

# STATISTICAL COMPENDIUM: MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 1999 IDAHO

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TABLE 1  
OVERVIEW OF BENEFICIARY SELECTION CRITERIA FOR STUDY POPULATION  
IDAHO, 1999

Inclusion Criteria (1999)	No. of Dual and Non-dual Eligible Benes (Cell)	No. of Dual Eligible Benes (Cell) <sup>g</sup>
1. Benes who were eligible for Medicaid during at least one month <sup>a</sup>	134,065 (A)	18,889 (E)
2. Benes who had Medicaid pharmacy benefits during at least one month <sup>b</sup>	131,817 (B)	16,657 (F)
3. Benes who had fee-for-service pharmacy benefit coverage during at least one month <sup>c, d, e</sup>	131,817 (C)	16,657 (G)
4. Benes who were all-year nursing facility residents <sup>f</sup>	3,040 (D)	2,903 (H)

Source: Data for this table are from the MAX 1999 file for Idaho, released by CMS in 11/2003. This table was produced on 06/25/2004.

a. MAX data element "Eligible Months Count" was used to determine an individual's Medicaid eligibility. All individuals who had a value greater than zero were considered as beneficiaries and counted in Cell A.

b. Counts in Cell B were obtained by excluding from Cell A beneficiaries who never had pharmacy benefit coverage during their Medicaid enrollment in 1999 (based on MAX data element "Eligible Restricted Benefits Flag"). Characteristics of beneficiaries represented by Cell B are shown in Appendix Table A.1.

c. Cell C represents the study population for Tables 2 through 7D. Cell C was obtained by excluding from Cell B beneficiaries who were under MC plans during all months of Medicaid eligibility in 1999, because the MAX files would not include separate prescription drug claims for those beneficiaries. MC plans include HMOs, PHPs, or other MC organizations that provided pharmacy benefits under capitation arrangements. Beneficiaries included are those who were in fee-for-service, PCCM, or PHP plans in selected states. Beneficiaries in PHPs were included if they were in one of 18 states where no PHP in the state provided a pharmacy benefit (see footnote e). For all other states, beneficiaries in PHPs were excluded. For example, if a beneficiary was under fee-for-service, PCCM, or PHPs in one of the 18 states for three months of the year but enrolled in an MC plan for the remaining nine months, only the three months were counted toward the number of benefit months associated with the beneficiary. Therefore, benefit months included represent the benefit months with fee-for-service pharmacy benefits. Beneficiaries and their benefit months included and excluded based on this criterion are shown in Appendix Table A.2.

d. The total Medicaid pharmacy reimbursement for Idaho in 1999 was \$69,939,588, of which \$95,639 was excluded from our analysis because those claims were made for beneficiaries who were outside the study population or took place during months that were excluded from the analysis.

e. The 18 states where no PHP provided a pharmacy benefit in 1999 were AL, AR, CO, FL, GA, IA, IL, KY, MA, MI, MT, NE, NY, NC, OR, PA, UT, and WI. This list was constructed based on consultation with CMS staff and two CMS documents, which can be found at <http://www.cms.hhs.gov/medicaid/managedcare/mmcms699.asp> and at <http://www.cms.hhs.gov/medicaid/managedcare/mmcms99.asp>.

f. Cell D represents the study population for Tables 8 through 10D. All-year nursing facility residents are the beneficiaries who resided in nursing facilities throughout their enrollment in 1999. These beneficiaries were identified by comparing the number of months during which the MAX files contained at least one claim from nursing facilities to the number of Medicaid eligible months. If the former is greater than or equal to the latter, the beneficiary was considered an all-year resident. If the former is less than the latter but not equal to zero, the beneficiary was considered a part-year resident. Part-year residents were excluded from the analysis because they are likely to be short-term residents and the level and pattern of their pharmacy benefit use may differ substantially from longer-term residents. The number of part-year residents and their benefit months are presented in footnotes to Tables 8 through 10D. Residents of mental hospitals for the aged, inpatient psychiatric facilities for individuals under age 21, or intermediate care facilities for the mentally retarded were excluded from the analysis.

g. Pharmacy benefit use and reimbursement among full dual eligible beneficiaries are presented in Tables 11 through 18. To determine Medicaid-Medicare dual eligibility status, two MAX data elements ("Eligible Medicare Crossover Code -- Annual New Values" and "Eligible Restricted Benefits Flag") were used in combination.

Beneficiaries represented in Cell G, the dual study population, include all dual eligible beneficiaries who had a fee-for-service pharmacy benefit at least during one month in 1999. All benefit months of such dual eligible beneficiaries, of which 1.4 percent were restricted benefit months without a pharmacy benefit in Idaho, were used in the dual tables.

Characteristics of dual eligible beneficiaries represented by Cell F are shown in Appendix Table A.3, and characteristics of beneficiaries and their benefit months included in Cell F but excluded from Cell G are shown in Appendix Table A.4.

Bene(s) = beneficiary (or beneficiaries); CMS = Center for Medicare and Medicaid Services; HMO = health maintenance organization; MAX = Medicaid Analytic Extract; MC = managed care; PCCM = primary care case management; PHP = prepaid health plan.

TABLE 2  
 CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY<sup>a,b</sup>  
 IDAHO, 1999

Beneficiary Characteristics	No. of Benefes							No. of Bene Mos											
	All	Aged	Disabled	Adults	Children	Other/Unknown	All	Aged	Disabled	Adults	Children	Other/Unknown	All	Aged	Disabled	Adults	Children	Other/Unknown	
<b>All</b>	<b>131,817</b>	<b>9,630</b>	<b>22,104</b>	<b>20,381</b>	<b>79,702</b>	<b>0</b>	<b>1,096,378</b>	<b>94,677</b>	<b>232,971</b>	<b>120,374</b>	<b>648,356</b>	<b>0</b>	<b>1,096,378</b>	<b>94,677</b>	<b>232,971</b>	<b>120,374</b>	<b>648,356</b>	<b>0</b>	
<b>Age</b>																			
5 and younger	39,208	0	1,053	0	38,155	0	315,935	0	10,636	0	305,299	0	315,935	0	10,636	0	305,299	0	0
6-14	34,800	0	2,699	0	32,101	0	303,912	0	29,593	0	274,319	0	303,912	0	29,593	0	274,319	0	0
15-20	13,846	0	1,797	2,651	9,398	0	102,956	0	18,971	15,369	68,616	0	102,956	0	18,971	15,369	68,616	0	0
21-44	25,780	0	8,811	16,924	45	0	193,010	0	93,285	99,610	115	0	193,010	0	93,285	99,610	115	0	0
45-64	8,468	0	7,663	803	2	0	85,194	0	79,807	5,383	4	0	85,194	0	79,807	5,383	4	0	0
65-74	3,376	3,304	70	2	0	0	34,750	34,161	580	9	0	0	34,750	34,161	580	9	0	0	0
75-84	3,182	3,171	10	1	0	0	31,232	31,133	96	3	0	0	31,232	31,133	96	3	0	0	0
85 and older	3,156	3,155	1	0	0	0	29,386	29,383	3	0	0	0	29,386	29,383	3	0	0	0	0
Unknown	1	0	0	0	1	3	0	0	0	0	3	0	0	0	0	0	3	0	0
<b>Gender</b>																			
Female	76,782	7,044	11,396	18,438	39,904	0	624,319	70,305	120,795	109,813	323,406	0	624,319	70,305	120,795	109,813	323,406	0	0
Male	55,035	2,586	10,708	1,943	39,798	0	472,059	24,372	112,176	10,561	324,950	0	472,059	24,372	112,176	10,561	324,950	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>Race</b>																			
White	108,671	8,837	20,207	17,280	62,347	0	909,176	86,233	212,832	104,935	505,176	0	909,176	86,233	212,832	104,935	505,176	0	0
African American	877	32	102	93	650	0	7,514	319	1,039	495	5,661	0	7,514	319	1,039	495	5,661	0	0
Other/unknown	22,269	761	1,795	3,008	16,705	0	179,688	8,125	19,100	14,944	137,519	0	179,688	8,125	19,100	14,944	137,519	0	0
<b>Use of Nursing Facilities</b>																			
All year	3,040	2,762	278	0	0	0	29,990	27,102	2,888	0	0	0	29,990	27,102	2,888	0	0	0	0
Part year	1,736	1,407	328	0	1	0	15,464	12,092	3,366	0	6	0	15,464	12,092	3,366	0	6	0	0
None	127,041	5,461	21,498	20,381	79,701	0	1,050,924	55,483	226,717	120,374	648,350	0	1,050,924	55,483	226,717	120,374	648,350	0	0
<b>Maintenance Assistance Status</b>																			
Cash	25,006	2,223	20,897	378	1,508	0	258,841	24,103	220,176	1,838	12,724	0	258,841	24,103	220,176	1,838	12,724	0	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Poverty-related	68,259	76	148	8,938	59,097	0	520,802	745	1,516	44,362	474,179	0	520,802	745	1,516	44,362	474,179	0	0
Other/unknown	38,552	7,331	1,059	11,065	19,097	0	316,735	69,829	11,279	74,174	161,453	0	316,735	69,829	11,279	74,174	161,453	0	0
<b>Dual Medicare Status<sup>c</sup></b>																			
Full dual, all year	16,129	9,128	6,934	66	1	0	165,869	89,811	75,557	494	7	0	165,869	89,811	75,557	494	7	0	0
Full dual, part year	528	277	250	1	0	0	5,343	2,724	2,611	8	0	0	5,343	2,724	2,611	8	0	0	0
Non-dual, all year	115,160	225	14,920	20,314	79,701	0	925,166	2,142	154,803	119,872	648,349	0	925,166	2,142	154,803	119,872	648,349	0	0
<b>Managed Care Status</b>																			
FFS all year	131,817	9,630	22,104	20,381	79,702	0	1,096,378	94,677	232,971	120,374	648,356	0	1,096,378	94,677	232,971	120,374	648,356	0	0
FFS part year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
FFS part year, no Rx claims	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

Source: Data for this table are from the MAX 1999 file for Idaho, released by CMS in 11/2003. This table was produced on 06/25/2004.

