,885	8,326,302	10,341	3.9	71,666
Nutritional Products	0.5	0.0	0.0	0.4	10	2	0	8	22	50	18	20	18,817	419,849	6,781	2.5	41,431
Hematological Agents	0.8	0.3	0.0	0.5	336	329	0	6	408	947	19	14	27,846	11,358,019	3,944	1.5	33,816
Topical Products	0.4	0.1	0.0	0.3	19	12	1	6	46	105	70	20	34,726	1,602,582	11,366	4.2	83,432
Miscellaneous Products	0.5	0.3	0.0	0.2	187	171	6	10	360	622	403	45	3,483	1,253,279	700	0.3	6,697
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	13	0	0	0	56	0	0	0	1,158	65,320	606	0.2	4,904
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.	900,601	88,297,565	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2007 file for Maryland, released by CMS in 3/2010. This table was produced on 04/19/2011.

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 Maryland, 0.3 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 ND.7
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP^{a, b, c}
 NONDUAL BENEFICIARIES, MARYLAND, 2007

Top 10 Drug Groups	Users			Among Users			
	Total Medicaid Rx \$	Number of Users	As a Percentage of All Beneficiaries	Number of Benefit Months	Number of Rx per Benefit Month	\$ per Rx	Rx \$ per Benefit Month
ANTIPSYCHOTICS	\$9,315,082	5,993	2.2	53,039	0.8	\$208	\$176
ANTIVIRAL	9,091,556	2,722	1.0	24,413	0.7	535	372
MISC. HEMATOLOGICAL	7,906,850	1,201	0.4	11,241	0.6	1,176	703
ANTICONVULSANT	6,408,422	6,640	2.5	61,255	0.9	117	105
DIETARY PRODUCTS	4,172,149	1,044	0.4	11,614	0.7	511	359
ULCER DRUGS	3,615,490	6,787	2.5	64,753	0.5	108	56
ANTIASTHMATIC	2,816,622	9,335	3.5	77,691	0.4	85	36
CONTRACEPTIVES	2,323,469	13,301	5.0	121,157	0.4	52	19
MISC. ENDOCRINE	2,250,088	1,482	0.6	15,977	0.6	229	141
HEMATOPOIETIC AGENTS	2,212,009	2,652	1.0	23,853	0.5	202	93
Total	50,111,737	51,157	n.a.	464,993	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2007 file for Maryland, released by CMS in 3/2010. This table was produced on 04/19/2011.

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 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.

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, MARYLAND, 2007

Beneficiary Characteristics	All Top 10 Drug Groups			ANTIPSYCHOTICS					ANTIVIRAL				
	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	263,336	\$50,111,737	5,993	2.2	53,039	0.8	\$176	2,722	1.0	24,413	0.7	\$372	
Female													
All Females	155,758	21,191,464	2,826	1.6	25,147	0.8	155	1,445	0.8	12,602	0.6	327	
Female, Disabled													
All Ages	71,121	11,818,537	1,576	12.5	14,533	0.8	152	771	6.1	7,042	0.7	370	
5 and younger	2,454	429,323	0	0.0	0	0.0	0	4	0.8	48	0.9	136	
6-14	7,052	1,707,554	48	6.9	497	0.8	206	78	11.3	890	0.7	302	
15-20	5,106	1,376,445	96	13.2	936	0.9	189	82	11.3	931	0.5	407	
21-44	13,951	2,570,978	427	12.9	3,457	0.6	133	275	8.3	2,334	0.7	335	
45-64	28,645	4,170,150	787	14.0	7,151	0.8	146	307	5.5	2,559	0.8	433	
65-74	10,759	1,216,704	185	15.0	2,108	1.1	180	19	1.5	211	0.6	282	
75-84	2,947	328,631	30	6.3	360	0.6	139	6	1.3	69	0.1	7	
85 and older	207	18,752	3	4.1	24	0.2	13	0	0.0	0	0.0	0	
Female, Other Eligibles													
All Ages	84,637	9,372,927	1,250	0.8	10,614	0.8	160	674	0.4	5,560	0.5	272	
5 and younger	2,400	582,873	0	0.0	0	0.0	0	36	0.1	284	0.7	107	
6-14	5,886	1,661,424	192	0.7	1,869	0.9	176	145	0.6	1,640	0.7	343	
15-20	14,543	2,208,938	456	2.1	4,139	1.0	204	151	0.7	1,540	0.6	375	
21-44	42,234	2,696,763	283	0.3	1,437	0.4	88	244	0.3	1,210	0.4	179	
45-64	3,026	395,578	89	2.1	662	0.3	60	56	1.3	396	0.4	184	
65-74	7,873	890,837	102	6.8	1,127	0.9	158	24	1.6	279	0.4	187	
75-84	6,604	748,226	91	7.0	1,000	0.6	156	16	1.2	191	0.1	8	
85 and older	2,071	188,288	37	6.9	380	0.6	65	2	0.4	20	0.1	11	
Male													
All Males	107,578	28,920,273	3,167	3.6	27,892	0.9	194	1,277	1.4	11,811	0.8	421	
Male, Disabled													
All Ages	73,607	19,930,901	1,899	12.6	16,740	0.8	189	939	6.2	8,400	0.8	436	
5 and younger	3,304	1,584,778	2	0.3	24	0.3	50	7	1.1	84	0.8	151	
6-14	9,115	4,153,442	146	12.3	1,411	1.0	266	61	5.1	732	0.7	334	
15-20	8,614	3,420,034	248	21.7	2,525	0.9	214	83	7.3	968	0.7	451	
21-44	17,771	4,582,639	627	12.4	4,734	0.8	193	265	5.2	2,069	0.8	447	
45-64	30,986	5,724,761	803	12.4	7,263	0.8	163	511	7.9	4,442	0.9	455	
65-74	2,870	359,630	55	14.7	609	1.0	207	11	2.9	93	0.4	240	
75-84	833	97,275	14	11.1	145	0.8	183	1	0.8	12	0.1	18	
85 and older	114	8,342	4	14.3	29	0.4	67	0	0.0	0	0.0	0	
Male, Other Eligibles													
All Ages	33,971	8,989,372	1,268	1.7	11,152	0.9	201	338	0.5	3,411	0.7	385	
5 and younger	2,730	1,647,162	5	0.0	21	0.4	90	35	0.1	326	0.8	161	
6-14	9,741	3,138,723	329	1.3	2,845	1.1	221	114	0.4	1,255	0.8	376	
15-20	11,655	3,012,653	667	5.9	5,908	1.0	215	117	1.0	1,305	0.8	498	
21-44	803	158,760	70	1.7	359	0.6	112	35	0.8	212	0.4	235	
45-64	580	84,524	21	1.5	150	0.5	120	13	0.9	71	0.5	324	
65-74	4,938	589,556	103	13.7	1,117	0.9	170	17	2.3	158	0.8	401	
75-84	2,710	283,435	56	9.9	576	0.8	152	6	1.1	72	0.1	5	
85 and older	814	74,559	17	8.0	176	0.4	51	1	0.5	12	0.1	1	
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 Maryland, released by CMS in 3/2010. This table was produced on 04/19/2011.

