

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

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TABLE 1  
OVERVIEW OF BENEFICIARY SELECTION CRITERIA FOR STUDY POPULATION  
SOUTH DAKOTA, 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>	95,437 (A)	17,161 (E)
2. Benes who had Medicaid pharmacy benefits during at least one month <sup>b</sup>	91,943 (B)	13,693 (F)
3. Benes who had fee-for-service pharmacy benefit coverage during at least one month <sup>c, d, e</sup>	91,943 (C)	13,693 (G)
4. Benes who were all-year nursing facility residents <sup>f</sup>	4,559 (D)	4,350 (H)

Source: Data for this table are from the MAX 1999 file for South Dakota, released by CMS in 1/2004. 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 South Dakota in 1999 was \$38,117,396, of which \$52,128 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 1.2 percent were restricted benefit months without a pharmacy benefit in South Dakota, 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>  
 SOUTH DAKOTA, 1999

Beneficiary Characteristics	No. of Benefes							No. of Bene Mos				
	All	Aged	Disabled	Adults	Children	Other/Unknown	All	Aged	Disabled	Adults	Children	Other/Unknown
<b>All</b>	<b>91,943</b>	<b>7,973</b>	<b>14,708</b>	<b>14,741</b>	<b>54,521</b>	<b>0</b>	<b>820,630</b>	<b>79,853</b>	<b>157,272</b>	<b>103,607</b>	<b>479,898</b>	<b>0</b>
<b>Age</b>												
5 and younger	23,068	0	660	19	22,389	0	196,271	0	6,407	145	189,719	0
6-14	25,422	0	1,450	18	23,954	0	238,161	0	15,654	194	222,313	0
15-20	11,323	0	1,113	2,077	8,133	0	92,768	0	11,556	13,639	67,573	0
21-44	16,950	0	5,089	11,819	42	0	138,337	0	54,868	83,190	279	0
45-64	5,587	9	4,780	797	1	0	57,130	74	50,683	6,362	11	0
65-74	2,641	1,390	1,241	10	0	0	27,910	13,942	13,894	74	0	0
75-84	3,040	2,726	314	0	0	0	31,590	28,033	3,557	0	0	0
85 and older	3,910	3,848	61	1	0	0	38,460	37,804	653	3	0	0
Unknown	2	0	0	0	2	3	0	0	0	0	3	0
<b>Gender</b>												
Female	53,199	5,865	7,679	12,793	26,862	0	470,257	59,626	82,729	91,346	236,556	0
Male	38,723	2,107	7,029	1,947	27,640	0	350,293	20,226	74,543	12,249	243,275	0
Unknown	21	1	0	1	19	0	80	1	0	12	67	0
<b>Race</b>												
White	53,868	7,185	9,492	7,758	29,433	0	478,114	71,707	101,119	51,185	254,103	0
African American	202	4	97	2	99	0	1,632	33	822	10	767	0
Other/unknown	37,873	784	5,119	6,981	24,989	0	340,884	8,113	55,331	52,412	225,028	0
<b>Use of Nursing Facilities</b>												
All year	4,559	3,997	562	0	0	0	46,179	40,090	6,089	0	0	0
Part year	1,415	1,104	306	4	1	0	13,139	10,089	3,004	34	12	0
None	85,969	2,872	13,840	14,737	54,520	0	761,312	29,674	148,179	103,573	479,886	0
<b>Maintenance Assistance Status</b>												
Cash	38,533	2,416	12,956	7,912	15,249	0	364,205	26,355	138,696	58,109	141,045	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0
Poverty-related	32,667	50	46	3,978	28,593	0	277,288	475	461	21,059	255,293	0
Other/unknown	20,743	5,507	1,706	2,851	10,679	0	179,137	53,023	18,115	24,439	83,560	0
<b>Dual Medicare Status<sup>c</sup></b>												
Full dual, all year	13,354	7,485	5,786	82	1	0	140,426	75,028	64,740	649	9	0
Full dual, part year	339	239	95	5	0	0	3,588	2,529	1,012	47	0	0
Non-dual, all year	78,250	249	8,827	14,654	54,520	0	676,616	2,296	91,520	102,911	479,889	0
<b>Managed Care Status</b>												
FFS all year	91,943	7,973	14,708	14,741	54,521	0	820,630	79,853	157,272	103,607	479,898	0
FFS part year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
FFS part year, no Rx claims	0	0	0	0	0	0	0	0	0	0	0	0

Source: Data for this table are from the MAX 1999 file for South Dakota, released by CMS in 1/2004. 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>  
 SOUTH DAKOTA, 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 Benefes
All	56.2 %	10.0	\$414	\$41	\$4,073	10.2 %	\$8	91,943
<b>Age</b>								
5 and younger	57.2	3.2	82	25	1,639	5.0	1	23,068
6-14	45.5	2.8	113	41	1,213	9.3	2	25,422
15-20	47.4	3.4	161	47	2,813	5.7	2	11,323
21-44	56.2	9.4	583	62	5,322	11.0	7	16,950
45-64	65.8	27.3	1,273	47	10,539	12.1	37	5,587
65-74	74.9	33.5	1,296	39	9,211	14.1	43	2,641
75-84	88.1	47.9	1,681	35	12,356	13.6	38	3,040
85 and older	94.9	48.5	1,527	32	16,104	9.5	17	3,910
Unknown	0.0	0.0	0	0	21	0.0	0	2
<b>Basis of Eligibility</b>								
Aged	90.0	46.6	1,569	34	13,782	11.4	29	7,973
Disabled	69.1	23.7	1,326	56	11,394	11.6	24	14,708
Adults	50.0	3.7	121	33	2,076	5.8	3	14,741
Children	49.5	2.7	78	30	1,217	6.4	2	54,521
Unknown	0.0	0.0	0	0	0	0.0	0	0
<b>Gender</b>								
Female	58.9	11.8	451	38	4,198	10.7	10	53,199
Male	52.6	7.5	363	48	3,891	9.3	6	38,723
Unknown	19.0	1.9	98	53	21,081	0.5	0	21
<b>Race</b>								
White	71.0	14.9	623	42	5,134	12.1	12	53,868
African American	55.0	8.3	358	43	4,113	8.7	3	202
Other/unknown	35.2	3.0	118	39	2,563	4.6	3	37,873
<b>Use of Nursing Facilities</b>								
Entire year	97.8	58.5	2,038	35	22,550	9.0	30	4,559
Part year	94.7	47.3	1,721	36	16,955	10.1	34	1,415
None	53.4	6.8	306	45	2,881	10.6	6	85,969
<b>Maintenance Assistance Status</b>								
Cash	51.9	10.8	532	49	4,265	12.5	11	38,533
Medically needy	0.0	0.0	0	0	0	0.0	0	0
Poverty related	54.1	2.8	82	29	1,018	8.0	2	32,667
Other/unknown	67.8	19.8	718	36	8,525	8.4	11	20,743