Table 2

All Medicaid Beneficiaries

a. Table 2 includes the beneficiaries represented by Cell C 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. 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 1999. The "Full dual, part year" group contains beneficiaries who had such benefits for some, but not all, months of their enrollment. The "Non-dual, all year" group includes beneficiaries who were never dually eligible or dually eligible but never had Medicaid fee-for-service pharmacy benefits. 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 = Center for Medicare and Medicaid Services; FFS = fee-for-service pharmacy benefit; MAX = Medicaid Analytic Extract; Rx = pharmacy benefit.

TABLE 3  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC<sup>a, b</sup>  
 IDAHO, 1999

Beneficiary Characteristics	% with at Least One Rx	Mean No. of Rx	Mean Rx \$	\$ per Rx	Mean \$, All Services	Rx \$ as % of All Services	Mean OTC Drug \$ <sup>c</sup>	No. of Benes
All	63.6 %	11.9	\$530	\$44	\$3,927	13.5 %	\$6	131,817
<b>Age</b>								
5 and younger	62.1	3.1	79	26	1,381	5.7	0	39,208
6-14	50.9	3.3	144	44	1,289	11.2	1	34,800
15-20	57.1	4.8	385	80	3,085	12.5	1	13,846
21-44	69.8	15.2	790	52	5,743	13.8	7	25,780
45-64	85.1	48.1	2,260	47	11,328	20.0	33	8,468
65-74	85.4	47.1	1,860	40	9,116	20.4	43	3,376
75-84	89.5	50.3	1,830	36	14,078	13.0	29	3,182
85 and older	92.0	47.2	1,517	32	17,881	8.5	16	3,156
Unknown	0.0	0.0	0	0	0	0.0	0	1
<b>Basis of Eligibility</b>								
Aged	89.0	48.4	1,745	36	13,662	12.8	29	9,630
Disabled	82.4	34.3	1,926	56	11,882	16.2	20	22,104
Adults	63.3	6.2	208	34	2,294	9.1	3	20,381
Children	55.3	2.8	78	28	963	8.1	1	79,702
Unknown	0.0	0.0	0	0	0	0.0	0	0
<b>Gender</b>								
Female	65.9	13.9	564	41	4,010	14.1	8	76,782
Male	60.2	9.2	482	53	3,812	12.7	4	55,035
Unknown	0.0	0.0	0	0	0	0.0	0	0
<b>Race</b>								
White	65.2	13.3	600	45	4,349	13.8	7	108,671
African American	55.6	7.4	278	38	2,801	9.9	3	877
Other/unknown	55.9	5.5	198	36	1,913	10.3	5	22,269
<b>Use of Nursing Facilities</b>								
Entire year	96.9	62.6	2,271	36	29,426	7.7	25	3,040
Part year	94.0	55.4	2,070	37	20,635	10.0	31	1,736
None	62.3	10.1	467	46	3,089	15.1	5	127,041
<b>Maintenance Assistance Status</b>								
Cash	81.4	33.4	1,797	54	10,589	17.0	20	25,006
Medically needy	0.0	0.0	0	0	0	0.0	0	0
Poverty related	55.5	2.7	73	27	1,153	6.3	1	68,259
Other/unknown	66.3	14.3	518	36	4,518	11.5	7	38,552

Source: Data for this table are from the MAX 1999 file for Idaho, released by CMS in 11/2003. This table was produced on 06/25/2004.

Table 3

All Medicaid Beneficiaries

a. Table 3 includes beneficiaries represented by Cell C 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. Information about OTC drugs appears in this column only. OTC drugs are not part of the reimbursement amount for prescription drugs.

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

TABLE 4  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC<sup>a,b</sup>  
 IDAHO, 1999

Beneficiary Characteristics	Mean No. of Rx	Mean Rx \$	Rx \$ as % of All Services	No. of Rx, % with:						Mean \$, All Services	Benes	Bene Mos
				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			
All	1.4	\$64	13.5 %	36.4 %	44.3 %	5.6 %	7.4 %	4.7 %	1.6 %	\$472	131,817	1,096,378
<b>Age</b>												
5 and younger	0.4	10	5.7	37.9	58.3	2.8	0.9	0.1	0.0	171	39,208	315,935
6-14	0.4	17	11.2	49.1	45.4	3.1	2.2	0.2	0.0	148	34,800	303,912
15-20	0.7	52	12.5	42.9	47.0	5.8	3.7	0.6	0.1	415	13,846	102,956
21-44	2.0	106	13.8	30.2	40.3	10.1	12.1	5.4	1.7	767	25,780	193,010
45-64	4.8	225	20.0	14.9	18.0	10.4	24.9	22.5	9.3	1,126	8,468	85,194
65-74	4.6	181	20.4	14.6	17.2	10.0	25.5	23.7	9.1	886	3,376	34,750
75-84	5.1	186	13.0	10.5	12.4	8.3	29.8	28.1	10.9	1,434	3,182	31,232
85 and older	5.1	163	8.5	8.0	10.5	10.3	33.0	30.7	7.6	1,920	3,156	29,386
Unknown	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	0	1	3
<b>Basis of Eligibility</b>												
Aged	4.9	178	12.8	11.0	13.3	9.5	29.4	27.5	9.2	1,390	9,630	94,677
Disabled	3.3	183	16.2	17.6	29.5	11.7	21.8	14.1	5.2	1,127	22,104	232,971
Adults	1.1	35	9.1	36.7	46.5	8.5	6.2	1.7	0.4	388	20,381	120,374
Children	0.3	10	8.1	44.7	51.6	2.7	1.0	0.0	0.0	118	79,702	648,356
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<b>Gender</b>												
Female	1.7	69	14.1	34.1	43.9	6.0	8.2	5.7	2.1	493	76,782	624,319
Male	1.1	56	12.7	39.8	44.8	5.0	6.2	3.2	0.9	445	55,035	472,059
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<b>Race</b>												
White	1.6	72	13.8	34.8	43.7	6.0	8.2	5.3	1.9	520	108,671	909,176
African American	0.9	32	9.9	44.4	44.7	2.7	5.5	2.2	0.6	327	877	7,514
Other/unknown	0.7	25	10.3	44.1	47.2	3.6	3.4	1.5	0.3	237	22,269	179,688
<b>Use of Nursing Facilities</b>												
Entire year	6.3	230	7.7	3.1	6.5	8.0	31.0	36.9	14.6	2,983	3,040	29,990
Part year	6.2	232	10.0	6.0	8.9	8.3	30.6	32.0	14.3	2,317	1,736	15,464
None	1.2	57	15.1	37.7	45.7	5.5	6.5	3.5	1.1	373	127,041	1,050,924
<b>Maintenance Assistance Status</b>												
Cash	3.2	174	17.0	18.6	29.8	11.1	21.3	14.0	5.1	1,023	25,006	258,841
Medically needy	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Poverty related	0.4	10	6.3	44.5	51.3	3.0	1.1	0.1	0.0	151	68,259	520,802
Other/unknown	1.7	63	11.5	33.7	41.3	6.7	9.4	6.7	2.2	550	38,552	316,735

Source: Data for this table are from the MAX 1999 file for Idaho, released by CMS in 11/2003. This table was produced on 06/25/2004.

Table 4

All Medicaid Beneficiaries

a. Table 4 includes the beneficiaries represented by Cell C 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.

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.