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 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.

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, MARYLAND, 2007

Beneficiary Characteristics	MISC. HEMATOLOGICAL					ANTICONVULSANT					DIETARY PRODUCTS				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	1,201	0.4	11,241	0.6	\$703	6,640	2.5	61,255	0.9	\$105	1,044	0.4	11,614	0.7	\$359
Female															
All Females	652	0.4	6,294	0.6	70	3,507	2.0	31,521	0.8	96	464	0.3	5,142	0.7	273
Female, Disabled															
All Ages	399	3.2	3,745	0.6	69	2,257	17.9	21,635	0.9	102	333	2.6	3,772	0.7	284
5 and younger	0	0.0	0	0.0	0	59	11.9	684	0.7	111	80	16.2	836	0.7	237
6-14	0	0.0	0	0.0	0	204	29.5	2,298	0.8	166	137	19.8	1,596	0.7	301
15-20	2	0.3	19	0.5	65	157	21.6	1,617	1.0	193	54	7.4	637	0.8	368
21-44	30	0.9	239	0.5	44	582	17.6	4,945	0.9	117	55	1.7	637	0.7	239
45-64	235	4.2	2,021	0.6	68	998	17.8	9,180	0.9	73	6	0.1	54	0.4	99
65-74	96	7.8	1,051	0.6	77	202	16.4	2,252	0.8	66	1	0.1	12	0.1	46
75-84	33	7.0	383	0.6	69	54	11.4	647	0.6	46	0	0.0	0	0.0	0
85 and older	3	4.1	32	0.7	71	1	1.4	12	0.4	6	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	253	0.2	2,549	0.6	71	1,250	0.8	9,886	0.8	84	131	0.1	1,370	0.7	245
5 and younger	0	0.0	0	0.0	0	48	0.2	452	0.9	157	57	0.2	529	0.6	238
6-14	1	0.0	12	0.1	494	122	0.5	1,082	1.1	172	43	0.2	487	0.7	273
15-20	0	0.0	0	0.0	0	241	1.1	2,202	1.1	134	26	0.1	312	0.7	224
21-44	17	0.0	93	0.3	36	406	0.5	1,977	0.5	64	1	0.0	5	0.4	603
45-64	36	0.8	186	0.5	64	147	3.5	1,071	0.4	42	0	0.0	0	0.0	0
65-74	74	4.9	848	0.6	74	146	9.7	1,593	0.7	42	2	0.1	14	0.5	86
75-84	97	7.5	1,101	0.6	69	100	7.7	1,116	0.6	30	1	0.1	11	0.4	157
85 and older	28	5.2	309	0.6	70	40	7.4	393	0.5	24	1	0.2	12	0.4	67
Male															
All Males	549	0.6	4,947	0.6	1,510	3,133	3.5	29,734	0.9	114	580	0.7	6,472	0.7	428
Male, Disabled															
All Ages	369	2.5	3,242	0.6	1,511	2,313	15.4	22,327	0.9	111	393	2.6	4,412	0.7	490
5 and younger	5	0.8	60	0.9	12,627	69	11.2	758	0.7	104	93	15.1	981	0.7	539
6-14	8	0.7	96	0.9	11,434	236	19.8	2,695	0.8	139	148	12.4	1,738	0.7	661
15-20	6	0.5	72	0.8	19,292	224	19.6	2,477	1.0	171	78	6.8	900	0.7	314
21-44	40	0.8	294	0.5	3,919	714	14.1	6,429	0.9	120	61	1.2	679	0.7	249
45-64	268	4.1	2,262	0.6	207	999	15.4	9,231	1.0	82	11	0.2	92	0.6	351
65-74	27	7.2	299	0.8	83	56	15.0	583	1.1	118	2	0.5	22	0.2	92
75-84	11	8.7	113	0.6	74	14	11.1	142	0.5	28	0	0.0	0	0.0	0
85 and older	4	14.3	46	0.3	44	1	3.6	12	0.9	11	0	0.0	0	0.0	0
Male, Other Eligibles															
All Ages	180	0.2	1,705	0.6	1,506	820	1.1	7,407	1.0	122	187	0.3	2,060	0.7	293
5 and younger	5	0.0	56	0.7	22,231	38	0.1	386	0.7	76	72	0.2	735	0.6	248
6-14	11	0.0	127	0.8	7,406	207	0.8	1,986	1.1	164	69	0.3	820	0.8	289
15-20	2	0.0	14	0.5	20,181	276	2.4	2,549	1.1	156	41	0.4	463	0.7	378
21-44	14	0.3	84	0.4	40	84	2.0	388	0.5	65	2	0.0	21	0.6	170
45-64	32	2.3	157	0.4	53	46	3.3	277	0.5	42	1	0.1	3	1.0	254
65-74	64	8.5	702	0.6	66	106	14.1	1,168	0.9	66	2	0.3	18	0.8	289
75-84	36	6.3	387	0.7	81	48	8.5	488	0.9	70	0	0.0	0	0.0	0
85 and older	16	7.5	178	0.7	61	15	7.0	165	0.5	26	0	0.0	0	0.0	0
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2007 file for Maryland, released by CMS in 3/2010. This table was produced on 04/19/2011.
 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 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.