Source: Data for this table are from the MAX 1999 file for South Dakota, released by CMS in 1/2004. 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>  
 SOUTH DAKOTA, 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	1.1	\$46	10.2 %	43.8 %	39.3 %	4.9 %	6.7 %	4.3 %	1.0 %	\$456	91,943	820,630
<b>Age</b>												
5 and younger	0.4	10	5.0	42.8	52.7	3.5	0.9	0.1	0.0	193	23,068	196,271
6-14	0.3	12	9.3	54.5	41.3	2.7	1.5	0.1	0.0	129	25,422	238,161
15-20	0.4	20	5.7	52.6	40.5	4.1	2.5	0.3	0.0	343	11,323	92,768
21-44	1.2	71	11.0	43.8	37.7	7.0	7.8	3.1	0.6	652	16,950	138,337
45-64	2.7	125	12.1	34.2	21.5	8.7	19.3	12.8	3.6	1,031	5,587	57,130
65-74	3.2	123	14.1	25.1	19.2	10.7	23.2	16.8	4.9	872	2,641	27,910
75-84	4.6	162	13.6	11.9	13.2	8.7	29.9	28.1	8.2	1,189	3,040	31,590
85 and older	4.9	155	9.5	5.1	10.6	9.8	35.5	32.8	6.1	1,637	3,910	38,460
Unknown	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	14	2	3
<b>Basis of Eligibility</b>												
Aged	4.7	157	11.4	10.0	12.5	9.5	31.7	29.2	7.1	1,376	7,973	79,853
Disabled	2.2	124	11.6	30.9	27.9	10.2	18.5	10.1	2.4	1,066	14,708	157,272
Adults	0.5	17	5.8	50.0	41.3	5.1	2.9	0.6	0.1	295	14,741	103,607
Children	0.3	9	6.4	50.5	45.8	2.8	0.9	0.0	0.0	138	54,521	479,898
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	1.3	51	10.7	41.1	39.4	5.2	7.6	5.4	1.3	475	53,199	470,257
Male	0.8	40	9.3	47.4	39.2	4.6	5.5	2.6	0.6	430	38,723	350,293
Unknown	0.5	26	0.5	81.0	9.5	9.5	0.0	0.0	0.0	5,534	21	80
<b>Race</b>												
White	1.7	70	12.1	29.0	45.6	6.8	10.1	6.8	1.7	578	53,868	478,114
African American	1.0	44	8.7	45.0	38.1	6.4	7.4	3.0	0.0	509	202	1,632
Other/unknown	0.3	13	4.6	64.8	30.4	2.2	1.8	0.7	0.1	285	37,873	340,884
<b>Use of Nursing Facilities</b>												
Entire year	5.8	201	9.0	2.2	7.9	7.9	33.9	37.6	10.5	2,226	4,559	46,179
Part year	5.1	185	10.1	5.3	11.2	11.2	34.1	29.5	8.6	1,826	1,415	13,139
None	0.8	35	10.6	46.6	41.4	4.7	4.8	2.1	0.4	325	85,969	761,312
<b>Maintenance Assistance Status</b>												
Cash	1.1	56	12.5	48.1	32.7	5.8	8.4	4.1	0.8	451	38,533	364,205
Medically needy	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Poverty related	0.3	10	8.0	45.9	50.2	2.9	0.9	0.1	0.0	120	32,667	277,288
Other/unknown	2.3	83	8.4	32.2	34.6	6.5	12.7	11.1	3.0	987	20,743	179,137

Source: Data for this table are from the MAX 1999 file for South Dakota, released by CMS in 1/2004. 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>  
 SOUTH DAKOTA, 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>1.1</b>	<b>\$46</b>	<b>0.4</b>	<b>\$27</b>	<b>0.2</b>	<b>\$9</b>	<b>0.5</b>	<b>\$9</b>
<b>Age</b>								
5 and younger	0.4	10	0.1	6	0.0	0	0.2	3
6-14	0.3	12	0.1	8	0.0	2	0.1	3
15-20	0.4	20	0.2	13	0.0	3	0.2	3
21-44	1.2	71	0.4	40	0.2	16	0.5	13
45-64	2.7	125	1.0	77	0.4	22	1.1	19
65-74	3.2	123	1.0	69	0.6	23	1.4	24
75-84	4.6	162	1.4	85	0.9	33	2.1	35
85 and older	4.9	155	1.3	79	1.1	34	2.3	35
Unknown	0.0	0	0.0	0	0.0	0	0.0	0
<b>Basis of Eligibility</b>								
Aged	4.7	157	1.4	82	1.0	61	2.1	34
Disabled	2.2	124	0.8	73	0.4	88	0.9	21
Adults	0.5	17	0.2	11	0.1	3	0.3	3
Children	0.3	9	0.1	6	0.0	1	0.2	2
Unknown	0.0	0	0.0	0	0.0	0	0.0	0
<b>Gender</b>								
Female	1.3	51	0.4	31	0.2	9	0.6	9
Male	0.8	40	0.3	22	0.1	9	0.4	9
Unknown	0.5	26	0.1	19	0.0	0	0.3	7
<b>Race</b>								
White	1.7	70	0.6	40	0.3	14	0.8	14
African American	1.0	44	0.4	29	0.1	6	0.5	8
Other/unknown	0.3	13	0.1	8	0.0	2	0.2	3
<b>Use of Nursing Facilities</b>								
Entire year	5.8	201	1.6	105	1.2	41	2.7	46
Part year	5.1	185	1.6	105	1.0	32	2.3	39
None	0.8	35	0.3	21	0.1	6	0.3	6
<b>Maintenance Assistance</b>								
<b>Status</b>								
Cash	1.1	56	0.4	33	0.2	11	0.5	10
Medically needy	0.0	0	0.0	0	0.0	0	0.0	0
Poverty related	0.3	10	0.1	6	0.0	1	0.2	2
Other/unknown	2.3	83	0.7	46	0.4	16	1.1	18
<b>\$ per Rx</b>								
		<b>\$46</b>		<b>\$27</b>		<b>\$9</b>		<b>\$9</b>
						<b>\$48</b>		<b>\$18</b>

Source: Data for this table are from the MAX 1999 file for South Dakota, released by CMS in 1/2004. 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 South Dakota, 4.9 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 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>  
 SOUTH DAKOTA, 1999

Therapeutic Category	No. of Rx per Bene Mo among Users				\$ per Bene Mo among Users				Users								
	Total	Patented	Off-Patent	Generic	Total	Patented	Off-Patent	Generic	Total No. of Rx	Total Rx \$	No.	As % of All Benes	No. of Bene Mos				
														Brand-Name	Brand-Name	Brand-Name	Brand-Name
Anti-infective Agents	0.3	0.1	0.0	0.1	\$10	\$8	\$0	\$2	\$34	\$55	\$34	\$12	113,122	\$3,828,764	38,211	41.6%	390,611
Biologics	0.1	0.1	0.0	0.0	32	32	0	0	291	352	0	21	509	148,233	413	0.4	4,614
Antineoplastic Agents	0.6	0.3	0.1	0.2	116	99	8	9	199	348	90	43	2,450	487,613	399	0.4	4,188
Endocrine/Metabolic Drugs	0.6	0.2	0.2	0.2	19	12	4	2	29	50	19	13	76,364	2,240,839	11,554	12.6	120,030
Cardiovascular Agents	1.5	0.4	0.4	0.7	39	18	11	10	25	44	29	13	159,861	4,073,661	9,913	10.8	104,457
Respiratory Agents	0.4	0.2	0.0	0.2	14	9	0	5	34	53	25	20	81,855	2,774,496	18,722	20.4	193,904
Gastrointestinal Agents	0.6	0.3	0.1	0.3	39	26	6	6	62	99	78	23	50,557	3,154,959	7,648	8.3	80,608
Genitourinary Agents	0.4	0.2	0.0	0.2	14	11	0	3	39	50	35	23	13,607	526,216	3,510	3.8	36,313
CNS Drugs	1.0	0.5	0.2	0.4	66	44	15	7	64	96	99	17	125,907	8,090,474	11,718	12.7	122,040
Stimulants/Anti-obesity/Anorexia	0.6	0.1	0.1	0.4	23	5	5	13	38	40	51	35	12,471	477,561	1,979	2.2	20,548
Miscellaneous Psychological/Neurological Agents	0.7	0.5	0.0	0.1	71	68	0	3	105	125	100	24	1,935	203,684	285	0.3	2,859
Analgesics and Anesthetics	0.5	0.1	0.1	0.3	19	11	4	5	37	88	61	14	71,461	2,620,713	13,529	14.7	138,015
Neuromuscular Agents	0.8	0.3	0.1	0.4	40	26	6	8	53	100	44	23	60,771	3,199,268	7,372	8.0	79,056
Nutritional Products	0.6	0.0	0.2	0.4	11	0	5	6	20	23	28	16	29,490	592,260	5,391	5.9	52,084
Hematological Agents	0.8	0.0	0.4	0.3	86	13	44	28	110	277	99	99	21,661	2,378,933	2,665	2.9	27,716
Topical Products	0.3	0.1	0.0	0.1	7	4	1	2	27	46	32	13	52,018	1,390,411	19,465	21.2	205,383
Miscellaneous Products	0.3	0.1	0.0	0.1	34	18	11	4	124	153	231	36	2,347	290,705	805	0.9	8,670
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	12	0	0	0	37	0	0	0	42,817	1,586,478	12,059	13.1	128,033
<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.	919,203	38,065,268	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 1999 file for South Dakota, released by CMS in 1/2004. 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 South Dakota, 4.9 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>  
 SOUTH DAKOTA, 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	\$3,810,286	4,713 5.1 %	50,741	0.7	\$109	\$75	
ANTIDEPRESSANTS	3,335,713	10,197 11.1	107,101	0.6	54	31	
ANTICONVULSANT	2,615,051	4,560 5.0	49,749	0.8	62	53	
ULCER DRUGS	2,508,795	6,762 7.4	72,084	0.5	76	35	
MISC. HEMATOLOGICAL	1,899,755	556 0.6	5,805	0.5	606	327	
ANTIASTHMATIC	1,602,080	12,841 14.0	133,187	0.3	34	12	
ANALGESICS - Narcotic	1,217,290	12,225 13.3	125,011	0.3	30	10	
ANALGESICS - ANTI-INFLAMMATORY	1,213,676	7,783 8.5	82,905	0.3	49	15	
ANTIHYPERTENSIVE	1,147,637	4,856 5.3	52,091	0.7	32	22	
ANTIDIABETIC	1,075,952	3,578 3.9	38,240	0.8	37	28	