TABLE 5  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC<sup>a, b, c</sup>  
 IDAHO, 1999

Beneficiary Characteristics	All Rx		Patented Brand-Name Drugs		Off-Patent Brand-Name Drugs		Generic Drugs	
	No. of Rx	Rx \$	No. of Rx	\$ per Rx	No. of Rx	Rx \$	No. of Rx	Rx \$
<b>All</b>	<b>1.4</b>	<b>\$64</b>	<b>0.5</b>	<b>\$41</b>	<b>0.2</b>	<b>\$10</b>	<b>0.7</b>	<b>\$11</b>
<b>Age</b>								
5 and younger	0.4	10	0.1	6	0.0	1	0.2	3
6-14	0.4	17	0.1	11	0.0	2	0.2	4
15-20	0.7	52	0.2	42	0.1	4	0.3	5
21-44	2.0	106	0.8	70	0.3	16	0.9	16
45-64	4.8	225	1.9	140	0.6	36	2.1	37
65-74	4.6	181	1.7	105	0.7	32	2.0	33
75-84	5.1	186	1.7	105	0.9	34	2.2	37
85 and older	5.1	163	1.5	87	1.0	32	2.3	35
Unknown	0.0	0	0.0	0	0.0	0	0.0	0
<b>Basis of Eligibility</b>								
Aged	4.9	178	1.6	100	0.9	61	2.2	35
Disabled	3.3	183	1.3	123	0.4	27	1.4	26
Adults	1.1	35	0.3	21	0.1	5	0.6	8
Children	0.3	10	0.1	6	0.0	1	0.2	3
Unknown	0.0	0	0.0	0	0.0	0	0.0	0
<b>Gender</b>								
Female	1.7	69	0.6	42	0.2	11	0.8	12
Male	1.1	56	0.4	38	0.1	8	0.5	9
Unknown	0.0	0	0.0	0	0.0	0	0.0	0
<b>Race</b>								
White	1.6	72	0.6	46	0.2	11	0.7	12
African American	0.9	32	0.3	19	0.1	5	0.4	6
Other/unknown	0.7	25	0.2	15	0.1	3	0.4	5
<b>Use of Nursing Facilities</b>								
Entire year	6.3	230	2.0	131	1.1	43	2.9	46
Part year	6.2	232	2.0	132	1.1	42	2.8	46
None	1.2	57	0.4	37	0.2	8	0.6	9
<b>Maintenance Assistance Status</b>								
Cash	3.2	174	1.3	115	0.4	26	1.4	25
Medically needy	0.0	0	0.0	0	0.0	0	0.0	0
Poverty related	0.4	10	0.1	6	0.0	1	0.2	3
Other/unknown	1.7	63	0.6	37	0.3	10	0.8	13

Source: Data for this table are from the MAX 1999 file for Idaho, released by CMS in 1/2003. This table was produced on 06/25/2004.

a. Table 5 includes the beneficiaries represented by Cell C 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.

Table 5

All Medicaid Beneficiaries

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 Idaho, 4.5 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).

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

TABLE 6

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY<sup>a, b, c, d</sup>  
IDAHO, 1999

Therapeutic Category	No. of Rx per Bene Mo among Users				\$ per Bene Mo among Users				Total No. of Rx	Total Rx \$	No.	As % of All Benes	No. of Bene Mos				
	Patented		Off-Patent		Patented		Off-Patent										
	Total	Brand-Name	Generic	Total	Brand-Name	Generic	Total	Brand-Name						Generic			
Anti-infective Agents	0.3	0.1	0.0	0.2	\$9	\$7	\$0	\$2	\$34	\$64	\$33	\$11	160,119	\$5,425,566	57,976	44.0 %	579,206
Biologicals	0.3	0.2	0.0	0.0	326	280	1	45	1246	1,158	324	2,576	572	712,905	224	0.2	2,189
Antineoplastic Agents	0.6	0.3	0.1	0.2	111	91	10	11	179	326	93	44	3,952	707,028	596	0.5	6,361
Endocrine/Metabolic Drugs	0.8	0.4	0.2	0.2	22	16	4	3	28	42	21	12	146,988	4,126,128	18,261	13.9	186,591
Cardiovascular Agents	1.5	0.5	0.3	0.7	42	22	11	9	29	46	34	13	209,526	5,986,920	13,687	10.4	143,277
Respiratory Agents	0.5	0.2	0.0	0.2	17	12	0	5	36	56	28	20	148,235	5,408,039	31,846	24.2	325,704
Gastrointestinal Agents	0.7	0.3	0.1	0.3	48	34	7	7	74	107	91	26	83,872	6,179,955	12,275	9.3	128,103
Genitourinary Agents	0.3	0.2	0.0	0.1	12	9	0	2	35	46	33	18	20,367	718,950	6,088	4.6	60,446
CNS Drugs	1.2	0.5	0.2	0.5	76	52	16	8	65	97	94	18	267,282	17,459,503	22,247	16.9	230,335
Stimulants/Anti-obesity/Anorexia	0.6	0.1	0.1	0.4	29	6	8	15	47	47	63	41	19,383	903,773	2,953	2.2	31,487
Miscellaneous Psychological/Neurological Agents	0.6	0.5	0.0	0.1	74	71	0	4	115	141	26	27	3,677	422,984	539	0.4	5,678
Analgesics and Anesthetics	0.6	0.1	0.1	0.4	22	11	5	6	35	91	64	14	175,451	6,078,943	27,425	20.8	271,690
Neuromuscular Agents	0.9	0.4	0.1	0.4	47	32	5	10	51	89	43	22	121,889	6,190,002	12,405	9.4	132,540
Nutritional Products	0.4	0.0	0.1	0.3	6	0	3	4	16	23	25	12	46,722	743,412	12,711	9.6	118,219
Hematological Agents	0.8	0.1	0.4	0.4	107	92	9	6	137	1,697	25	17	24,601	3,359,488	3,060	2.3	31,421
Topical Products	0.2	0.1	0.0	0.1	5	3	1	2	24	41	34	13	67,699	1,620,293	28,701	21.8	295,594
Miscellaneous Products	0.9	0.4	0.3	0.3	188	114	58	16	215	321	217	64	3,065	658,159	329	0.2	3,497
Unknown Therapeutic Category	0.4	0.0	0.0	0.0	18	0	0	0	46	0	0	0	67,939	3,141,881	17,095	13.0	176,656
<b>TOTAL NO. OF RX AND RX \$</b>	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	1,571,339	69,843,949	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 1999 file for Idaho, released by CMS in 11/2003. This table was produced on 06/25/2004.

- a. Table 6 includes the beneficiaries represented by Cell C of Table 1. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 1999. 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/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).
- 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 Idaho, 4.5 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).

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

TABLE 7  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP<sup>a, b, c</sup>  
 IDAHO, 1999

Top 10 Drug Groups	Users				Among Users		
	Total Medicaid Rx \$	No. As % of All Benes	No. of Bene Mos	No. of Rx per Bene Mo	\$ per Rx	Rx \$ per Bene Mo	
ANTIPSYCHOTICS	\$7,891,055	8.613	93,997	0.8	\$111	\$84	
ANTIDEPRESSANTS	7,697,074	21,984	230,791	0.6	56	33	
ANTICONVULSANT	5,043,558	9,027	98,971	0.8	62	51	
ULCER DRUGS	4,816,952	12,155	129,107	0.5	79	37	
ANALGESICS - Narcotic	3,225,337	30,137	302,443	0.4	28	11	
ANTIASTHMATIC	2,815,055	19,048	197,910	0.4	39	14	
MISC. HEMATOLOGICAL	2,707,728	603	6,463	0.6	757	419	
ANALGESICS - ANTI-INFLAMMATORY	2,268,523	14,535	152,702	0.3	45	15	
ANTIDIABETIC	2,232,150	6,138	65,303	0.8	44	34	
ANTIHYPERTENSIVE	1,873,216	7,508	79,585	0.7	33	24	

Source: Data for this table are from the MAX 1999 file for Idaho, released by CMS in 11/2003. This table was produced on 06/25/2004.

a. Table 7 includes the beneficiaries represented by Cell C of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 1999. 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 1999. For information about these drug groups, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE 7A  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR TOP 10 DRUG GROUPS COMBINED  
 AND FIRST AND SECOND GROUPS SEPARATELY, BY SEX, BOE, AND AGE<sup>a,b,c</sup>  
 IDAHO, 1999