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, MARYLAND, 2007

Beneficiary Characteristics	ULCER DRUGS					ANTIASTHMATIC					CONTRACEPTIVES				
	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	6,787	2.5	64,753	0.5	\$56	9,335	3.5	77,691	0.4	\$36	13,301	5.0	121,157	0.4	\$19
Female															
All Females	4,000	2.2	38,118	0.5	53	5,205	2.9	43,149	0.4	35	13,298	7.4	121,121	0.4	19
Female, Disabled															
All Ages	2,244	17.8	22,450	0.5	57	2,639	20.9	25,650	0.4	37	202	1.6	2,048	0.4	18
5 and younger	96	19.4	928	0.5	52	195	39.4	2,011	0.4	42	0	0.0	0	0.0	0
6-14	166	24.0	1,902	0.6	89	329	47.6	3,778	0.4	50	16	2.3	182	0.3	19
15-20	92	12.7	1,024	0.6	80	126	17.3	1,383	0.4	40	64	8.8	703	0.3	14
21-44	384	11.6	3,650	0.5	62	361	10.9	3,249	0.5	30	113	3.4	1,068	0.4	19
45-64	963	17.2	8,798	0.5	48	1,062	18.9	8,911	0.4	33	9	0.2	95	0.5	20
65-74	393	31.9	4,374	0.5	54	434	35.2	4,781	0.4	37	0	0.0	0	0.0	0
75-84	136	28.7	1,612	0.5	58	124	26.2	1,441	0.4	36	0	0.0	0	0.0	0
85 and older	14	18.9	162	0.4	38	8	10.8	96	0.3	35	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	1,756	1.1	15,668	0.4	48	2,566	1.5	17,499	0.4	32	13,096	7.9	119,073	0.4	19
5 and younger	133	0.5	864	0.5	50	380	1.3	2,069	0.4	34	0	0.0	0	0.0	0
6-14	74	0.3	686	0.5	68	416	1.6	2,324	0.4	38	23	0.1	148	0.4	17
15-20	102	0.5	841	0.6	68	300	1.4	1,998	0.3	29	1,972	9.0	15,929	0.3	17
21-44	320	0.4	1,574	0.3	29	621	0.7	2,928	0.3	27	11,064	13.3	102,653	0.4	20
45-64	260	6.1	2,015	0.4	50	283	6.6	1,916	0.4	32	37	0.9	343	0.4	19
65-74	417	27.7	4,669	0.4	46	259	17.2	2,794	0.4	33	0	0.0	0	0.0	0
75-84	362	28.0	4,072	0.4	48	236	18.3	2,646	0.3	31	0	0.0	0	0.0	0
85 and older	88	16.3	947	0.5	54	71	13.1	824	0.5	32	0	0.0	0	0.0	0
Male															
All Males	2,787	3.2	26,635	0.6	59	4,130	4.7	34,542	0.5	38	3	0.0	36	0.2	29
Male, Disabled															
All Ages	1,960	13.0	19,196	0.6	60	2,232	14.8	21,891	0.5	39	1	0.0	12	0.1	7
5 and younger	138	22.4	1,357	0.6	52	291	47.2	2,894	0.4	40	0	0.0	0	0.0	0
6-14	196	16.5	2,309	0.6	73	390	32.8	4,431	0.4	42	0	0.0	0	0.0	0
15-20	146	12.8	1,665	0.6	85	235	20.6	2,596	0.5	53	0	0.0	0	0.0	0
21-44	446	8.8	4,331	0.6	65	370	7.3	3,683	0.5	38	0	0.0	0	0.0	0
45-64	912	14.0	8,246	0.5	49	808	12.4	6,770	0.5	30	1	0.0	12	0.1	7
65-74	84	22.5	866	0.7	63	91	24.3	975	0.5	43	0	0.0	0	0.0	0
75-84	31	24.6	349	0.5	58	41	32.5	473	0.7	64	0	0.0	0	0.0	0
85 and older	7	25.0	73	0.5	36	6	21.4	69	0.4	22	0	0.0	0	0.0	0
Male, Other Eligibles															
All Ages	827	1.1	7,439	0.5	59	1,898	2.6	12,651	0.4	36	2	0.0	24	0.3	40
5 and younger	174	0.6	1,033	0.5	49	560	1.9	2,926	0.4	28	1	0.0	12	0.1	63
6-14	96	0.4	1,063	0.7	99	620	2.4	3,683	0.4	42	0	0.0	0	0.0	0
15-20	101	0.9	917	0.6	76	295	2.6	2,281	0.4	35	0	0.0	0	0.0	0
21-44	56	1.3	294	0.3	34	74	1.8	362	0.4	33	0	0.0	0	0.0	0
45-64	49	3.5	302	0.4	36	56	4.0	252	0.4	35	0	0.0	0	0.0	0
65-74	192	25.5	2,082	0.5	45	156	20.7	1,687	0.5	42	0	0.0	0	0.0	0
75-84	124	21.8	1,362	0.5	53	101	17.8	1,100	0.5	35	1	0.2	12	0.4	18
85 and older	35	16.4	386	0.6	67	36	16.9	360	0.4	31	0	0.0	0	0.0	0
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2007 file for Maryland, released by CMS in 3/2010. This table was produced on 04/19/2011.
 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 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.