Source: Data for this table are from the MAX 1999 file for South Dakota, released by CMS in 1/2004. 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>  
 SOUTH DAKOTA, 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>351,745</b>	<b>\$20,426,235</b>	<b>4,713</b>	<b>5.1 %</b>	<b>50,741</b>	<b>0.7</b>	<b>\$75</b>	<b>10,197</b>	<b>11.1 %</b>	<b>107,101</b>	<b>0.6</b>	<b>\$31</b>					
<b>Female</b>																	
<b>Disabled</b>																	
5 and younger	236,065	12,173,834	2,850	5.4	30,684	0.7	67	7,200	13.5	75,444	0.6	32					
6-14	103,562	6,465,097	1,372	17.9	15,592	0.8	97	2,867	37.3	32,286	0.6	36					
15-20	918	43,313	0	0.0	0	0.0	0	5	1.7	56	0.2	5					
21-44	2,534	169,333	15	2.7	170	0.5	41	61	11.1	708	0.5	22					
45-64	2,405	181,325	34	7.4	396	0.5	53	98	21.4	1,098	0.5	33					
65-74	35,013	2,527,800	643	25.2	7,302	0.8	109	1,226	48.0	13,810	0.6	38					
75-84	47,077	2,773,589	528	19.1	6,005	0.8	98	1,225	44.3	13,711	0.6	37					
85 and older	11,745	603,283	92	11.7	1,038	0.8	77	189	24.0	2,177	0.6	29					
<b>Other Eligibles</b>																	
5 and younger	3,296	139,448	42	18.4	492	0.7	39	48	21.1	555	0.6	27					
6-14	574	27,006	18	40.9	189	0.7	31	15	34.1	171	0.4	25					
15-20	132,503	5,708,737	1,478	3.2	15,092	0.5	36	4,333	9.5	43,158	0.6	28					
21-44	3,370	82,787	2	0.0	24	0.1	1	24	0.2	270	0.2	4					
45-64	4,762	176,060	38	0.3	360	0.3	22	321	2.7	3,246	0.4	18					
65-74	5,088	183,580	72	1.2	660	0.3	14	464	7.6	4,314	0.4	21					
75-84	15,113	560,345	163	1.6	1,533	0.2	16	1,103	10.8	10,171	0.4	23					
85 and older	1,855	80,989	10	1.8	92	0.3	30	89	15.6	834	0.4	23					
<b>Male</b>																	
<b>Disabled</b>																	
5 and younger	115,661	8,251,827	1,863	4.8	20,057	0.7	87	2,997	7.7	31,657	0.6	30					
6-14	62,909	6,058,939	1,228	17.5	13,822	0.8	109	1,390	19.8	15,574	0.6	36					
15-20	1,158	70,490	2	0.5	19	0.5	45	2	0.5	23	0.1	2					
21-44	3,857	321,411	74	8.2	809	0.6	73	124	13.8	1,395	0.5	22					
45-64	3,435	348,341	83	12.7	915	0.5	73	136	20.8	1,466	0.6	33					
65-74	24,657	3,559,325	643	25.4	7,200	0.8	129	594	23.5	6,703	0.6	39					
75-84	23,137	1,442,750	334	16.6	3,808	0.9	101	450	22.3	5,009	0.6	36					
85 and older	5,382	257,179	72	15.8	843	0.8	57	70	15.4	815	0.7	40					
<b>Other Eligibles</b>																	
5 and younger	988	43,178	8	9.3	96	1.1	86	12	14.0	139	0.6	19					
6-14	295	16,265	12	70.6	132	1.0	70	2	11.8	24	0.5	4					
15-20	52,752	2,192,888	635	2.0	6,235	0.6	39	1,607	5.1	16,083	0.5	25					
21-44	4,801	114,480	4	0.0	33	0.2	7	27	0.2	307	0.3	6					
45-64	8,193	318,280	117	1.0	1,233	0.5	37	478	3.9	5,058	0.4	18					
65-74	2,940	126,245	54	1.3	511	0.4	38	242	5.9	2,291	0.4	23					
75-84	1,784	70,934	28	1.7	251	0.4	36	98	6.0	870	0.4	20					
85 and older	764	32,509	5	2.1	51	0.9	24	33	13.9	296	0.4	19					
<b>Unknown</b>																	
	19	574	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 South Dakota, released by CMS in 1/2004. 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>  
 SOUTH DAKOTA, 1999