Beneficiary Characteristics	All Top 10 Drug Groups					ANTIPSYCHOTICS					ANTIDEPRESSANTS						
	No. of Rx	Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
<b>All</b>	<b>697,840</b>	<b>\$40,570,648</b>	<b>8,613</b>	<b>6.5 %</b>	<b>93,997</b>	<b>0.8</b>	<b>\$84</b>	<b>21,984</b>	<b>16.7 %</b>	<b>230,791</b>	<b>0.6</b>	<b>\$33</b>					
<b>Female</b>																	
<b>Disabled</b>	462,462	23,991,059	4,832	6.3	52,613	0.7	73	15,358	20.0	160,153	0.6	33					
5 and younger	242,531	14,500,465	2,908	25.5	33,060	0.8	91	7,451	65.4	83,564	0.6	39					
6-14	1,305	71,812	8	1.8	81	0.5	79	7	1.6	77	0.5	6					
15-20	5,658	385,784	104	10.4	1,221	0.6	72	186	18.6	2,157	0.5	31					
21-44	5,639	405,840	108	14.8	1,231	0.6	78	251	34.4	2,766	0.5	32					
45-64	93,169	5,968,324	1,475	32.8	16,816	0.8	93	3,352	74.4	37,643	0.6	38					
65-74	136,394	7,652,620	1,206	25.7	13,665	0.9	92	3,643	77.6	40,820	0.7	40					
75-84	277	10,910	5	19.2	33	0.5	24	11	42.3	89	0.5	28					
85 and older	88	5,147	2	40.0	13	0.2	10	1	20.0	12	1.0	9					
85 and older	1	28	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
<b>Other Eligibles</b>	219,931	9,490,594	1,924	2.9	19,553	0.5	42	7,907	12.1	76,589	0.5	28					
5 and younger	4,506	101,734	11	0.1	118	0.3	29	21	0.1	212	0.3	12					
6-14	8,823	349,413	140	0.9	1,516	0.4	30	603	3.8	6,464	0.4	20					
15-20	10,124	340,442	150	1.9	1,473	0.3	21	764	9.6	7,460	0.3	20					
21-44	42,683	1,585,127	316	2.1	2,960	0.3	24	2,953	19.2	25,891	0.4	25					
45-64	4,545	199,230	19	3.5	167	0.5	32	254	47.3	2,167	0.5	29					
65-74	52,210	2,559,443	345	15.5	3,788	0.7	59	1,029	46.3	11,213	0.7	31					
75-84	50,785	2,357,558	452	19.4	4,640	0.7	56	1,102	47.3	11,352	0.7	33					
85 and older	46,255	1,997,647	491	19.7	4,891	0.6	38	1,181	47.4	11,830	0.7	34					
<b>Male</b>																	
<b>Disabled</b>	235,378	16,579,589	3,781	6.9	41,384	0.8	98	6,626	12.0	70,638	0.6	33					
5 and younger	156,699	13,143,697	2,807	26.2	31,628	0.9	113	3,977	37.1	44,201	0.6	37					
6-14	1,537	70,625	13	2.1	156	0.5	39	17	2.8	186	0.3	25					
15-20	13,191	1,012,666	373	21.9	4,300	0.6	72	519	30.5	5,956	0.5	31					
21-44	8,808	2,848,809	228	21.4	2,600	0.7	93	350	32.8	3,918	0.6	38					
45-64	68,800	5,348,327	1,488	34.5	16,585	0.9	124	1,793	41.6	19,776	0.6	41					
65-74	63,743	3,829,455	702	23.6	7,959	1.0	122	1,294	43.6	14,326	0.7	35					
75-84	430	19,511	1	2.3	4	0.5	3	2	4.5	15	0.8	17					
85 and older	190	14,304	2	40.0	24	1.3	183	2	40.0	24	0.7	45					
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
<b>Other Eligibles</b>	78,679	3,435,892	974	2.2	9,756	0.6	48	2,649	6.0	26,437	0.5	27					
5 and younger	7,160	206,559	31	0.2	344	0.4	26	41	0.2	445	0.4	12					
6-14	14,159	627,173	297	1.8	3,142	0.5	40	998	6.2	10,605	0.4	21					
15-20	5,192	248,862	126	3.1	1,245	0.5	44	403	9.9	3,861	0.4	28					
21-44	4,733	179,516	38	2.4	293	0.3	25	224	13.9	1,910	0.4	22					
45-64	1,013	37,759	3	1.1	24	0.2	4	39	14.6	273	0.5	22					
65-74	18,984	906,219	169	15.6	1,778	0.7	68	299	27.6	3,123	0.7	33					
75-84	16,264	751,025	175	20.8	1,670	0.7	55	364	43.2	3,553	0.7	34					
85 and older	11,174	478,779	135	20.4	1,260	0.7	46	281	42.5	2,667	0.7	35					
<b>Unknown</b>	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					

All Medicaid Beneficiaries

Table 7A

Source: Data for this table are from the MAX 1999 file for Idaho, released by CMS in 1/2003. This table was produced on 06/25/2004.

a. Table 7A includes the beneficiaries represented by Cell C of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 1999. 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 1999. For information about these drug groups, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mdmb.asp](http://www.Medi-Span.com/products/product_mdmb.asp) (May 13 2003).

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

TABLE 7B  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY,  
 BY SEX, BOE, AND AGE<sup>a, b, c</sup>  
 IDAHO, 1999

Beneficiary Characteristics	ANTICONVULSANT					ULCER DRUGS					ANALGESICS - Narcotic				
	No. of Users	Users as % of All Benes	No. of Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Mos among Users	Mean No. of Rx	Mean Rx \$
<b>All</b>	<b>9,027</b>	<b>6.8 %</b>	<b>98,971</b>	<b>0.8</b>	<b>\$51</b>	<b>12,155</b>	<b>9.2 %</b>	<b>129,107</b>	<b>0.5</b>	<b>\$37</b>	<b>30,137</b>	<b>22.9 %</b>	<b>302,443</b>	<b>0.4</b>	<b>\$11</b>
<b>Female</b>	5,200	6.8	56,886	0.8	48	8,454	11.0	90,076	0.5	37	21,908	28.5	217,405	0.4	10
<b>Disabled</b>	3,545	31.1	39,993	0.9	57	3,692	32.4	41,898	0.5	40	7,291	64.0	82,044	0.4	14
5 and younger	79	18.0	874	0.7	44	32	7.3	347	0.4	18	30	6.8	340	0.1	1
6-14	227	22.7	2,662	0.8	59	62	6.2	732	0.3	21	115	11.5	1,328	0.1	2
15-20	195	26.7	2,263	0.9	71	96	13.2	1,072	0.2	22	206	28.2	2,299	0.2	3
21-44	1,740	38.6	19,535	0.9	60	1,390	30.9	15,753	0.4	37	3,306	73.4	37,316	0.4	11
45-64	1,298	27.7	14,608	0.9	50	2,105	44.9	23,931	0.5	44	3,611	77.0	40,592	0.5	17
65-74	4	15.4	29	0.3	9	4	15.4	29	0.3	26	17	65.4	101	0.6	16
75-84	2	40.0	22	0.6	30	3	60.0	34	0.3	45	6	120.0	68	0.4	4
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Other Eligibles</b>	1,655	2.5	16,893	0.6	28	4,762	7.3	48,178	0.5	35	14,617	22.4	135,361	0.3	8
5 and younger	41	0.2	416	0.4	27	292	1.6	2,631	0.2	5	510	2.7	5,366	0.1	1
6-14	159	1.0	1,777	0.5	25	251	1.6	2,722	0.2	9	880	5.5	9,181	0.1	1
15-20	118	1.5	1,209	0.4	25	296	3.7	2,770	0.2	10	2,179	27.3	19,155	0.2	2
21-44	457	3.0	4,160	0.5	26	1,030	6.7	9,314	0.3	22	6,478	42.2	54,243	0.3	4
45-64	39	7.3	353	0.5	24	117	21.8	1,114	0.4	31	303	56.4	2,755	0.5	8
65-74	335	15.1	3,756	0.8	34	936	42.1	10,458	0.5	45	1,352	60.8	15,041	0.5	16
75-84	277	11.9	2,901	0.9	34	914	39.2	9,864	0.6	46	1,355	58.2	14,271	0.6	19
85 and older	229	9.2	2,321	0.8	22	926	37.1	9,305	0.7	47	1,560	62.6	15,349	0.6	19
<b>Male</b>	3,827	7.0	42,085	0.8	55	3,701	6.7	39,031	0.5	38	8,229	15.0	85,038	0.4	12
<b>Disabled</b>	2,911	27.2	32,672	0.9	62	2,077	19.4	23,264	0.5	43	3,936	36.8	43,440	0.4	18
5 and younger	74	12.1	824	0.6	29	50	8.2	539	0.4	24	59	9.6	681	0.1	1
6-14	454	26.7	5,228	0.7	48	82	4.8	958	0.4	31	192	11.3	2,249	0.1	2
15-20	310	29.1	3,511	0.8	67	81	7.6	910	0.3	30	215	20.1	2,396	0.1	2
21-44	1,387	32.2	15,438	0.9	69	936	21.7	10,523	0.5	42	1,856	43.1	20,440	0.4	17
45-64	684	23.0	7,647	0.9	58	916	30.8	10,218	0.6	48	1,597	53.8	17,479	0.6	23
65-74	1	2.3	12	0.3	8	12	27.3	116	0.5	52	14	31.8	159	0.4	8
75-84	1	20.0	12	1.5	92	0	0.0	0	0.0	0	3	60.0	36	2.4	189
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Other Eligibles</b>	916	2.1	9,413	0.6	30	1,624	3.7	15,767	0.4	30	4,293	9.7	41,598	0.3	6
5 and younger	61	0.3	642	0.4	15	375	1.9	3,222	0.2	6	836	4.3	8,670	0.1	1
6-14	302	1.9	3,271	0.5	27	165	1.0	1,759	0.2	10	913	5.6	9,476	0.1	1
15-20	93	2.3	893	0.5	26	86	2.1	781	0.2	18	586	14.4	5,517	0.2	2
21-44	62	3.8	528	0.5	32	102	6.3	871	0.3	29	620	38.4	4,741	0.5	8
45-64	10	3.7	80	0.3	21	24	9.0	200	0.5	43	101	37.7	836	0.4	6
65-74	158	14.6	1,701	0.8	35	367	33.9	3,990	0.6	42	489	45.2	5,142	0.5	12
75-84	142	16.8	1,415	0.9	41	278	33.0	2,754	0.6	44	392	46.5	3,827	0.5	17
85 and older	88	13.3	883	0.8	27	227	34.3	2,190	0.7	43	356	53.9	3,389	0.5	13
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

All Medicaid Beneficiaries

Table 7B

Source: Data for this table are from the MAX 1999 file for Idaho, released by CMS in 1/2003. This table was produced on 06/25/2004.