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, MARYLAND, 2007

Beneficiary Characteristics	MISC. ENDOCRINE					HEMATOPOIETIC AGENTS					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	1,482	0.6	15,977	0.6	\$141	2,652	1.0	23,853	0.5	\$93	267,572	1,117,263
Female												
All Females	1,112	0.6	12,183	0.6	102	1,559	0.9	13,600	0.4	88	179,251	856,078
Female, Disabled												
All Ages	510	4.0	5,556	0.6	121	823	6.5	7,799	0.5	69	12,608	82,508
5 and younger	11	2.2	112	0.6	103	26	5.3	210	0.3	19	495	3,056
6-14	16	2.3	173	0.6	574	19	2.7	228	0.4	74	691	6,080
15-20	18	2.5	207	0.7	485	19	2.6	206	0.5	118	727	4,959
21-44	55	1.7	594	0.7	164	170	5.1	1,493	0.5	98	3,303	18,265
45-64	152	2.7	1,479	0.6	122	428	7.6	3,915	0.5	80	5,612	30,832
65-74	159	12.9	1,806	0.6	64	129	10.5	1,366	0.4	18	1,232	12,940
75-84	89	18.8	1,065	0.6	60	32	6.8	381	0.4	34	474	5,529
85 and older	10	13.5	120	0.7	55	0	0.0	0	0.0	0	74	847
Female, Other Eligibles												
All Ages	602	0.4	6,627	0.6	85	736	0.4	5,801	0.4	113	166,643	773,570
5 and younger	11	0.0	124	0.9	1,252	28	0.1	152	0.6	573	28,154	56,351
6-14	23	0.1	247	0.5	190	15	0.1	140	0.6	1,872	25,621	52,446
15-20	23	0.1	233	0.9	182	82	0.4	528	0.4	2	21,795	79,168
21-44	12	0.0	75	0.3	57	282	0.3	1,493	0.2	54	83,477	533,766
45-64	54	1.3	550	0.6	52	54	1.3	411	0.3	70	4,258	18,439
65-74	216	14.4	2,371	0.6	51	115	7.6	1,290	0.4	80	1,505	14,734
75-84	217	16.8	2,500	0.6	53	105	8.1	1,190	0.4	59	1,293	13,490
85 and older	46	8.5	527	0.6	62	55	10.2	597	0.4	36	540	5,176
Male												
All Males	370	0.4	3,794	0.6	267	1,093	1.2	10,253	0.5	99	88,317	261,160
Male, Disabled												
All Ages	234	1.6	2,464	0.6	260	845	5.6	7,843	0.5	118	15,031	89,922
5 and younger	5	0.8	60	0.7	282	28	4.5	250	0.4	5	616	4,041
6-14	33	2.8	362	0.7	839	28	2.4	324	0.7	791	1,190	8,786
15-20	25	2.2	264	0.5	227	23	2.0	231	0.4	41	1,141	8,172
21-44	79	1.6	828	0.6	147	169	3.3	1,537	0.4	71	5,059	27,803
45-64	80	1.2	814	0.6	161	546	8.4	4,976	0.6	107	6,497	35,947
65-74	11	2.9	124	0.6	55	40	10.7	393	0.5	31	374	3,502
75-84	1	0.8	12	0.3	27	9	7.1	108	0.6	67	126	1,384
85 and older	0	0.0	0	0.0	0	2	7.1	24	0.6	3	28	287
Male, Other Eligibles												
All Ages	136	0.2	1,330	0.7	280	248	0.3	2,410	0.4	38	73,286	171,238
5 and younger	4	0.0	48	0.6	72	27	0.1	185	0.3	2	29,155	59,015
6-14	63	0.2	548	0.7	468	22	0.1	222	0.5	86	25,628	53,815
15-20	34	0.3	345	0.8	252	8	0.1	80	0.4	33	11,375	28,964
21-44	2	0.0	13	0.2	159	14	0.3	79	0.4	160	4,180	10,178
45-64	1	0.1	9	0.7	53	15	1.1	119	0.3	24	1,413	4,406
65-74	14	1.9	167	0.7	83	80	10.6	826	0.4	36	754	7,216
75-84	10	1.8	116	0.4	35	60	10.6	652	0.4	23	568	5,616
85 and older	8	3.8	84	0.8	61	22	10.3	247	0.5	34	213	2,028
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	4	25

Source: Data for this table are from the MAX 2007 file for Maryland, released by CMS in 3/2010. This table was produced on 04/19/2011.
 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 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.

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, MARYLAND, 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	\$568	8.2	1,838	19,289
Age				
0-64	688	9.5	1,227	12,929
65-74	476	7.7	253	2,718
75-84	302	5.4	180	1,912
85 and older	109	2.4	178	1,730
Unknown	0	0.0	0	0
Gender				
Female	538	8.2	977	10,413
Male	604	8.3	861	8,876
Unknown	0	0.0	0	0
Race				
White	494	8.4	580	6,037
African American	616	8.2	1,052	11,205
Other/unknown	530	8.2	206	2,047
Basis of Eligibility^c				
Aged	282	5.0	496	5,130
Disabled	672	9.4	1,340	14,146
Adults	549	15.0	1	1
Children	119	10.3	1	12
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 2007 file for Maryland, released by CMS in 3/2010. This table was produced on 04/19/2011.

a. Table ND.8 includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their 2007 Medicaid enrollment. A total of 1,465 beneficiaries who were in nursing facilities for part of their enrollment and their 11,964 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, MARYLAND, 2007

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per Rx				Users				
	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total Number of Rx	Total Rx \$	Number of Users	As a Percentage of All-Year Nursing Facility Residents	Number of Benefit Months
Anti-infective Agents	1.0	0.5	0.0	0.5	\$216	\$199	\$1	\$17	\$216	\$392	\$127	\$34	11,382	\$2,460,381	1,048	57.0	11,367
Biologicals	0.1	0.1	0.0	0.0	4	4	0	0	41	41	0	0	13	530	12	0.7	130
Antineoplastic Agents	0.6	0.2	0.0	0.4	104	80	0	24	176	339	0	67	382	67,271	70	3.8	649
Endocrine/Metabolic Drugs	1.3	0.5	0.0	0.7	68	58	2	8	53	110	95	11	10,974	585,844	785	42.7	8,577
Cardiovascular Agents	2.2	0.3	0.1	1.8	58	23	9	26	26	83	69	14	30,011	776,866	1,244	67.7	13,482
Respiratory Agents	0.8	0.3	0.0	0.5	37	30	2	5	45	96	72	10	6,184	277,601	696	37.9	7,433
Gastrointestinal Agents	1.1	0.5	0.0	0.6	64	52	2	9	56	109	117	15	13,040	734,299	1,071	58.3	11,510
Genitourinary Agents	0.6	0.2	0.0	0.4	30	16	1	13	47	68	39	35	2,471	116,399	355	19.3	3,928
CNS Drugs	1.8	0.8	0.0	1.0	159	138	2	19	90	178	81	19	24,790	2,224,812	1,279	69.6	14,008
Stimulants/Anti-obesity/Anorexia	0.9	0.3	0.0	0.6	52	45	0	7	61	161	0	12	401	24,536	43	2.3	471
Miscellaneous Psychological/Neurological Agents	0.8	0.8	0.0	0.0	177	175	0	2	227	231	0	89	1,546	350,285	184	10.0	1,978
Analgesics and Anesthetics	1.5	0.1	0.0	1.4	45	6	8	30	30	127	166	21	15,113	449,485	931	50.7	10,099
Neuromuscular Agents	1.7	0.6	0.0	1.2	111	76	4	31	64	135	206	27	19,706	1,264,666	1,032	56.1	11,357
Nutritional Products	0.6	0.0	0.0	0.6	13	1	0	12	19	49	11	19	4,277	83,143	612	33.3	6,617
Hematological Agents	1.3	0.5	0.0	0.8	128	119	0	9	101	257	5	11	11,003	1,113,102	822	44.7	8,691
Topical Products	0.6	0.2	0.0	0.4	25	16	3	6	44	95	63	16	6,502	284,057	1,024	55.7	11,287
Miscellaneous Products	0.4	0.1	0.0	0.3	63	57	0	6	176	846	0	21	753	132,360	194	10.6	2,088
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	15	0	0	0	78	0	0	0	200	15,580	94	5.1	1,015
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.	158,748	10,961,217	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2007 file for Maryland, released by CMS in 3/2010. This table was produced on 04/19/2011.