Beneficiary Characteristics	ANTICONVULSANT					ULCER DRUGS					MISC. HEMATOLOGICAL				
	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>4,560</b>	<b>5.0 %</b>	<b>49,749</b>	<b>0.8</b>	<b>\$53</b>	<b>6,762</b>	<b>7.4 %</b>	<b>72,084</b>	<b>0.5</b>	<b>\$35</b>	<b>556</b>	<b>0.6 %</b>	<b>5,805</b>	<b>0.5</b>	<b>\$327</b>
<b>Female</b>	2,671	5.0	29,079	0.8	48	4,779	9.0	51,200	0.5	35	371	0.7	3,863	0.5	37
<b>Disabled</b>	1,758	22.9	19,885	0.9	57	1,725	22.5	19,598	0.4	38	106	1.4	1,160	0.4	39
5 and younger	32	11.0	360	0.7	53	37	12.8	405	0.3	13	0	0.0	0	0.0	0
6-14	139	25.3	1,548	0.7	56	45	8.2	487	0.4	42	1	0.2	12	0.5	1,265
15-20	100	21.8	1,104	0.9	86	31	6.8	342	0.3	19	1	0.2	12	0.4	3
21-44	797	31.2	9,063	0.8	59	503	19.7	5,689	0.4	37	9	0.4	94	0.6	32
45-64	585	21.1	6,605	0.9	53	783	28.3	8,941	0.5	40	57	2.1	612	0.4	25
65-74	87	11.1	995	1.0	48	231	29.4	2,628	0.5	40	21	2.7	234	0.4	29
75-84	17	7.5	198	0.9	30	78	34.2	915	0.5	30	13	5.7	156	0.5	27
85 and older	1	2.3	12	0.3	4	17	38.6	191	0.4	31	4	9.1	40	0.4	21
<b>Other Eligibles</b>	913	2.0	9,194	0.7	28	3,054	6.7	31,602	0.5	33	265	0.6	2,703	0.6	36
5 and younger	39	0.4	370	0.5	24	154	1.4	1,388	0.2	8	0	0.0	0	0.0	0
6-14	56	0.5	617	0.7	35	134	1.1	1,448	0.2	12	0	0.0	0	0.0	0
15-20	45	0.7	381	0.4	25	170	2.8	1,669	0.2	11	1	0.0	12	0.2	2
21-44	209	2.0	1,914	0.5	21	465	4.6	4,409	0.2	15	2	0.0	12	0.3	14
45-64	13	2.3	103	0.5	19	55	9.7	559	0.3	26	3	0.5	26	0.2	8
65-74	97	11.5	1,015	0.8	31	274	32.3	2,996	0.5	37	31	3.7	320	0.4	26
75-84	257	13.1	2,809	0.9	32	739	37.8	7,942	0.6	42	94	4.8	971	0.6	40
85 and older	197	6.4	1,985	0.8	25	1,063	34.7	11,191	0.6	42	134	4.4	1,362	0.6	37
<b>Male</b>	1,889	4.9	20,670	0.9	59	1,983	5.1	20,884	0.5	35	185	0.5	1,942	0.6	904
<b>Disabled</b>	1,431	20.4	16,147	0.9	67	889	12.6	9,982	0.5	39	66	0.9	743	0.5	2,302
5 and younger	32	8.6	371	0.6	27	41	11.1	419	0.4	16	1	0.3	12	0.3	2,401
6-14	136	15.1	1,551	0.8	64	40	4.4	469	0.4	25	4	0.4	45	0.2	1,917
15-20	109	16.7	1,227	0.9	72	43	6.6	486	0.4	32	3	0.5	36	0.4	2,914
21-44	707	27.9	7,992	1.0	73	282	11.1	3,170	0.5	44	8	0.3	89	0.7	16,300
45-64	373	18.5	4,167	1.0	65	363	18.0	4,029	0.5	42	29	1.4	309	0.5	107
65-74	64	14.1	724	1.0	40	91	20.0	1,075	0.5	38	19	4.2	228	0.5	27
75-84	9	10.5	103	0.7	22	23	26.7	267	0.4	29	1	1.2	12	1.0	50
85 and older	1	5.9	12	0.3	2	6	35.3	67	0.4	30	1	5.9	12	0.4	23
<b>Other Eligibles</b>	458	1.4	4,523	0.7	31	1,094	3.5	10,902	0.5	31	119	0.4	1,199	0.6	38
5 and younger	40	0.3	406	0.4	16	177	1.5	1,525	0.2	8	1	0.0	12	0.3	1
6-14	109	0.9	1,113	0.6	40	125	1.0	1,360	0.2	8	0	0.0	0	0.0	0
15-20	45	1.1	429	0.6	34	52	1.3	505	0.2	14	0	0.0	0	0.0	0
21-44	34	2.1	246	0.7	41	49	3.0	431	0.2	24	1	0.1	2	0.5	30
45-64	6	2.5	52	0.6	15	13	5.5	147	0.5	49	1	0.4	8	0.3	21
65-74	73	13.2	725	0.8	27	160	29.0	1,617	0.6	39	29	5.3	284	0.4	28
75-84	94	12.2	1,016	0.8	29	250	32.5	2,587	0.6	43	53	6.9	520	0.7	38
85 and older	57	7.3	536	0.9	27	268	34.3	2,730	0.6	43	34	4.3	373	0.8	48
<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 South Dakota, released by CMS in 1/2004. 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>  
 SOUTH DAKOTA, 1999

Beneficiary Characteristics	ANTI-ASTHMATIC				ANALGESICS - Narcotic				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>12,841</b>	<b>14.0 %</b>	<b>133,187</b>	<b>0.3</b>	<b>\$12</b>	<b>12,225</b>	<b>13.3 %</b>	<b>125,011</b>	<b>0.3</b>	<b>\$10</b>	<b>7,783</b>	<b>8.5 %</b>	<b>82,905</b>	<b>0.3</b>	<b>\$15</b>
<b>Female</b>	7,299	13.7	75,738	0.4	13	9,403	17.7	95,938	0.3	10	5,910	11.1	62,753	0.3	15
<b>Disabled</b>	2,096	27.3	23,559	0.5	17	2,826	36.8	31,836	0.4	10	2,063	26.9	23,701	0.3	21
5 and younger	155	53.4	1,693	0.3	11	5	1.7	60	0.1	1	4	1.4	46	0.1	1
6-14	118	21.5	1,299	0.3	14	23	4.2	257	0.1	1	17	3.1	182	0.2	3
15-20	51	11.1	537	0.2	8	57	12.4	631	0.2	3	52	11.3	576	0.2	21
21-44	545	21.3	6,121	0.4	14	1,079	42.2	12,195	0.3	10	708	27.7	8,188	0.3	20
45-64	928	33.6	10,499	0.5	19	1,303	47.1	14,572	0.4	12	975	35.2	11,127	0.4	22
65-74	248	31.6	2,805	0.6	27	263	33.5	3,005	0.4	12	226	28.8	2,621	0.4	26
75-84	41	18.0	486	0.5	13	81	35.5	954	0.4	9	69	30.3	821	0.4	23
85 and older	10	22.7	119	0.3	13	15	34.1	162	0.3	9	12	27.3	140	0.4	22
<b>Other Eligibles</b>	5,203	11.4	52,179	0.3	10	6,577	14.4	64,102	0.3	10	3,847	8.5	39,052	0.3	12
5 and younger	1,544	14.2	15,641	0.2	4	133	1.2	1,416	0.1	1	54	0.5	580	0.1	2
6-14	708	6.0	7,615	0.2	7	290	2.4	3,130	0.1	1	192	1.6	2,080	0.1	2
15-20	488	8.0	4,518	0.2	7	792	13.0	7,387	0.1	1	515	8.4	4,964	0.1	2
21-44	848	8.3	7,719	0.2	6	2,571	25.2	23,077	0.2	3	1,293	12.7	12,021	0.2	5
45-64	74	13.0	713	0.4	12	137	24.1	1,365	0.3	5	111	19.5	1,078	0.2	8
65-74	250	29.5	2,619	0.7	25	346	40.9	3,751	0.4	15	253	29.9	2,841	0.4	17
75-84	576	29.4	5,939	0.6	23	885	45.2	9,368	0.5	21	593	30.3	6,499	0.5	21
85 and older	715	23.3	7,415	0.5	18	1,423	46.4	14,608	0.5	20	836	27.3	8,989	0.5	21
<b>Male</b>	5,537	14.3	57,398	0.3	11	2,821	7.3	29,064	0.3	9	1,873	4.8	20,152	0.3	13
<b>Disabled</b>	1,203	17.1	13,255	0.5	18	1,136	16.2	12,462	0.3	10	812	11.6	9,281	0.3	15
5 and younger	183	49.5	2,022	0.3	12	15	4.1	178	0.1	1	4	1.1	48	0.1	5
6-14	139	15.4	1,586	0.3	15	43	4.8	497	0.1	1	21	2.3	237	0.2	2
15-20	85	13.0	957	0.4	14	55	8.4	593	0.2	4	48	7.3	547	0.2	3
21-44	268	10.6	2,992	0.5	18	441	17.4	4,863	0.3	10	264	10.4	2,981	0.2	14
45-64	406	20.2	4,294	0.6	21	459	22.8	4,932	0.4	12	350	17.4	4,007	0.4	19
65-74	106	23.3	1,222	0.6	22	92	20.2	1,051	0.3	5	98	21.5	1,140	0.4	14
75-84	14	16.3	158	0.6	22	25	29.1	282	0.6	20	22	25.6	261	0.4	19
85 and older	2	11.8	24	0.9	24	6	35.3	66	0.4	14	5	29.4	60	0.4	24
<b>Other Eligibles</b>	4,334	13.7	44,143	0.3	10	1,685	5.3	16,602	0.3	8	1,061	3.3	10,871	0.3	11
5 and younger	2,091	18.2	20,933	0.2	4	200	1.7	2,136	0.1	1	66	0.6	697	0.1	1
6-14	1,126	9.3	12,041	0.2	9	278	2.3	3,090	0.1	1	157	1.3	1,735	0.1	1
15-20	244	5.9	2,427	0.3	8	213	5.2	2,156	0.1	1	195	4.8	1,960	0.1	2
21-44	56	3.4	507	0.3	9	229	13.9	1,867	0.3	5	122	7.4	1,000	0.2	5
45-64	19	8.0	183	0.5	27	62	26.1	563	0.2	5	45	18.9	432	0.2	10
65-74	186	33.7	1,717	0.6	23	164	29.7	1,524	0.4	17	109	19.7	1,148	0.4	17
75-84	316	41.1	3,249	0.7	26	251	32.6	2,557	0.5	17	177	23.0	1,917	0.4	17
85 and older	296	37.9	3,086	0.6	23	288	36.8	2,709	0.4	15	190	24.3	1,982	0.5	23
<b>Unknown</b>	5	21.7	51	0.4	11	1	4.3	9	0.1	1	0	0.0	0	0.0	0