- a. Table 7B includes the beneficiaries represented by Cell C of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 1999. 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 1999. For information about these drug groups, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).
- Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.



TABLE 7C  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY,  
 BY SEX, BOE, AND AGE<sup>a, b, c</sup>  
 IDAHO, 1999

Beneficiary Characteristics	ANTI-ASTHMATIC				MISC. HEMATOLOGICAL				ANALGESICS - ANTI-INFLAMMATORY						
	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
<b>All</b>	<b>19,048</b>	<b>14.5 %</b>	<b>197,910</b>	<b>0.4</b>	<b>\$14</b>	<b>603</b>	<b>0.5 %</b>	<b>6,463</b>	<b>0.6</b>	<b>\$419</b>	<b>14,535</b>	<b>11.0 %</b>	<b>152,702</b>	<b>0.3</b>	<b>\$15</b>
<b>Female</b>	11,443	14.9	118,896	0.4	15	391	0.5	4,193	0.6	33	10,877	14.2	113,548	0.3	16
<b>Disabled</b>	4,122	36.2	46,414	0.5	19	124	1.1	1,383	0.5	32	4,500	39.5	51,405	0.4	20
5 and younger	113	25.7	1,300	0.3	13	1	0.2	8	0.3	15	2	0.5	18	0.1	1
6-14	158	15.8	1,829	0.3	14	0	0.0	0	0.0	0	22	2.2	247	0.3	44
15-20	140	19.2	1,624	0.3	11	0	0.0	0	0.0	0	130	17.8	1,498	0.2	4
21-44	1,412	31.4	15,873	0.4	14	16	0.4	186	0.3	19	1,934	42.9	22,120	0.3	14
45-64	2,292	48.8	25,729	0.5	23	106	2.3	1,177	0.6	33	2,401	51.2	27,412	0.4	25
65-74	6	23.1	47	0.2	10	0	0.0	0	0.0	0	9	34.6	86	0.3	13
75-84	1	20.0	12	0.2	11	1	20.0	12	1.1	107	2	40.0	24	0.1	12
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Other Eligibles</b>	7,321	11.2	72,482	0.3	13	267	0.4	2,810	0.6	34	6,377	9.8	62,143	0.3	12
5 and younger	1,857	10.0	18,684	0.2	3	0	0.0	0	0.0	0	13	0.1	123	0.2	3
6-14	970	6.1	10,228	0.2	7	0	0.0	0	0.0	0	298	1.9	3,296	0.1	2
15-20	566	7.1	5,353	0.2	7	1	0.0	6	0.8	61	1,008	12.6	9,231	0.2	3
21-44	1,452	9.5	12,412	0.3	10	5	0.0	35	0.3	15	2,673	17.4	23,561	0.2	6
45-64	103	19.2	965	0.5	20	2	0.4	19	0.1	7	171	31.8	1,615	0.4	16
65-74	1,008	45.3	11,039	0.6	26	87	3.9	967	0.5	35	910	40.9	10,273	0.4	24
75-84	799	34.3	8,171	0.6	24	96	4.1	1,033	0.6	36	708	30.4	7,662	0.4	22
85 and older	566	22.7	5,630	0.5	20	76	3.0	750	0.6	32	596	23.9	6,382	0.5	23
<b>Male</b>	7,605	13.8	79,014	0.3	13	212	0.4	2,270	0.5	1,132	3,658	6.6	39,154	0.3	13
<b>Disabled</b>	2,277	21.3	25,467	0.5	20	99	0.9	1,084	0.5	2,296	2,157	20.1	24,463	0.3	14
5 and younger	186	30.3	2,134	0.2	8	2	0.3	24	0.1	54	4	0.7	44	0.3	51
6-14	280	16.5	3,201	0.3	14	5	0.3	59	0.4	2,712	38	2.2	436	0.3	16
15-20	124	11.6	1,424	0.4	17	4	0.4	42	1.4	51,284	111	10.4	1,260	0.2	3
21-44	689	16.0	7,735	0.4	16	25	0.6	261	0.4	597	1,048	24.3	11,860	0.3	11
45-64	985	33.2	10,876	0.6	27	63	2.1	698	0.5	26	938	31.6	10,674	0.4	19
65-74	10	22.7	61	0.4	12	0	0.0	0	0.0	0	17	38.6	177	0.4	16
75-84	3	60.0	36	0.7	9	0	0.0	0	0.0	0	1	20.0	12	0.3	29
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Other Eligibles</b>	5,328	12.0	53,547	0.3	10	113	0.3	1,186	0.6	67	1,501	3.4	14,691	0.3	11
5 and younger	2,654	13.5	26,591	0.2	4	2	0.0	24	0.5	1,588	10	0.1	104	0.1	2
6-14	1,297	8.0	13,461	0.2	9	1	0.0	7	0.7	144	194	1.2	2,085	0.1	1
15-20	260	6.4	2,568	0.3	10	0	0.0	0	0.0	0	351	8.6	3,390	0.1	3
21-44	97	6.0	821	0.3	11	2	0.1	24	0.1	5	298	18.5	2,409	0.3	10
45-64	28	10.4	226	0.3	8	1	0.4	5	0.2	17	63	23.5	511	0.3	11
65-74	412	38.0	4,302	0.6	25	45	4.2	503	0.5	35	270	24.9	2,968	0.4	18
75-84	339	40.2	3,345	0.7	28	31	3.7	332	0.8	39	183	21.7	1,901	0.5	20
85 and older	241	36.5	2,233	0.5	21	31	4.7	291	0.5	32	132	20.0	1,323	0.6	25
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Table 7C

All Medicaid Beneficiaries

Source: Data for this table are from the MAX 1999 file for Idaho, released by CMS in 1/2003. This table was produced on 06/25/2004.

- a. Table 7C includes the beneficiaries represented by Cell C of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 1999. 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 1999. For information about these drug groups, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).

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

TABLE 7D  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR NINTH AND TENTH TOP DRUG GROUPS  
 SEPARATELY, BY SEX, BOE, AND AGE<sup>a, b, c</sup>  
 IDAHO, 1999

Beneficiary Characteristics	ANTIDIABETIC				ANTIHYPERTENSIVE				Mean Rx \$	Mean No. of Rx	Users as % of All Benes	No. of Users	No. of Mos among Users	Mean Rx \$	Mean No. of Rx	Users as % of All Benes	No. of Users	No. of Mos among Users	Mean Rx \$	Mean No. of Rx	No. of Benes	No. of Mos
	No. of Users	No. of Benes	No. of Mos among Users	Mean Rx \$	No. of Users	No. of Benes	No. of Mos among Users	Mean Rx \$														
<b>All</b>	<b>6,138</b>	<b>4.7%</b>	<b>65,303</b>	<b>0.8</b>	<b>\$34</b>	<b>7,508</b>	<b>5.7%</b>	<b>79,585</b>	<b>0.7</b>	<b>\$24</b>	<b>131,817</b>	<b>1,096,378</b>										
<b>Female</b>	4,309	5.6	45,923	0.8	34	4,829	6.3	51,279	0.7	24	76,782	624,319										
<b>Disabled</b>	1,947	17.1	21,687	0.8	38	1,746	15.3	19,394	0.7	23	11,396	120,795										
5 and younger	4	0.9	45	0.3	41	8	1.8	88	0.6	13	440	4,408										
6-14	20	2.0	213	1.4	60	32	3.2	374	0.7	11	999	10,960										
15-20	9	1.2	96	0.9	37	15	2.1	180	0.6	14	730	7,639										
21-44	469	10.4	5,241	0.8	35	364	8.1	4,055	0.6	20	4,503	47,950										
45-64	1,437	30.6	16,016	0.8	39	1,316	28.0	14,628	0.7	24	4,692	49,617										
65-74	8	30.8	76	0.9	28	9	34.6	56	0.8	24	26	182										
75-84	0	0.0	0	0.0	0	1	20.0	10	0.8	69	5	36										
85 and older	0	0.0	0	0.0	0	1	100.0	3	0.3	9	1	3										
<b>Other Eligibles</b>	2,362	3.6	24,236	0.8	31	3,083	4.7	31,885	0.7	25	65,386	503,524										
5 and younger	11	0.1	115	0.6	22	13	0.1	126	0.4	4	18,567	148,745										
6-14	23	0.1	237	0.9	35	45	0.3	482	0.6	7	15,908	136,156										
15-20	21	0.3	174	0.7	34	17	0.2	148	0.4	10	7,974	53,440										
21-44	263	1.7	2,164	0.7	28	173	1.1	1,530	0.4	12	15,354	91,131										
45-64	45	8.4	406	0.5	20	67	12.5	597	0.5	20	537	3,743										
65-74	809	36.4	8,987	0.8	36	872	39.2	9,646	0.7	27	2,223	23,310										
75-84	713	30.6	7,466	0.8	29	1,013	43.5	10,638	0.8	27	2,329	23,322										
85 and older	477	19.1	4,687	0.8	27	883	35.4	8,718	0.8	26	2,494	23,677										
<b>Male</b>	1,829	3.3	19,380	0.8	34	2,679	4.9	28,306	0.7	22	55,034	472,056										
<b>Disabled</b>	1,067	10.0	11,660	0.8	36	1,471	13.7	16,151	0.7	23	10,708	112,176										
5 and younger	1	0.2	12	1.0	20	22	3.6	254	0.4	7	613	6,228										
6-14	10	0.6	118	0.7	22	177	10.4	2,015	0.7	12	1,700	18,633										
15-20	13	1.2	136	1.0	48	39	3.7	452	0.5	10	1,067	11,332										
21-44	309	7.2	3,409	0.8	35	408	9.5	4,439	0.7	24	4,308	45,335										
45-64	723	24.3	7,853	0.7	36	807	27.2	8,792	0.7	26	2,971	30,190										
65-74	11	25.0	132	0.8	35	17	38.6	187	0.6	21	44	398										
75-84	0	0.0	0	0.0	0	1	20.0	12	0.8	25	5	60										
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0										
<b>Other Eligibles</b>	762	1.7	7,720	0.8	31	1,208	2.7	12,155	0.7	22	44,326	359,880										
5 and younger	14	0.1	145	0.4	13	21	0.1	232	0.5	11	19,588	156,554										
6-14	44	0.3	454	1.0	32	173	1.1	1,829	0.6	8	16,193	138,163										
15-20	11	0.3	89	1.1	35	17	0.4	172	0.5	10	4,075	30,545										
21-44	37	2.3	278	0.7	38	39	2.4	347	0.5	18	1,615	8,594										
45-64	24	9.0	204	0.5	25	30	11.2	215	0.6	19	2,688	1,644										
65-74	287	26.5	3,131	0.7	32	414	38.2	4,397	0.7	26	1,083	10,860										
75-84	205	24.3	2,021	0.8	33	329	39.0	3,297	0.8	26	843	7,814										
85 and older	140	21.2	1,398	0.8	24	185	28.0	1,666	0.8	26	661	5,706										
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	3										