- 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 2007. A total of 1,465 beneficiaries who were in nursing facilities for part of their enrollment and their 11,964 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 Maryland, 0.3 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.
- Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; CNS = Central Nervous System; MAX = Medicaid Analytic Extract; n.a. = not applicable; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE ND.10
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS,
 BY TOP-10 DRUG GROUP^{a, b, c, d}
 NONDUAL BENEFICIARIES, MARYLAND, 2007

Top 10 Drug Groups in Nursing Facilities	Total Medicaid Rx \$	Users			Among Users			
		Number of Users	As a Percentage of All-Year Nursing Facility Residents	Number of Benefit Months	Number of Rx per Benefit Month	\$ per Rx	Rx \$ per Benefit Month	
ANTIVIRAL	\$1,805,075	336	18.3	3,473	1.0	\$498	\$520	
ANTIPSYCHOTICS	1,651,174	887	48.3	9,899	0.9	183	167	
ANTICONVULSANT	1,122,679	1,180	64.2	12,983	1.1	77	86	
HEMATOPOIETIC AGENTS	607,975	561	30.5	6,021	0.7	154	101	
ULCER DRUGS	577,483	989	53.8	10,638	0.6	84	54	
ANTIDIABETIC	515,042	1,011	55.0	11,206	0.8	54	46	
ANTIDEPRESSANTS	481,374	1,222	66.5	13,541	0.8	45	36	
ANALGESICS - Narcotic	395,507	1,144	62.2	12,403	1.0	31	32	
MISC. ANTI-INFECTIVES	370,256	763	41.5	8,217	0.3	136	45	
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	350,285	214	11.6	2,299	0.7	227	152	
Total	7,876,850	8,307	n.a.	90,680	n.a.	n.a.	n.a.	

Source: Data for this table are from the MAX 2007 file for Maryland, released by CMS in 3/2010. This table was produced on 04/19/2011.

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 2007. A total of 1,465 beneficiaries who were in nursing facilities for part of their enrollment and their 11,964 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.

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, MARYLAND, 2007

Beneficiary Characteristics	All Top 10 Drug Groups		ANTIVIRAL					ANTIPSYCHOTICS				
	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	75,511	\$7,876,850	336	18.3	3,473	1.0	\$520	887	48.3	9,899	0.9	\$167
Female												
All Females	39,620	3,978,330	136	13.9	1,390	1.0	485	472	48.3	5,329	0.9	172
Female, Disabled												
All Ages	32,943	3,407,422	134	20.5	1,366	1.0	493	379	58.0	4,309	0.9	176
64 or younger	29,423	3,064,696	131	22.9	1,330	1.0	486	325	56.7	3,683	0.9	168
65-74	3,274	321,322	3	4.2	36	1.0	756	48	66.7	554	1.2	233
75-84	231	20,521	0	0.0	0	0.0	0	6	100.0	72	0.7	121
85 and older	15	883	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles												
All Ages	6,677	570,908	2	0.6	24	0.1	1	93	28.7	1,020	0.9	158
64 or younger	60	1,161	0	0.0	0	0.0	0	2	100.0	22	0.1	7
65-74	3,061	289,734	2	2.4	24	0.1	1	41	48.8	459	1.3	240
75-84	2,400	207,911	0	0.0	0	0.0	0	27	25.5	309	0.7	129
85 and older	1,156	72,102	0	0.0	0	0.0	0	23	17.4	230	0.6	48
Male												
All Males	35,891	3,898,520	200	23.2	2,083	1.1	543	415	48.2	4,570	0.9	161
Male, Disabled												
All Ages	31,502	3,532,347	199	29.0	2,071	1.1	546	337	49.1	3,734	0.9	163
64 or younger	30,174	3,432,987	198	30.5	2,059	1.1	549	325	50.1	3,612	0.9	162
65-74	1,191	86,751	1	3.1	12	0.1	143	10	31.3	110	0.9	180
75-84	92	8,534	0	0.0	0	0.0	0	2	50.0	12	1.3	307
85 and older	45	4,075	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male, Other Eligibles												
All Ages	4,389	366,173	1	0.6	12	0.1	7	78	44.8	836	0.8	151
64 or younger	169	5,846	0	0.0	0	0.0	0	1	33.3	12	1.1	8
65-74	2,322	202,393	0	0.0	0	0.0	0	42	64.6	465	0.9	163
75-84	1,496	134,578	1	1.6	12	0.1	7	29	45.3	294	0.8	165
85 and older	402	23,356	0	0.0	0	0.0	0	6	14.3	65	0.3	34
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 Maryland, released by CMS in 3/2010. This table was produced on 04/19/2011.