All Medicaid Beneficiaries

Table 7C

Source: Data for this table are from the MAX 1999 file for South Dakota, released by CMS in 1/2004. 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>  
 SOUTH DAKOTA, 1999

Beneficiary Characteristics	ANTIHYPERTENSIVE				ANTIDIABETIC				Mean Rx \$	Mean No. of Rx	Users as % of All Benes	No. of Users	No. of Bene Mos among Users	Mean Rx \$	Mean No. of Rx	Users as % of All Benes	No. of Users	No. of Bene Mos among Users	Mean Rx \$	Mean No. of Rx	No. of Benes	No. of Bene Mos
	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean Rx \$	Mean No. of Rx	Users as % of All Benes	No. of Users	No. of Bene Mos among Users														
<b>All</b>	<b>4,856</b>	<b>5.3 %</b>	<b>52,091</b>	<b>0.7</b>	<b>\$22</b>	<b>3,578</b>	<b>3.9 %</b>	<b>38,240</b>	<b>0.8</b>	<b>\$28</b>	<b>91,943</b>	<b>820,630</b>										
<b>Female</b>																						
<b>Disabled</b>																						
5 and younger	3,162	5.9	34,132	0.7	23	2,569	4.8	27,713	0.8	28	53,198	470,256										
6-14	1,032	13.4	11,680	0.6	21	1,029	13.4	11,442	0.8	33	7,679	82,729										
15-20	6	2.1	69	0.2	5	0	0.0	0	0.0	0	290	2,728										
21-44	30	5.5	342	0.6	9	2	0.4	24	0.8	79	550	5,936										
45-64	13	2.8	156	0.4	12	10	2.2	114	0.9	33	459	4,901										
65-74	151	5.9	1,720	0.5	16	193	7.6	2,183	0.7	29	2,556	27,654										
75-84	548	19.8	6,156	0.6	21	590	21.3	6,467	0.8	35	2,766	29,708										
85 and older	199	25.3	2,283	0.7	25	179	22.8	2,027	0.8	32	786	8,763										
<b>Other Eligibles</b>																						
5 and younger	70	30.7	791	0.7	26	48	21.1	551	0.7	24	228	2,579										
6-14	15	34.1	163	0.5	16	7	15.9	76	0.7	19	44	460										
15-20	2,130	4.7	22,452	0.7	23	1,540	3.4	16,271	0.8	25	45,519	387,527										
21-44	12	0.1	129	0.3	4	5	0.0	56	0.4	8	10,887	92,116										
45-64	59	0.5	641	0.5	5	30	0.3	314	0.8	25	11,870	109,960										
65-74	10	0.2	87	0.4	7	22	0.4	193	0.9	31	6,105	47,660										
75-84	70	0.7	613	0.4	10	128	1.3	1,111	0.5	16	10,217	73,472										
85 and older	35	6.2	309	0.5	17	59	10.4	645	0.4	21	569	4,657										
<b>Male</b>																						
<b>Disabled</b>																						
5 and younger	253	29.9	2,695	0.7	23	252	29.8	2,742	0.7	27	847	8,701										
6-14	724	37.0	7,916	0.7	24	526	26.9	5,716	0.8	29	1,957	20,428										
15-20	967	31.5	10,062	0.8	25	518	16.9	5,494	0.8	22	3,067	30,533										
21-44	1,694	4.4	17,959	0.7	21	1,009	2.6	10,527	0.8	28	38,722	350,291										
45-64	723	10.3	8,038	0.7	21	450	6.4	4,975	0.7	29	7,029	74,543										
65-74	9	2.4	88	0.6	7	0	0.0	0	0.0	0	370	3,679										
75-84	77	8.6	847	0.7	12	8	0.9	90	0.5	16	900	9,718										
85 and older	39	6.0	442	0.7	12	6	0.9	62	0.1	5	654	6,655										
<b>Other Eligibles</b>																						
5 and younger	147	5.8	1,636	0.6	19	94	3.7	1,033	0.7	24	2,533	27,214										
6-14	332	16.5	3,641	0.7	25	257	12.8	2,801	0.7	33	2,014	20,975										
15-20	91	20.0	1,078	0.7	25	74	16.3	867	0.7	28	455	5,131										
21-44	23	26.7	246	0.6	21	8	9.3	95	0.7	24	86	978										
45-64	5	29.4	60	0.5	23	3	17.6	27	0.7	11	17	193										
65-74	971	3.1	9,921	0.7	21	559	1.8	5,552	0.8	27	31,693	275,748										
75-84	24	0.2	258	0.6	7	2	0.0	24	0.2	7	11,503	97,692										
85 and older	158	1.3	1,699	0.6	7	24	0.2	196	1.1	35	12,102	112,547										
<b>Unknown</b>																						
5 and younger	28	0.7	289	0.6	8	13	0.3	120	1.1	43	4,104	33,541										
6-14	21	1.3	163	0.5	14	18	1.1	136	0.6	17	1,643	9,985										
15-20	21	8.8	178	0.6	17	18	7.6	148	0.4	21	238	1,790										
21-44	173	31.3	1,777	0.7	24	139	25.2	1,414	0.8	28	552	5,314										
45-64	299	38.9	3,121	0.8	27	195	25.4	2,094	0.8	30	769	7,605										
65-74	247	31.6	2,436	0.8	25	150	19.2	1,420	0.8	21	782	7,274										
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	23	83										
85 and older																						

Source: Data for this table are from the MAX 1999 file for South Dakota, released by CMS in 1/2004. 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>  
 SOUTH DAKOTA, 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>\$201</b>	<b>5.8</b>	<b>4,559</b>	<b>46,179</b>
<b>Age</b>				
0-64	308	6.7	340	3,563
65-74	251	6.4	478	4,913
75-84	218	6.2	1,213	12,438
85 and older	168	5.3	2,528	25,265
Unknown	0	0.0	0	0
<b>Gender</b>				
Female	198	5.8	3,290	33,773
Male	210	5.7	1,269	12,406
Unknown	0	0.0	0	0
<b>Race</b>				
White	202	5.8	4,326	43,783
African American	0	0	0	0
Other/unknown	190	5.1	233	2,396
<b>Basis of Eligibility</b>				
Aged	192	5.7	3,997	40,090
Disabled	259	6.2	562	6,089
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 South Dakota, released by CMS in 1/2004. 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 1,415 beneficiaries who were in nursing facilities for part of their enrollment and their 13,139 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>  
 SOUTH DAKOTA, 1999