Table 7D

All Medicaid Beneficiaries

Source: Data for this table are from the MAX 1999 file for Idaho, released by CMS in 11/2003. This table was produced on 06/25/2004.

- a. Table 7D includes the beneficiaries represented by Cell C of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 1999. 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 1999. For information about these drug groups, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).

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

TABLE 8  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,  
 BY BENEFICIARY CHARACTERISTIC<sup>a, b</sup>  
 IDAHO, 1999

Beneficiary Characteristics	Rx \$ per Bene Mo	No. of Rx per Bene Mo	No. of All-Year NF Residents	Bene Mos among All-Year NF Residents
<b>All</b>	<b>\$230</b>	<b>6.3</b>	<b>3,040</b>	<b>29,990</b>
<b>Age</b>				
0-64	379	8.1	271	2,864
65-74	291	7.3	354	3,611
75-84	238	6.5	934	9,050
85 and older	181	5.6	1,481	14,465
Unknown	0	0.0	0	0
<b>Gender</b>				
Female	221	6.3	2,226	22,280
Male	257	6.5	814	7,710
Unknown	0	0.0	0	0
<b>Race</b>				
White	230	6.4	2,980	29,350
African American	203	6.3	8	87
Other/unknown	238	5.3	52	553
<b>Basis of Eligibility</b>				
Aged	215	6.2	2,762	27,102
Disabled	377	8.1	278	2,888
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 1999 file for Idaho, released by CMS in 11/2003. This table was produced on 06/25/2004.

a. Table 8 includes the beneficiaries represented by Cell D of Table 1, those who resided in nursing facilities throughout their 1999 Medicaid enrollment. A total of 1,736 beneficiaries who were in nursing facilities for part of their enrollment and their 15,464 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.

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

TABLE 9  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,  
 BY BRAND STATUS AND THERAPEUTIC CATEGORY<sup>a, b, c, d, e</sup>  
 IDAHO, 1999

Therapeutic Category	No. of Rx per Bene Mo among Users				\$ per Bene Mo among Users				Total # of Rx	Total Rx \$	No.	Users					
	Patented		Generic		Patented		Generic					As % of All-Year NF Residents	No. of Bene Mos				
	Brand-Name	Off-Patent	Brand-Name	Generic	Brand-Name	Off-Patent	Brand-Name	Generic									
Anti-infective Agents	0.4	0.2	0.0	0.2	\$14	\$12	\$0	\$2	\$40	\$65	\$32	\$11	7,678	\$307,271	2,031	66.8 %	21,357
Biologicals	0.2	0.1	0.0	0.1	3	1	0	2	16	10	0	23	4	65	4	0.1	23
Antineoplastic Agents	0.7	0.3	0.3	0.2	106	70	31	6	144	277	92	38	610	87,579	81	2.7	823
Endocrine/Metabolic Drugs	1.2	0.5	0.3	0.5	28	18	5	5	23	36	17	12	17,679	398,165	1,397	46.0	14,207
Cardiovascular Agents	1.9	0.4	0.5	1.0	42	17	14	11	22	38	27	11	38,085	825,806	1,982	65.2	19,849
Respiratory Agents	0.8	0.3	0.0	0.4	26	13	1	11	34	48	25	26	8,590	294,865	1,114	36.6	11,451
Gastrointestinal Agents	1.1	0.5	0.1	0.5	62	42	8	12	58	92	65	25	14,992	864,443	1,352	44.5	13,898
Genitourinary Agents	0.6	0.3	0.0	0.2	20	15	1	4	36	47	50	19	3,744	133,447	627	20.6	6,637
CNS Drugs	1.5	0.8	0.2	0.5	84	61	15	8	55	76	85	15	31,704	1,746,233	2,038	67.0	20,764
Stimulants/Anti-obesity/Anorexia	0.6	0.0	0.1	0.6	13	0	2	11	20	135	30	19	198	3,999	31	1.0	307
Miscellaneous Psychological/Neurological Agents	0.8	0.7	0.0	0.1	86	85	0	2	112	123	0	21	1,060	118,398	142	4.7	1,371
Analgesics and Anesthetics	1.1	0.3	0.1	0.7	39	22	8	10	36	77	59	14	19,891	710,250	1,763	58.0	18,039
Neuromuscular Agents	1.1	0.3	0.2	0.6	44	21	10	14	40	71	43	23	14,032	556,736	1,185	39.0	12,546
Nutritional Products	0.9	0.0	0.3	0.6	16	0	8	8	18	12	26	14	8,779	157,623	958	31.5	9,658
Hematological Agents	1.2	0.0	0.5	0.7	30	9	10	10	25	225	21	15	7,093	174,804	575	18.9	5,884
Topical Products	0.4	0.2	0.1	0.2	12	6	5	2	29	36	44	14	6,513	191,857	1,419	46.7	15,358
Miscellaneous Products	0.4	0.2	0.0	0.2	16	5	0	10	37	29	0	43	63	2,322	14	0.5	147
Unknown Therapeutic Category	0.6	0.0	0.0	0.0	22	0	0	0	35	0	0	0	9,457	329,769	1,448	47.6	15,155
<b>TOTAL NO. OF RX AND RX \$</b>	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	190,172	6,903,632	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 1999 file for Idaho, released by CMS in 11/2003. This table was produced on 06/25/2004.

a. Table 9 includes the beneficiaries represented by Cell D of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 1999. A total of 1,736 beneficiaries who were in nursing facilities for part of their enrollment and their 15,464 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 1999. 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/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).

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/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).

In Idaho, 4.5 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.

Table 9

All Medicaid Beneficiaries

Bene Mo(s) = benefit month(s); CMS = Center for Medicare and 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 10  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS,  
 BY TOP-10 DRUG GROUP<sup>a, b, c, d</sup>  
 IDAHO, 1999

Top 10 Drug Groups in Nursing Facilities	Users				Among Users		
	Total Medicaid Rx \$	No. of Users	As % of All-Year NF Residents	No. of Bene Mos	No. of Rx per Bene Mo	\$ per Rx	Rx \$ per Bene Mo
ANTIDEPRESSANTS	\$826,085	1,909	62.8 %	19,821	0.8	\$50	\$42
ANTIPSYCHOTICS	692,267	1,050	34.5	10,804	0.7	86	64
ULCER DRUGS	689,057	1,233	40.6	12,835	0.8	68	54
ANALGESICS - Narcotic	510,770	2,002	65.9	20,472	0.7	36	25
ANTICONVULSANT	317,919	686	22.6	7,377	1.0	42	43
ANTIHYPERTENSIVE	279,761	976	32.1	9,639	0.9	32	29
ANTIDIABETIC	225,925	727	23.9	7,420	0.9	35	30
ANTIANGIETY AGENTS	201,969	863	28.4	8,830	0.7	34	23
ANTIASTHMATIC	193,796	886	29.1	8,823	0.6	37	22
ANALGESICS - ANTI-INFLAMMATORY	182,083	776	25.5	8,320	0.6	39	22

Source: Data for this table are from the MAX 1999 file for Idaho, released by CMS in 11/2003. This table was produced on 06/25/2004.

a. Table 10 includes the beneficiaries represented by Cell D of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 1999. A total of 1,736 beneficiaries who were in nursing facilities for part of their enrollment and their 15,464 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 1999. 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 1999 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/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).