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 2007. A total of 1,465 beneficiaries who were in nursing facilities for part of their enrollment and their 11,964 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 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, MARYLAND, 2007

Beneficiary Characteristics	ANTICONVULSANT					HEMATOPOIETIC AGENTS					ULCER DRUGS				
	Number of Users	Users as % of All-	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
		Year Nursing Facility Residents					Year Nursing Facility Residents					Year Nursing Facility Residents			
All	1,180	64.2	12,983	1.1	\$87	561	30.5	6,021	0.7	\$101	989	53.8	10,638	0.6	\$54
Female															
All Females	594	60.8	6,580	1.1	78	264	27.0	2,917	0.6	108	505	51.7	5,611	0.6	55
Female, Disabled															
All Ages	499	76.4	5,565	1.1	83	197	30.2	2,153	0.6	102	394	60.3	4,422	0.7	54
64 or younger	446	77.8	4,959	1.1	83	173	30.2	1,879	0.7	113	343	59.9	3,861	0.7	53
65-74	51	70.8	582	1.0	79	23	31.9	262	0.4	27	47	65.3	513	0.7	62
75-84	2	33.3	24	2.1	134	1	16.7	12	0.3	1	3	50.0	36	0.7	74
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	50.0	12	0.1	7
Female, Other Eligibles															
All Ages	95	29.3	1,015	0.9	50	67	20.7	764	0.6	126	111	34.3	1,189	0.6	57
64 or younger	2	100.0	12	1.2	44	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	47	56.0	534	1.0	53	26	31.0	302	0.5	126	45	53.6	493	0.7	68
75-84	29	27.4	318	0.9	54	22	20.8	261	0.7	188	43	40.6	476	0.6	54
85 and older	17	12.9	151	0.5	28	19	14.4	201	0.5	46	23	17.4	220	0.6	40
Male															
All Males	586	68.1	6,403	1.2	96	297	34.5	3,104	0.7	94	484	56.2	5,027	0.6	54
Male, Disabled															
All Ages	510	74.2	5,572	1.2	98	241	35.1	2,504	0.7	108	392	57.1	4,052	0.6	53
64 or younger	485	74.7	5,305	1.2	99	231	35.6	2,424	0.7	110	368	56.7	3,833	0.6	52
65-74	23	71.9	255	1.1	88	10	31.3	80	0.8	52	18	56.3	169	0.7	67
75-84	2	50.0	12	1.7	78	0	0.0	0	0.0	0	4	100.0	36	0.6	68
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	100.0	14	1.0	97
Male, Other Eligibles															
All Ages	76	43.7	831	1.1	80	56	32.2	600	0.6	39	92	52.9	975	0.7	57
64 or younger	1	33.3	12	1.3	23	1	33.3	12	0.1	1	3	100.0	36	0.6	20
65-74	42	64.6	468	1.2	85	21	32.3	216	0.7	68	47	72.3	521	0.7	56
75-84	27	42.2	280	1.2	91	23	35.9	254	0.5	20	34	53.1	327	0.7	66
85 and older	6	14.3	71	0.5	21	11	26.2	118	0.6	29	8	19.0	91	0.7	54
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 Maryland, released by CMS in 3/2010. This table was produced on 04/19/2011.

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 2007. A total of 1,465 beneficiaries who were in nursing facilities for part of their enrollment and their 11,964 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.

Nondual Medicaid Beneficiaries

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, MARYLAND, 2007

Beneficiary Characteristics	ANTIDIABETIC					ANTIDEPRESSANTS					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	1,011	55.0	11,206	0.8	\$46	1,222	66.5	13,541	0.8	\$36	1,144	62.2	12,403	1.0	\$32
Female															
All Females	600	61.4	6,700	0.9	47	668	68.4	7,568	0.8	39	602	61.6	6,673	1.0	31
Female, Disabled															
All Ages	454	69.5	5,053	0.9	51	534	81.8	6,067	0.8	41	507	77.6	5,684	1.0	31
64 or younger	387	67.5	4,306	0.9	52	490	85.5	5,567	0.8	42	457	79.8	5,127	1.0	32
65-74	63	87.5	699	0.9	46	39	54.2	440	0.8	31	47	65.3	527	0.9	26
75-84	4	66.7	48	1.0	47	3	50.0	36	0.7	5	3	50.0	30	0.1	2
85 and older	0	0.0	0	0.0	0	2	100.0	24	0.5	30	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	146	45.1	1,647	0.7	36	134	41.4	1,501	0.7	28	95	29.3	989	0.8	32
64 or younger	2	100.0	22	0.7	9	1	50.0	11	1.2	14	2	100.0	22	0.7	6
65-74	56	66.7	641	0.8	42	53	63.1	612	0.8	34	34	40.5	374	1.0	45
75-84	69	65.1	766	0.7	35	44	41.5	478	0.7	23	36	34.0	393	0.8	34
85 and older	19	14.4	218	0.6	22	36	27.3	400	0.7	27	23	17.4	200	0.3	5
Male															
All Males	411	47.7	4,506	0.8	44	554	64.3	5,973	0.8	32	542	63.0	5,730	1.1	33
Male, Disabled															
All Ages	341	49.6	3,775	0.8	46	476	69.3	5,129	0.8	33	490	71.3	5,229	1.2	36
64 or younger	312	48.1	3,476	0.8	46	455	70.1	4,896	0.8	33	465	71.6	4,983	1.2	36
65-74	24	75.0	267	0.8	45	16	50.0	173	0.8	35	25	78.1	246	0.9	22
75-84	5	125.0	32	0.6	23	2	50.0	24	0.7	31	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	3	150.0	36	0.5	22	0	0.0	0	0.0	0
Male, Other Eligibles															
All Ages	70	40.2	731	0.7	35	78	44.8	844	0.7	27	52	29.9	501	0.5	7
64 or younger	3	100.0	36	0.9	28	2	66.7	24	0.8	40	1	33.3	12	3.3	39
65-74	34	52.3	330	0.6	27	37	56.9	426	0.8	30	22	33.8	206	0.6	11
75-84	19	29.7	211	0.7	40	29	45.3	296	0.7	26	24	37.5	227	0.4	3
85 and older	14	33.3	154	0.7	48	10	23.8	98	0.4	10	5	11.9	56	0.3	2
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 Maryland, released by CMS in 3/2010. This table was produced on 04/19/2011.