Therapeutic Category	No. of Rx per Bene Mo among Users			\$ per Bene Mo among Users			Total # of Rx			Total Rx \$			Users						
	Total	Patented Brand-Name	Off-Patent Brand-Name	Total	Patented Brand-Name	Off-Patent Brand-Name	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	No.	As % of All-Year NF Residents	No. of Bene Mos		
Anti-infective Agents	0.4	0.2	0.0	0.2	\$17	\$14	\$0	\$2	\$44	\$68	\$29	\$14	\$14	\$14	13,449	\$585,439	3,319	72.8 %	35,034
Biologicals	0.1	0.0	0.0	0.1	2	0	0	1	17	13	0	19	19	88	1,468	85	1.9	966	
Antineoplastic Agents	0.7	0.4	0.1	0.3	115	96	9	10	167	259	142	38	38	689	114,819	100	2.2	1,002	
Endocrine/Metabolic Drugs	1.1	0.4	0.4	0.3	27	17	6	4	24	44	14	12	12	21,904	520,681	1,891	41.5	19,513	
Cardiovascular Agents	2.0	0.4	0.5	1.0	42	15	13	13	21	38	25	13	13	65,618	1,390,528	3,268	71.7	33,250	
Respiratory Agents	0.9	0.3	0.0	0.5	31	14	1	16	35	47	22	29	29	13,446	470,879	1,445	31.7	15,163	
Gastrointestinal Agents	1.0	0.3	0.1	0.5	51	30	9	12	51	91	66	22	22	20,456	1,046,798	1,980	43.4	20,678	
Genitourinary Agents	0.5	0.3	0.0	0.2	22	16	0	6	40	53	43	23	23	5,101	202,312	868	19.0	9,378	
CNS Drugs	1.3	0.6	0.2	0.5	71	48	15	8	52	76	85	15	15	38,873	2,033,560	2,781	61.0	28,812	
Stimulants/Anti-obesity/Anorexia	0.6	0.0	0.1	0.6	12	0	2	10	19	20	39	17	17	258	4,903	38	0.8	397	
Miscellaneous Psychological/Neurological Agents	0.8	0.7	0.0	0.1	82	80	1	2	104	111	100	30	30	1,108	114,743	139	3.0	1,393	
Analgesics and Anesthetics	0.9	0.2	0.1	0.5	35	20	6	9	40	84	56	17	17	20,788	833,343	2,304	50.5	23,662	
Neuromuscular Agents	1.0	0.2	0.3	0.5	39	13	13	13	40	74	47	24	24	14,286	569,489	1,381	30.3	14,690	
Nutritional Products	0.8	0.0	0.3	0.5	18	0	9	9	21	14	29	17	17	14,333	302,326	1,669	36.6	17,085	
Hematological Agents	1.0	0.0	0.6	0.4	27	7	12	8	26	151	21	20	20	11,253	298,070	1,064	23.3	10,931	
Topical Products	0.5	0.2	0.1	0.2	14	8	3	3	29	44	34	14	14	12,741	363,448	2,471	54.2	26,669	
Miscellaneous Products	0.2	0.1	0.0	0.2	12	2	6	4	49	47	173	26	26	477	23,607	179	3.9	1,917	
Unknown Therapeutic Category	0.5	0.0	0.0	0.0	19	0	0	0	36	0	0	0	0	11,633	415,761	2,089	45.8	22,346	
<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.	n.a.	266,501	9,292,174	n.a.	n.a.	n.a.	

Source: Data for this table are from the MAX 1999 file for South Dakota, released by CMS in 1/2004. 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 1,415 beneficiaries who were in nursing facilities for part of their enrollment and their 13,139 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 South Dakota, 4.9 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>  
 SOUTH DAKOTA, 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	\$905,883	2,272	49.8 %	23,720	0.8	\$48	\$38
ULCER DRUGS	852,239	1,737	38.1	18,350	0.7	69	46
ANTIPSYCHOTICS	786,726	1,443	31.7	15,238	0.7	76	52
ANALGESICS - Narcotic	499,373	2,049	44.9	20,968	0.6	41	24
ANTIHYPERTENSIVE	398,245	1,373	30.1	14,142	0.9	33	28
ANTIASTHMATIC	362,841	1,450	31.8	14,767	0.7	36	25
ANTIDIABETIC	316,227	1,056	23.2	11,212	0.9	32	28
ANTIANGIETY AGENTS	313,840	1,189	26.1	12,312	0.7	39	25
ANALGESICS - ANTI-INFLAMMATORY	311,778	1,261	27.7	13,489	0.5	45	23
CALCIUM BLOCKERS	300,762	815	17.9	8,356	0.9	41	36

Source: Data for this table are from the MAX 1999 file for South Dakota, released by CMS in 1/2004. 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 1,415 beneficiaries who were in nursing facilities for part of their enrollment and their 13,139 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>  
 SOUTH DAKOTA, 1999

Beneficiary Characteristics	All Top 10 Drug Groups				ANTIDEPRESSANTS				ULCER DRUGS				
	No. of Rx	Rx \$	No. of Users	Mean No. of Rx	of All-Year NF Residents	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	of All-Year NF Residents	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
<b>All</b>	<b>108,213</b>	<b>\$5,047,914</b>	<b>2,272</b>	<b>0.8</b>	<b>49.8 %</b>	<b>23,720</b>	<b>0.8</b>	<b>\$38</b>	<b>1,737</b>	<b>38.1 %</b>	<b>18,350</b>	<b>0.7</b>	<b>\$46</b>
<b>Female</b>	77,886	3,595,290	1,655	0.8	50.3	17,443	0.8	39	1,245	37.8	13,245	0.7	46
<b>Disabled</b>	7,820	425,528	164	0.9	53.9	1,712	0.9	50	117	38.5	1,252	0.7	51
64 or younger	4,342	257,192	110	0.9	66.3	1,120	0.9	53	64	38.6	677	0.7	54
65-74	2,236	117,082	36	0.9	40.4	381	0.9	49	35	39.3	359	0.7	57
75-84	1,055	42,152	16	0.9	41.0	187	0.9	39	14	35.9	168	0.6	33
85 and older	187	9,102	2	0.5	20.0	24	0.5	52	4	40.0	48	0.5	25
<b>Other Eligibles</b>	70,066	3,169,762	1,491	0.8	49.9	15,731	0.8	37	1,128	37.8	11,993	0.7	46
64 or younger	5	39	0	0.0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	5,993	305,373	130	0.8	76.0	1,371	0.8	41	83	48.5	890	0.7	53
75-84	22,179	1,037,831	462	0.8	57.5	4,892	0.8	40	332	41.3	3,497	0.7	47
85 and older	41,889	1,826,519	899	0.8	44.7	9,468	0.8	35	713	35.5	7,606	0.7	45
<b>Male</b>	30,327	1,452,624	617	0.8	48.6	6,277	0.8	37	492	38.8	5,105	0.7	47
<b>Disabled</b>	7,577	428,513	132	0.8	51.2	1,453	0.8	43	101	39.1	1,127	0.7	53
64 or younger	5,104	307,120	95	0.8	55.9	1,031	0.8	43	79	46.5	871	0.7	58
65-74	1,856	88,272	30	0.8	46.2	338	0.8	45	15	23.1	172	0.7	43
75-84	410	21,155	6	0.9	42.9	72	0.9	30	3	21.4	36	0.6	25
85 and older	207	11,966	1	0.8	11.1	12	0.8	9	4	44.4	48	0.4	36
<b>Other Eligibles</b>	22,750	1,024,111	485	0.8	48.0	4,824	0.8	36	391	38.7	3,978	0.7	45
64 or younger	132	6,264	2	0.3	66.7	13	0.3	9	2	66.7	24	1.0	54
65-74	4,025	196,939	89	0.8	58.2	843	0.8	42	70	45.8	683	0.7	45
75-84	9,382	423,184	185	0.7	52.0	1,912	0.7	34	136	38.2	1,424	0.7	46
85 and older	9,211	397,724	209	0.8	41.9	2,056	0.8	35	183	36.7	1,847	0.7	44
<b>Unknown</b>	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 South Dakota, released by CMS in 1/2004. 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 1,415 beneficiaries who were in nursing facilities for part of their enrollment and their 13,139 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>  
 SOUTH DAKOTA, 1999