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



TABLE 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, BOE, AND AGE<sup>a, b, c, d</sup> IDAHO, 1999

Beneficiary Characteristics	All Top 10 Drug Groups				ANTIDEPRESSANTS				ANTIPSYCHOTICS			
	No. of Rx	Rx \$	No. of Users	Mean No. of Rx	Mean No. of Users	Residents	NF Mos among Users	Mean Rx \$	No. of Users	Residents	NF Mos among Users	Mean Rx \$
<b>All</b>	<b>87,479</b>	<b>\$4,119,632</b>	<b>1,909</b>	<b>62.8 %</b>	<b>19,821</b>	<b>0.8</b>	<b>\$42</b>	<b>1,050</b>	<b>34.5 %</b>	<b>10,804</b>	<b>0.7</b>	<b>\$64</b>
<b>Female</b>	62,535	2,912,764	1,396	62.7	14,590	0.8	41	739	33.2	7,701	0.7	60
<b>Disabled</b>	6,789	393,042	139	87.4	1,529	0.9	54	82	51.6	907	0.9	108
64 or younger	6,713	390,105	136	88.9	1,521	0.9	54	79	51.6	901	0.9	108
65-74	75	2,848	3	60.0	8	1.0	51	2	40.0	5	1.4	111
75-84	1	89	0	0.0	0	0.0	0	1	100.0	1	1.0	89
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Other Eligibles</b>	55,746	2,519,722	1,257	60.8	13,061	0.8	40	657	31.8	6,794	0.7	54
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	8,369	416,825	160	72.7	1,717	0.9	43	102	46.4	1,094	0.8	68
75-84	19,596	911,721	421	63.4	4,217	0.8	41	246	37.0	2,521	0.8	64
85 and older	27,781	1,191,176	676	57.1	7,127	0.8	38	309	26.1	3,179	0.6	41
<b>Male</b>	24,944	1,206,868	513	63.0	5,231	0.8	43	311	38.2	3,103	0.8	74
<b>Disabled</b>	5,728	306,925	85	71.4	930	0.9	50	54	45.4	561	1.0	122
64 or younger	5,723	306,824	85	72.0	930	0.9	50	54	45.8	561	1.0	122
65-74	5	101	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Other Eligibles</b>	19,216	899,943	428	61.6	4,301	0.8	41	257	37.0	2,542	0.8	63
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	4,545	233,705	83	64.8	866	0.8	47	66	51.6	635	0.8	83
75-84	7,988	386,494	178	66.2	1,819	0.8	39	110	40.9	1,102	0.8	63
85 and older	6,683	279,744	167	56.0	1,616	0.8	40	81	27.2	805	0.7	48
<b>Unknown</b>	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 1999 file for Idaho, released by CMS in 11/2003. This table was produced on 06/25/2004.

a. Table 10A includes the beneficiaries represented by Cell D of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 1999. A total of 1,736 beneficiaries who were in nursing facilities for part of their enrollment and their 15,464 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 1999. 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 1999 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/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).

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

TABLE 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, BOE, AND AGE<sup>a, b, c, d</sup>  
 IDAHO, 1999

Beneficiary Characteristics	ULCER DRUGS						ANALGESICS - Narcotic						ANTICONVULSANT					
	Users as %			Users as %			Users as %			Users as %			Users as %			Users as %		
	No. of Users	No. of Bene Mos among Residents	Mean Rx \$	No. of Users	No. of Bene Mos among Residents	Mean Rx \$	No. of Users	No. of Bene Mos among Residents	Mean Rx \$	No. of Users	No. of Bene Mos among Residents	Mean Rx \$	No. of Users	No. of Bene Mos among Residents	Mean Rx \$	No. of Users	No. of Bene Mos among Residents	Mean Rx \$
<b>All</b>	1,233	40.6 %	\$54	2,002	65.9 %	\$25	686	22.6 %	\$25	686	22.6 %	\$43	7,377	1.0	\$43	7,377	1.0	\$43
<b>Female</b>	913	41.0	54	1,523	68.4	26	407	18.3	26	407	18.3	39	4,443	1.0	39	4,443	1.0	39
<b>Disabled</b>	56	35.2	66	124	78.0	38	91	57.2	38	91	57.2	63	1,028	1.2	63	1,028	1.2	63
64 or younger	55	35.9	66	117	76.5	38	88	57.5	38	88	57.5	63	1,011	1.2	63	1,011	1.2	63
65-74	1	20.0	25	7	140.0	65	3	60.0	65	3	60.0	13	17	0.5	13	17	0.5	13
75-84	0	0.0	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	0.0	0
<b>Other Eligibles</b>	857	41.5	53	1,399	67.7	25	316	15.3	25	316	15.3	32	3,415	0.9	32	3,415	0.9	32
64 or younger	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0
65-74	102	46.4	63	171	77.7	32	80	36.4	32	80	36.4	39	913	1.0	39	913	1.0	39
75-84	280	42.2	55	437	65.8	27	115	17.3	27	115	17.3	36	1,211	0.9	36	1,211	0.9	36
85 and older	475	40.2	49	791	66.9	22	121	10.2	22	121	10.2	24	1,291	0.9	24	1,291	0.9	24
<b>Male</b>	320	39.3	54	479	58.8	22	279	34.3	22	279	34.3	49	2,934	1.1	49	2,934	1.1	49
<b>Disabled</b>	62	52.1	68	78	65.5	34	92	77.3	34	92	77.3	64	977	1.2	64	977	1.2	64
64 or younger	61	51.7	68	78	66.1	34	92	78.0	34	92	78.0	64	977	1.2	64	977	1.2	64
65-74	1	100.0	81	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0
75-84	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	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	0.0	0
<b>Other Eligibles</b>	258	37.1	51	401	57.7	20	187	26.9	20	187	26.9	41	1,957	1.0	41	1,957	1.0	41
64 or younger	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0
65-74	61	47.7	53	80	62.5	21	49	38.3	21	49	38.3	41	534	1.0	41	534	1.0	41
75-84	94	34.9	54	139	51.7	29	88	32.7	29	88	32.7	49	895	1.0	49	895	1.0	49
85 and older	103	34.6	46	182	61.1	13	50	16.8	13	50	16.8	29	528	0.9	29	528	0.9	29
<b>Unknown</b>	0	0.0	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 1999 file for Idaho, released by CMS in 11/2003. This table was produced on 06/25/2004.

a. Table 10B includes the beneficiaries represented by Cell D of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 1999. A total of 1,736 beneficiaries who were in nursing facilities for part of their enrollment and their 15,464 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 1999. 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 1999 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/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).

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

TABLE 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, BOE, AND AGE<sup>a, b, c, d</sup>  
 IDAHO, 1999

Beneficiary Characteristics	ANTIHYPERTENSIVE					ANTIIDIABETIC					ANTIANSXIETY AGENTS						
	Users as %					Users as %					Users as %						
	No. of Users	No. of Bene Mos among Residents	Mean No. of Rx	Mean Rx \$	Mean No. of Rx	No. of Users	No. of Bene Mos among Residents	Mean No. of Rx	Mean Rx \$	Mean No. of Rx	No. of Users	No. of Bene Mos among Residents	Mean No. of Rx	Mean Rx \$	No. of Users	No. of Bene Mos among Residents	Mean No. of Rx
<b>All</b>	<b>976</b>	<b>32.1 %</b>	<b>0.9</b>	<b>\$29</b>	<b>0.9</b>	<b>727</b>	<b>23.9 %</b>	<b>0.9</b>	<b>\$30</b>	<b>0.9</b>	<b>863</b>	<b>28.4 %</b>	<b>0.7</b>	<b>\$23</b>	<b>8,830</b>	<b>0.7</b>	<b>\$23</b>
<b>Female</b>	684	30.7	0.9	28	0.9	498	22.4	0.9	30	0.9	630	28.3	0.7	24	6,507	0.7	24
<b>Disabled</b>	44	27.7	0.8	25	0.8	33	20.8	1.0	35	1.0	69	43.4	0.8	26	699	0.8	26
64 or younger	41	26.8	0.8	25	0.8	32	20.9	1.0	35	1.0	64	41.8	0.8	27	687	0.8	27
65-74	3	60.0	0.7	19	0.7	1	20.0	0.5	23	0.5	5	100.0	1.0	16	12	1.0	16
75-84	0	0.0	0.0	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	0	0	0.0	0
<b>Other Eligibles</b>	640	31.0	0.9	28	0.9	465	22.5	0.9	29	0.9	561	27.1	0.6	23	5,808	0.6	23
64 or younger	0	0.0	0.0	0	0.0	0	0.0	0.0	0	0.0	0	0.0	0.0	0	0	0.0	0
65-74	69	31.4	0.9	35	0.9	75	34.1	0.9	33	0.9	83	37.7	0.6	19	848	0.6	19
75-84	228	34.3	0.9	29	0.9	194	29.2	0.9	28	0.9	201	30.3	0.7	23	2,038	0.7	23
85 and older	343	29.0	0.9	27	0.9	196	16.6	0.9	29	0.9	277	23.4	0.6	25	2,922	0.6	25
<b>Male</b>	292	35.9	0.9	31	0.9	229	28.1	0.9	33	0.9	233	28.6	0.7	21	2,323	0.7	21
<b>Disabled</b>	50	42.0	0.9	35	0.9	38	31.9	0.8	36	0.8	40	33.6	1.1	28	440	1.1	28
64 or younger	49	41.5	0.9	35	0.9	38	32.2	0.8	36	0.8	40	33.9	1.1	28	440	1.1	28
65-74	1	100.0	3.0	20	3.0	0	0.0	0.0	0	0.0	0	0.0	0.0	0	0	0.0	0
75-84	0	0.0	0.0	0	0.0	0	0.0	0.0	0	0.0	0	0.0	0.0	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	0	0	0.0	0
<b>Other Eligibles</b>	242	34.8	0.9	30	0.9	191	27.5	0.9	32	0.9	193	27.8	0.6	20	1,883	0.6	20
64 or younger	0	0.0	0.0	0	0.0	0	0.0	0.0	0	0.0	0	0.0	0.0	0	0	0.0	0
65-74	46	35.9	0.9	32	0.9	45	35.2	0.9	35	0.9	36	28.1	0.6	30	369	0.6	30
75-84	112	41.6	0.9	31	0.9	68	25.3	0.9	35	0.9	83	30.9	0.5	20	810	0.5	20
85 and older	84	28.2	0.9	29	0.9	78	26.2	0.8	27	0.8	74	24.8	0.5	14	704	0.5	14
<b>Unknown</b>	0	0.0	0.0	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 1999 file for Idaho, released by CMS in 11/2003. This table was produced on 06/25/2004.