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 2007. A total of 1,465 beneficiaries who were in nursing facilities for part of their enrollment and their 11,964 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 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, MARYLAND, 2007

Beneficiary Characteristics	MISC. ANTI-INFECTIVES					MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL						
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	All-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents
All	763	41.5	8,217	0.3	\$45	214	11.6	2,299	0.7	\$152	1,838	19,289
Female												
All Females	383	39.2	4,213	0.3	42	120	12.3	1,305	0.7	200	977	10,413
Female, Disabled												
All Ages	330	50.5	3,619	0.3	48	63	9.6	697	0.7	292	653	7,005
64 or younger	309	53.9	3,382	0.3	50	53	9.2	583	0.7	315	573	6,123
65-74	19	26.4	213	0.3	22	5	6.9	60	0.6	272	72	792
75-84	1	16.7	12	0.2	1	4	66.7	42	0.6	81	6	66
85 and older	1	50.0	12	0.1	0	1	50.0	12	0.1	5	2	24
Female, Other Eligibles												
All Ages	53	16.4	594	0.2	8	57	17.6	608	0.8	95	324	3,408
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	12
65-74	25	29.8	285	0.2	5	11	13.1	122	0.8	112	84	913
75-84	19	17.9	216	0.2	14	17	16.0	202	0.8	108	106	1,191
85 and older	9	6.8	93	0.3	5	29	22.0	284	0.8	77	132	1,292
Male												
All Males	380	44.1	4,004	0.4	48	94	10.9	994	0.6	90	861	8,876
Male, Disabled												
All Ages	348	50.7	3,654	0.4	50	55	8.0	584	0.6	95	687	7,141
64 or younger	336	51.8	3,552	0.4	51	53	8.2	570	0.6	94	649	6,758
65-74	11	34.4	90	0.2	41	0	0.0	0	0.0	0	32	333
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	4	36
85 and older	1	50.0	12	0.2	1	2	100.0	14	0.9	138	2	14
Male, Other Eligibles												
All Ages	32	18.4	350	0.2	23	39	22.4	410	0.7	83	174	1,735
64 or younger	0	0.0	0	0.0	0	2	66.7	24	1.0	97	3	36
65-74	20	30.8	224	0.2	26	15	23.1	172	0.6	80	65	680
75-84	9	14.1	92	0.1	22	16	25.0	158	0.7	95	64	619
85 and older	3	7.1	34	0.1	1	6	14.3	56	0.7	50	42	400
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 Maryland, released by CMS in 3/2010. This table was produced on 04/19/2011.

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 2007. A total of 1,465 beneficiaries who were in nursing facilities for part of their enrollment and their 11,964 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 ND.11
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
 AMONG NONDUALS, BY BENEFICIARY CHARACTERISTIC^{a,b}
 MARYLAND, 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 Nondual Rx \$	Total Number of Beneficiaries	
All	13,185	4.9	0.3	68,908	\$18	\$4,845,760	\$70	5.5	267,572	
Age										
5 and younger	910	1.6	0.1	4,330	19	1,113,896	257	21.7	58,420	
6-14	1,144	2.2	0.1	7,459	38	2,033,562	273	13.3	53,130	
15-20	1,160	3.3	0.2	6,263	24	856,424	137	6.2	35,038	
21-44	4,309	4.5	0.2	18,675	5	461,444	25	2.3	96,019	
45-64	3,625	20.4	1.2	20,786	14	254,596	12	1.1	17,780	
65-74	1,154	29.9	1.7	6,701	19	73,181	11	1.0	3,865	
75-84	678	27.5	1.5	3,717	17	41,796	11	1.1	2,461	
85 and older	205	24.0	1.1	977	13	10,861	11	1.4	855	
Unknown	0	0.0	0.0	0	0	0	0	0.0	4	
Basis of Eligibility^c										
Aged	1,244	25.6	1.3	6,274	15	74,256	12	1.0	4,864	
Disabled	6,474	23.4	1.6	44,825	135	3,726,574	83	7.0	27,639	
Adults	3,280	3.4	0.1	9,585	1	69,882	7	1.0	96,150	
Children	2,040	1.5	0.1	7,484	7	967,890	129	4.9	138,495	
Unknown	147	34.7	1.7	740	17	7,158	10	0.8	424	
Gender										
Female	8,598	4.8	0.2	41,556	10	1,784,791	43	4.2	179,253	
Male	4,587	5.2	0.3	27,352	35	3,060,969	112	6.7	88,319	
Unknown	0	0.0	0.0	0	0	0	0	0.0	0	
Race										
White	5,829	7.1	0.4	31,156	16	1,312,510	42	4.1	82,229	
African American	5,537	4.1	0.2	29,212	20	2,679,384	92	6.2	133,746	
Other/unknown	1,819	3.5	0.2	8,540	17	853,866	100	6.6	51,597	
Use of Nursing Facilities^d										
Entire year	1,019	55.4	5.2	9,568	66	120,605	13	1.1	1,838	
Part year	926	63.2	4.1	6,066	66	96,779	16	1.4	1,465	
None	11,240	4.3	0.2	53,274	18	4,628,376	87	6.6	264,269	
Maintenance Assistance Status										
Cash	6,705	12.1	0.8	42,489	62	3,425,012	81	6.9	55,275	
Medically needy	3,719	11.5	0.5	16,198	7	240,662	15	1.2	32,350	
Poverty related	1,637	1.4	0.0	4,247	3	345,634	81	3.4	117,288	
Other/unknown	1,124	1.8	0.1	5,974	13	834,452	140	9.2	62,659	

Source: Data for this table are from the MAX 2007 file for Maryland, released by CMS in 3/2010. This table was produced on 04/19/2011.

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

Beneficiary Characteristics	Number Rx per Benefit Month	Rx \$ per Benefit Month	\$ per Rx	Barbiturate \$ per Benefit Month	Benzodiazepine \$ per Benefit Month	Number of Benefit Months
All	0.1	\$4	\$70	\$0	\$0	1,117,263
Age						
5 and younger	0.0	9	257	0	0	122,463
6-14	0.1	17	273	0	0	121,127
15-20	0.1	7	137	0	0	121,263
21-44	0.0	1	25	0	0	590,012
45-64	0.2	3	12	0	1	89,624
65-74	0.2	2	11	0	0	38,392
75-84	0.1	2	11	0	0	26,019
85 and older	0.1	1	11	0	0	8,338
Unknown	0.0	0	0	0	0	25
Basis of Eligibility^c						
Aged	0.1	2	12	0	0	48,274
Disabled	0.3	22	83	0	1	172,430
Adults	0.0	0	7	0	0	570,423
Children	0.0	3	129	0	0	321,960
Unknown	0.2	2	10	0	1	4,176
Gender						
Female	0.0	2	43	0	0	856,090
Male	0.1	12	112	0	0	261,173
Unknown	0.0	0	0	0	0	0
Race						
White	0.1	3	42	0	0	393,844
African American	0.1	5	92	0	0	526,776
Other/unknown	0.0	4	100	0	0	196,643
Use of Nursing Facilities^d						
Entire year	0.5	6	13	0	1	19,289
Part year	0.5	8	16	0	1	11,964
None	0.0	4	87	0	0	1,086,010
Maintenance Assistance Status						
Cash	0.2	15	81	0	1	226,835
Medically needy	0.1	2	15	0	0	129,573
Poverty related	0.0	1	81	0	0	255,571
Other/unknown	0.0	2	140	0	0	505,284

Source: Data for this table are from the MAX 2007 file for Maryland, released by CMS in 3/2010. This table was produced on 04/19/2011.