Beneficiary Characteristics	ANTIPSYCHOTICS										ANALGESICS - Narcotic										ANTIHYPERTENSIVE											
	Users as %					Users as %					Users as %					Users as %					Users as %					Users as %						
	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	Mean No. of Rx	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	Mean No. of Rx	Residents	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	Mean No. of Rx	Residents	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	Mean No. of Rx	Residents	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	Mean No. of Rx	Residents	No. of Users	No. of Bene Mos among Users	Mean No. of Rx
<b>All</b>	1,443	31.7 %	15,238	0.7	\$52	2,049	44.9 %	20,968	0.6	\$24	1,373	30.1 %	14,142	0.9	\$28																	
<b>Female</b>	1,002	30.5	10,669	0.7	49	1,556	47.3	16,176	0.6	25	955	29.0	9,923	0.9	28																	
<b>Disabled</b>	142	46.7	1,560	0.8	78	110	36.2	1,174	0.6	19	68	22.4	710	0.8	27																	
64 or younger	70	42.2	743	0.8	103	72	43.4	736	0.6	23	26	15.7	253	0.8	25																	
65-74	39	43.8	427	0.9	76	22	24.7	246	0.6	14	25	28.1	270	0.8	26																	
75-84	23	59.0	270	0.9	34	13	33.3	156	0.4	9	15	38.5	163	0.8	32																	
85 and older	10	100.0	120	0.7	31	3	30.0	36	0.2	2	2	20.0	24	0.3	9																	
<b>Other Eligibles</b>	860	28.8	9,109	0.6	44	1,446	48.4	15,002	0.6	25	887	29.7	9,213	0.9	28																	
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0																	
65-74	72	42.1	801	0.7	74	108	63.2	1,152	0.7	32	53	31.0	563	0.8	30																	
75-84	290	36.1	3,025	0.7	48	386	48.0	3,987	0.7	31	258	32.1	2,717	0.8	29																	
85 and older	498	24.8	5,283	0.6	37	952	47.4	9,863	0.6	22	576	28.7	5,933	0.9	28																	
<b>Male</b>	441	34.8	4,569	0.7	59	493	38.8	4,792	0.5	20	418	32.9	4,219	0.9	29																	
<b>Disabled</b>	127	49.2	1,436	0.8	86	122	47.3	1,293	0.6	24	63	24.4	716	0.8	30																	
64 or younger	76	44.7	840	0.8	98	84	49.4	865	0.6	28	38	22.4	420	0.9	32																	
65-74	38	58.5	448	0.8	59	26	40.0	288	0.4	10	18	27.7	212	0.9	31																	
75-84	4	28.6	48	1.1	148	8	57.1	96	0.9	35	5	35.7	60	0.6	22																	
85 and older	9	100.0	100	1.0	78	4	44.4	44	0.4	13	2	22.2	24	0.6	17																	
<b>Other Eligibles</b>	314	31.1	3,133	0.7	46	371	36.7	3,499	0.5	19	355	35.1	3,503	0.9	28																	
64 or younger	4	133.3	48	0.9	23	2	66.7	13	0.2	14	0	0.0	0	0.0	0																	
65-74	55	35.9	517	0.8	82	70	45.8	620	0.6	25	52	34.0	520	0.9	30																	
75-84	145	40.7	1,525	0.7	43	115	32.3	1,151	0.6	24	152	42.7	1,544	0.9	29																	
85 and older	110	22.0	1,043	0.6	33	184	36.9	1,715	0.4	13	151	30.3	1,439	0.8	28																	
<b>Unknown</b>	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 South Dakota, released by CMS in 1/2004. 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 1,415 beneficiaries who were in nursing facilities for part of their enrollment and their 13,139 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>  
 SOUTH DAKOTA, 1999

Beneficiary Characteristics	ANTI-ASTHMATIC						ANTI-DIABETIC						ANTI-ANXIETY AGENTS					
	Users as %			Users as %			Users as %			Users as %			Users as %			Users as %		
	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	Mean No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	Mean No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	Mean No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
<b>All</b>	<b>1,450</b>	<b>31.8 %</b>	<b>0.7</b>	<b>14,767</b>	<b>0.7</b>	<b>\$25</b>	<b>1,056</b>	<b>23.2 %</b>	<b>0.9</b>	<b>\$28</b>	<b>1,189</b>	<b>26.1 %</b>	<b>0.7</b>	<b>12,312</b>	<b>0.7</b>	<b>\$26</b>		
<b>Female</b>	889	27.0	0.6	9,051	0.6	23	740	22.5	0.9	27	874	26.6	0.7	9,142	0.7	26		
<b>Disabled</b>	75	24.7	0.5	793	0.5	21	93	30.6	0.9	31	84	27.6	0.7	957	0.7	33		
64 or younger	42	25.3	0.5	444	0.5	18	41	24.7	1.1	34	52	31.3	0.7	599	0.7	35		
65-74	23	25.8	0.7	229	0.7	27	30	33.7	1.0	35	24	27.0	0.7	267	0.7	30		
75-84	4	10.3	0.4	48	0.4	11	21	53.8	0.6	22	7	17.9	0.8	79	0.8	36		
85 and older	6	60.0	0.7	72	0.4	21	1	10.0	0.8	21	1	10.0	0.7	12	0.2	7		
<b>Other Eligibles</b>	814	27.3	0.7	8,258	0.7	23	647	21.7	0.9	26	790	26.5	0.7	8,185	0.7	25		
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	63	36.8	1.0	635	1.0	32	71	41.5	0.9	29	63	36.8	0.6	652	0.6	26		
75-84	266	33.1	0.7	2,646	0.7	27	226	28.1	0.9	30	219	27.2	0.7	2,328	0.7	28		
85 and older	485	24.1	0.6	4,977	0.6	19	350	17.4	0.8	23	508	25.3	0.6	5,205	0.6	24		
<b>Male</b>	561	44.2	0.8	5,716	0.8	28	316	24.9	0.9	32	315	24.8	0.6	3,170	0.6	23		
<b>Disabled</b>	93	36.0	0.8	1,020	0.8	34	75	29.1	0.9	33	74	28.7	0.7	802	0.7	25		
64 or younger	59	34.7	0.8	638	0.8	38	52	30.6	1.0	38	49	28.8	0.8	517	0.8	25		
65-74	29	44.6	1.0	322	1.0	29	20	30.8	0.7	22	20	30.8	0.5	229	0.5	24		
75-84	4	28.6	0.5	48	0.5	22	1	7.1	1.8	52	3	21.4	0.7	36	0.7	34		
85 and older	1	11.1	1.0	12	1.0	6	2	22.2	0.9	13	2	22.2	0.1	20	0.1	1		
<b>Other Eligibles</b>	468	46.3	0.7	4,696	0.7	26	241	23.8	0.9	31	241	23.8	0.6	2,368	0.6	23		
64 or younger	4	133.3	1.2	48	1.2	72	0	0.0	0.0	0	1	33.3	0.2	12	0.2	4		
65-74	85	55.6	0.8	738	0.8	29	41	26.8	0.9	31	43	28.1	0.7	396	0.7	23		
75-84	180	50.6	0.8	1,807	0.8	28	102	28.7	1.0	38	99	27.8	0.5	1,012	0.5	20		
85 and older	199	39.9	0.6	2,103	0.6	24	98	19.6	0.9	23	98	19.6	0.6	948	0.6	27		
<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 South Dakota, released by CMS in 1/2004. 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 1,415 beneficiaries who were in nursing facilities for part of their enrollment and their 13,139 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 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>  
SOUTH DAKOTA, 1999