- a. Table 10C includes the beneficiaries represented by Cell D of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 1999. A total of 1,736 beneficiaries who were in nursing facilities for part of their enrollment and their 15,464 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 1999. 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 1999 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/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).
- BOE = basis of eligibility; CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE 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, BOE, AND AGE<sup>a, b, c, d</sup>  
 IDAHO, 1999

Beneficiary Characteristics	ANTI-ASTHMATIC					ANALGESICS - ANTI-INFLAMMATORY					Bene Mos among All-Year NF Residents	
	Users as %		No. of Bene		Mean	Users as %		No. of Bene		Mean		
	No. of Users	Residents	NF	All-Year		No. of Rx	Rx-\$	No. of Users	Residents			NF
<b>All</b>	<b>886</b>	<b>29.1 %</b>	<b>8,823</b>	<b>0.6</b>	<b>\$22</b>	<b>776</b>	<b>25.5 %</b>	<b>8,320</b>	<b>0.6</b>	<b>\$22</b>	<b>3,040</b>	<b>29,990</b>
<b>Female</b>	585	26.3	5,779	0.6	21	583	26.2	6,306	0.6	23	2,226	22,280
<b>Disabled</b>	36	22.6	378	0.5	24	44	27.7	497	0.7	13	159	1,667
64 or younger	34	22.2	373	0.5	25	42	27.5	492	0.7	13	153	1,644
65-74	2	40.0	5	0.4	12	2	40.0	5	0.6	6	5	22
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	1
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
<b>Other Eligibles</b>	549	26.6	5,401	0.6	21	539	26.1	5,809	0.6	23	2,067	20,613
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	68	30.9	666	0.7	25	74	33.6	833	0.6	23	220	2,306
75-84	195	29.4	1,829	0.6	24	180	27.1	1,867	0.5	23	664	6,537
85 and older	286	24.2	2,906	0.5	18	285	24.1	3,109	0.5	24	1,183	11,770
<b>Male</b>	301	37.0	3,044	0.6	24	193	23.7	2,014	0.5	20	814	7,710
<b>Disabled</b>	43	36.1	467	0.7	25	30	25.2	338	0.3	8	119	1,221
64 or younger	43	36.4	467	0.7	25	30	25.4	338	0.3	8	118	1,220
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	1
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
<b>Other Eligibles</b>	258	37.1	2,577	0.6	24	163	23.5	1,676	0.6	22	695	6,489
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	44	34.4	467	0.8	36	33	25.8	373	0.6	22	128	1,282
75-84	91	33.8	915	0.7	24	70	26.0	723	0.5	22	269	2,512
85 and older	123	41.3	1,195	0.5	20	60	20.1	580	0.6	23	298	2,695
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0

Source: Data for this table are from the MAX 1999 file for Idaho, released by CMS in 11/2003. This table was produced on 06/25/2004.

a. Table 10D includes the beneficiaries represented by Cell D of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 1999. A total of 1,736 beneficiaries who were in nursing facilities for part of their enrollment and their 15,464 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 1999. 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 1999 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/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).

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

APPENDIX TABLE A.1

CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY<sup>a, b</sup>  
IDAHO, 1999

Beneficiary Characteristics	No. of Benes					No. of Bene Mos						
	All	Aged	Disabled	Adults	Children	Unknown	All	Aged	Disabled	Adults	Children	Unknown
<b>All</b>	<b>131,817</b>	<b>9,630</b>	<b>22,104</b>	<b>20,381</b>	<b>79,702</b>	<b>0</b>	<b>1,096,378</b>	<b>94,677</b>	<b>232,971</b>	<b>120,374</b>	<b>648,356</b>	<b>0</b>
<b>Age</b>												
5 and younger	39,208	0	1,053	0	38,155	0	315,935	0	10,636	0	305,299	0
6-14	34,800	0	2,699	0	32,101	0	303,912	0	29,593	0	274,319	0
15-20	13,846	0	1,797	2,651	9,398	0	102,956	0	18,971	15,369	68,616	0
21-44	25,780	0	8,811	16,924	45	0	193,010	0	93,285	99,610	115	0
45-64	8,468	0	7,663	803	2	0	85,194	0	79,807	5,383	4	0
65-74	3,376	3,304	70	2	0	0	34,750	34,161	580	9	0	0
75-84	3,182	3,171	10	1	0	0	31,232	31,133	96	3	0	0
85 and older	3,156	3,155	1	0	0	0	29,386	29,383	3	0	0	0
Unknown	1	0	0	0	1	3	0	0	0	0	3	0
<b>Gender</b>												
Female	76,782	7,044	11,396	18,438	39,904	0	624,319	70,305	120,795	109,813	323,406	0
Male	55,035	2,586	10,708	1,943	39,798	0	472,059	24,372	112,176	10,561	324,950	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
<b>Race</b>												
White	108,671	8,837	20,207	17,280	62,347	0	909,176	86,233	212,832	104,935	505,176	0
African American	877	32	102	93	650	0	7,514	319	1,039	495	5,661	0
Other/unknown	22,269	761	1,795	3,008	16,705	0	179,688	8,125	19,100	14,944	137,519	0
<b>Use of Nursing Facilities</b>												
All year	3,040	2,762	278	0	0	0	29,990	27,102	2,888	0	0	0
Part year	1,736	1,407	328	0	1	0	15,464	12,092	3,366	0	6	0
None	127,041	5,461	21,498	20,381	79,701	0	1,050,924	55,483	226,717	120,374	648,350	0
<b>Maintenance Assistance Status</b>												
Cash	25,006	2,223	20,897	378	1,508	0	258,841	24,103	220,176	1,838	12,724	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0
Poverty related	68,259	76	148	8,938	59,097	0	520,802	745	1,516	44,362	474,179	0
Other/unknown	38,552	7,331	1,059	11,065	19,097	0	316,735	69,829	11,279	74,174	161,453	0
<b>Dual Status<sup>c</sup></b>												
Full dual, all year	16,129	9,128	6,934	66	1	0	165,869	89,811	75,557	494	7	0
Full dual, part year	528	277	250	1	0	0	5,343	2,724	2,611	8	0	0
Non-dual, all year	115,160	225	14,920	20,314	79,701	0	925,166	2,142	154,803	119,872	648,349	0
<b>Managed Care Status</b>												
FFS all year	131,817	9,630	22,104	20,381	79,702	0	1,096,378	94,677	232,971	120,374	648,356	0
FFS part year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
FFS part year, no Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
MC all year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
MC all year, no Rx claims	0	0	0	0	0	0	0	0	0	0	0	0

Source: Data for this table are from the MAX 1999 file for Idaho, released by CMS in 11/2003. This table was produced on 06/25/2004.

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

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. The "Full dual, all year" group contains beneficiaries who had Medicare as well as Medicaid pharmacy benefits during all months of Medicaid enrollment in 1999. The "Full dual, part year" group contains beneficiaries who had such benefits for some, but not all, months of their enrollment. The "Non-dual, all year" group includes beneficiaries who were never dually eligible or dually eligible but never had pharmacy benefits. 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 = Center for Medicare and 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  
 IDAHO, 1999

	Benes and			
	Bene Mos in Cell B of Table 1 No. of Benes	1,096,378	131,817	1,096,378
	131,817	1,096,378	131,817	1,096,378
	131,817	1,096,378	131,817	1,096,378
<b>All</b>	<b>131,817</b>	<b>1,096,378</b>	<b>131,817</b>	<b>1,096,378</b>
FFS all year	131,817	1,096,378	131,817	1,096,378
FFS part year, with Rx claims	0	0	0	0
FFS part year, with no Rx claims	0	0	0	0
MC all year, with Rx claims	0	0	0	0
MC all year, with no Rx claims	0	0	0	0

Source: Data for this table are from the MAX 1999 file for Idaho, released by CMS in 11/2003. This table was produced on 06/25/2004.

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