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 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.

TABLE ND.13
USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D FOR SELECTED DRUG CATEGORIES AMONG NONDUALS^{a,b,c}
MARYLAND, 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	16,226	\$299	\$4,845,760	100.0	68,908	\$70	100.0
Anorexia or weight loss/gain	53	51	2,713	0.1	98	28	0.1
Fertility drugs	1	976	976	0.0	2	488	0.0
Drugs for cosmetic purposes	7	16	114	0.0	12	10	0.0
Cough and cold medications	2,006	38	75,234	1.6	3,620	21	5.3
Vitamins and minerals	2,849	86	245,799	5.1	12,809	19	18.6
Non-prescription drugs	3,797	1,080	4,101,770	84.6	15,349	267	22.3
Barbiturates	357	73	26,182	0.5	3,128	8	4.5
Benzodiazepines	6,614	41	269,390	5.6	32,599	8	47.3
Other Part D Excl Rx Drugs	542	228	123,582	2.6	1,291	96	1.9

Source: Data for this table are from the MAX 2007 file for Maryland, released by CMS in 3/2010. This table was produced on 04/19/2011.

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 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 ND11.

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.

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, MARYLAND, 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	704,265	4,898	86,761	125,297	486,885	424	6,845,816	49,034	934,638	1,101,253	4,756,692	4,199
Age												
5 and younger	192,872	1	3,517	1	189,353	0	1,823,713	3	38,882	12	1,784,816	0
6-14	205,844	8	10,005	13	195,818	0	2,109,039	96	115,597	65	1,993,281	0
15-20	112,690	6	8,778	4,194	99,712	0	1,094,975	72	99,674	29,432	965,797	0
21-44	140,705	18	26,733	111,939	1,988	27	1,297,143	205	284,795	999,201	12,700	242
45-64	44,904	49	35,370	9,107	1	377	446,065	422	369,558	72,228	3	3,854
65-74	3,920	2,205	1,656	39	0	20	40,414	21,946	18,082	283	0	103
75-84	2,462	1,858	600	4	0	0	26,034	19,086	6,916	32	0	0
85 and older	855	753	102	0	0	0	8,338	7,204	1,134	0	0	0
Unknown	13	0	0	0	13	0	95	0	0	0	95	0
Gender												
Female	408,548	3,342	41,381	117,305	246,096	424	3,951,905	33,791	452,331	1,049,326	2,412,258	4,199
Male	295,717	1,556	45,380	7,992	240,789	0	2,893,911	15,243	482,307	51,927	2,344,434	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	204,746	983	29,565	44,500	129,466	232	1,974,794	9,501	313,943	392,537	1,256,499	2,314
African American	371,713	1,704	49,182	67,304	253,401	122	3,658,987	17,302	536,928	593,795	2,509,772	1,190
Other/unknown	127,806	2,211	8,014	13,493	104,018	70	1,212,035	22,231	83,767	114,921	990,421	695
Use of Nursing Facilities^c												
Entire year	1,839	496	1,341	1	1	0	19,300	5,130	14,157	1	12	0
Part year	1,489	265	1,195	27	1	1	14,937	2,608	12,054	252	12	11
None	700,937	4,137	84,225	125,269	486,883	423	6,811,579	41,296	908,427	1,101,000	4,756,668	4,188
Maintenance Assistance Status												
Cash	169,552	2,340	68,773	32,656	65,783	0	1,751,717	26,539	783,381	282,495	659,302	0
Medically needy	64,902	2,478	16,661	19,506	26,257	0	552,135	22,198	137,260	145,736	246,941	0
Poverty related	383,537	80	101	16,192	366,740	424	3,666,379	297	558	116,922	3,544,403	4,199
Other/unknown	86,274	0	1,226	56,943	28,105	0	875,585	0	13,439	556,100	306,046	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	84,640	4,791	14,431	48,560	16,440	418	643,825	47,797	121,668	393,379	76,849	4,132
FFS part year, with Rx claims	42,414	62	7,831	17,167	17,348	6	415,950	716	82,043	165,667	167,457	67
FFS part year, no Rx claims	140,518	11	5,377	30,423	104,707	0	1,281,307	113	52,157	271,557	957,480	0
MC all year, with Rx claims	65,905	18	27,893	7,278	30,716	0	753,591	216	326,272	75,945	351,158	0
MC all year, no Rx claims	370,788	16	31,229	21,869	317,674	0	3,751,143	192	352,498	194,705	3,203,748	0

Source: Data for this table are from the MAX 2007 file for Maryland, released by CMS in 3/2010. This table was produced on 04/19/2011.

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, MARYLAND, 2007

	Beneficiaries and Benefit Months in Cell J of Table 1		Included in Cell K of Table 1		Excluded from Cell K of Table 1	
	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months
All	704,265	6,845,816	267,572	1,117,263	0	5,728,553
Fee-for-service (FFS) all year	84,640	643,825	84,640	643,825	0	0
FFS part year, with Rx claims	42,414	415,950	42,414	139,187	0	276,763
FFS part year, with no Rx claims	140,518	1,281,307	140,518	334,251	0	947,056
Managed care (MC) all year, with Rx claims	65,905	753,591	0	0	0	753,591
MC all year, with no Rx claims	370,788	3,751,143	0	0	0	3,751,143

Source: Data for this table are from the MAX 2007 file for Maryland, released by CMS in 3/2010. This table was produced on 04/19/2011.

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