Beneficiary Characteristics	ANALGESICS - ANTI-INFLAMMATORY					CALCIUM BLOCKERS					Bene Mos among All-Year NF Residents	
	Users as %		No. of Bene		Mean Rx\$	Users as %		No. of Bene		Mean Rx\$		
	No. of Users	Residents	NF Residents	Users		Mos among Users	Users	Mos among Users				
<b>All</b>	<b>1,261</b>	<b>27.7 %</b>	<b>13,489</b>	<b>0.5</b>	<b>223</b>	<b>815</b>	<b>17.9 %</b>	<b>8,356</b>	<b>0.9</b>	<b>336</b>	<b>4,559</b>	<b>46,179</b>
<b>Female</b>	935	28.4	10,086	0.5	22	628	19.1	6,429	0.9	35	3,290	33,773
<b>Disabled</b>	85	28.0	929	0.5	22	31	10.2	334	0.9	40	304	3,296
64 or younger	50	30.1	548	0.5	23	14	8.4	145	1.0	44	166	1,741
65-74	24	27.0	249	0.6	18	12	13.5	129	0.8	38	89	984
75-84	9	23.1	108	0.6	27	5	12.8	60	0.9	35	39	451
85 and older	2	20.0	24	0.5	34	0	0.0	0	0.0	0	10	120
<b>Other Eligibles</b>	850	28.5	9,157	0.5	22	597	20.0	6,095	0.9	35	2,986	30,477
64 or younger	1	100.0	12	0.4	3	0	0.0	0	0.0	0	1	12
65-74	60	35.1	662	0.5	17	44	25.7	462	0.9	38	171	1,761
75-84	234	29.1	2,481	0.5	24	178	22.1	1,765	0.9	36	804	8,325
85 and older	555	27.6	6,002	0.5	22	375	18.7	3,868	0.9	34	2,010	20,379
<b>Male</b>	326	25.7	3,403	0.5	26	187	14.7	1,927	0.9	38	1,269	12,406
<b>Disabled</b>	93	36.0	1,054	0.5	29	35	13.6	385	0.9	46	258	2,793
64 or younger	58	34.1	649	0.5	34	22	12.9	233	1.0	48	170	1,785
65-74	21	32.3	237	0.4	18	12	18.5	140	0.8	42	65	736
75-84	11	78.6	132	0.5	22	1	7.1	12	1.0	40	14	168
85 and older	3	33.3	36	0.5	27	0	0.0	0	0.0	0	9	104
<b>Other Eligibles</b>	233	23.0	2,349	0.5	24	152	15.0	1,542	0.8	36	1,011	9,613
64 or younger	1	33.3	12	0.1	1	0	0.0	0	0.0	0	3	25
65-74	38	24.8	372	0.5	21	26	17.0	236	0.8	34	153	1,432
75-84	76	21.3	780	0.5	23	61	17.1	647	0.8	38	356	3,494
85 and older	118	23.6	1,185	0.5	26	65	13.0	659	0.9	36	499	4,662
<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 South Dakota, released by CMS in 1/2004. 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 1,415 beneficiaries who were in nursing facilities for part of their enrollment and their 13,139 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 10D

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>  
SOUTH DAKOTA, 1999

Beneficiary Characteristics	No. of Beneficiaries					No. of Beneficiaries by Age					
	All	Aged	Disabled	Adults	Children	All	Aged	Disabled	Adults	Children	
<b>All</b>	<b>91,943</b>	<b>7,973</b>	<b>14,708</b>	<b>14,741</b>	<b>54,521</b>	<b>820,630</b>	<b>79,853</b>	<b>157,272</b>	<b>103,607</b>	<b>479,898</b>	<b>0</b>
<b>Age</b>											
5 and younger	23,068	0	660	19	22,389	196,271	0	6,407	145	189,719	0
6-14	25,422	0	1,450	18	23,954	238,161	0	15,654	194	222,313	0
15-20	11,323	0	1,113	2,077	8,133	92,768	0	11,556	13,639	67,573	0
21-44	16,950	0	5,089	11,819	42	138,337	0	54,868	83,190	279	0
45-64	5,587	9	4,780	797	1	57,130	74	50,683	6,362	11	0
65-74	2,641	1,390	1,241	10	0	27,910	13,942	13,894	74	0	0
75-84	3,040	2,726	314	0	0	31,590	28,033	3,557	0	0	0
85 and older	3,910	3,848	61	1	0	38,460	37,804	653	3	0	0
Unknown	2	0	0	0	2 3	0	0	0	0	3	0
<b>Gender</b>											
Female	53,199	5,865	7,679	12,793	26,862	470,257	59,626	82,729	91,346	236,556	0
Male	38,723	2,107	7,029	1,947	27,640	350,293	20,226	74,543	12,249	243,275	0
Unknown	21	1	0	1	19	80	1	0	12	67	0
<b>Race</b>											
White	53,868	7,185	9,492	7,758	29,433	478,114	71,707	101,119	51,185	254,103	0
African American	202	4	97	2	99	1,632	33	822	10	767	0
Other/unknown	37,873	784	5,119	6,981	24,989	340,884	8,113	55,331	52,412	225,028	0
<b>Use of Nursing Facilities</b>											
All year	4,559	3,997	562	0	0	46,179	40,090	6,089	0	0	0
Part year	1,415	1,104	306	4	1	13,139	10,089	3,004	34	12	0
None	85,969	2,872	13,840	14,737	54,520	761,312	29,674	148,179	103,573	479,886	0
<b>Maintenance Assistance Status</b>											
Cash	38,533	2,416	12,956	7,912	15,249	364,205	26,355	138,696	58,109	141,045	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0
Poverty related	32,667	50	46	3,978	28,593	277,288	475	461	21,059	255,293	0
Other/unknown	20,743	5,507	1,706	2,851	10,679	179,137	53,023	18,115	24,439	83,560	0
<b>Dual Status<sup>c</sup></b>											
Full dual, all year	13,354	7,485	5,786	82	1	140,426	75,028	64,740	649	9	0
Full dual, part year	339	239	95	5	0	3,588	2,529	1,012	47	0	0
Non-dual, all year	78,250	249	8,827	14,654	54,520	676,616	2,296	91,520	102,911	479,889	0
<b>Managed Care Status</b>											
FFS all year	91,943	7,973	14,708	14,741	54,521	820,630	79,853	157,272	103,607	479,898	0
FFS part year, with Rx claims	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
MC all year, with Rx claims	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

Source: Data for this table are from the MAX 1999 file for South Dakota, released by CMS in 1/2004. 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  
 SOUTH DAKOTA, 1999

	Bene(s) and			Excluded from Cell C of Table 1	
	Bene Mo(s) in Cell B of Table 1 No. of Bene(s)	Bene Mo(s) in Cell C of Table 1 No. of Bene(s)	Bene Mo(s) in Cell D of Table 1 No. of Bene(s)	Bene Mo(s) in Cell E of Table 1 No. of Bene(s)	Bene Mo(s) in Cell F of Table 1 No. of Bene(s)
<b>All</b>	<b>91,943</b>	<b>820,630</b>	<b>91,943</b>	<b>820,630</b>	<b>0</b>
FFS all year	91,943	820,630	91,943	820,630	0
FFS part year, with Rx claims	0	0	0	0	0
FFS part year, with no Rx claims	0	0	0	0	0
MC all year, with Rx claims	0	0	0	0	0
MC all year, with no Rx claims	0	0	0	0	0

Source: Data for this table are from the MAX 1999 file for South Dakota, released by CMS in 1/2004. 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.