

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

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TABLE 11

CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a,b}
 DUAL ELIGIBLE BENEFICIARIES, NORTH DAKOTA, 1999

Beneficiary Characteristics	No. of Benes						No. of Bene Mos					
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown
All	13,427	8,838	4,539	47	3	0	134,771	86,221	48,202	320	28	0
Age												
5 and younger	0	0	0	0	0	0		0	0	0	0	0
6-14	1	0	0	0	1	0	12	0	0	0	12	0
15-20	17	0	16	0	1	0	172	0	160	0	12	0
21-44	2,157	0	2,119	37	1	0	23,042	0	22,785	253	4	0
45-64	2,315	2	2,308	5	0	0	24,294	24	24,231	39	0	0
65-74	2,333	2,236	93	4	0	0	23,348	22,332	990	26	0	0
75-84	3,009	3,005	3	1	0	0	29,622	29,584	36	2	0	0
85 and older	3,595	3,595	0	0	0	0	34,281	34,281	0	0	0	0
Unknown	0	0	0	0	0	0		0	0	0	0	0
Gender												
Female	8,506	6,253	2,220	31	2	0	86,185	62,081	23,873	215	16	0
Male	4,921	2,585	2,319	16	1	0	48,586	24,140	24,329	105	12	0
Unknown	0	0	0	0	0	0		0	0	0	0	0
Race												
White	12,577	8,415	4,126	36	0	0	126,014	81,789	43,968	257	0	0
African American	30	7	23	0	0	0	268	77	191	0	0	0
Other/unknown	820	416	390	11	3	0	8,489	4,355	4,043	63	28	0
Use of Nursing Facilities												
All year	4,032	3,823	209	0	0	0	38,927	36,695	2,232	0	0	0
Part year	993	911	82	0	0	0	9,166	8,327	839	0	0	0
None	8,402	4,104	4,248	47	3	0	86,678	41,199	45,131	320	28	0
Maintenance Assistance Status												
Cash	4,368	2,157	2,197	14	0	0	49,144	24,431	24,633	80	0	0
Medically needy	8,741	6,492	2,228	21	0	0	82,379	59,816	22,430	133	0	0
Poverty-related	303	188	114	1	0	0	3,121	1,970	1,139	12	0	0
Other/unknown	15	1	0	11	3	0	127	4	0	95	28	0
Dual Medicare Status^c												
Full dual, all year	13,086	8,624	4,412	47	3	0	131,201	83,949	46,904	320	28	0
Full dual, part year	341	214	127	0	0	0	3,570	2,272	1,298	0	0	0
Managed Care Status												
FFS all year	13,427	8,838	4,539	47	3	0	134,771	86,221	48,202	320	28	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 North Dakota, released by CMS in 11/2003. This table was produced on 06/25/2004.

a. Table 11 includes the beneficiaries represented by Cells G of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

Table 11

Dual Eligible Beneficiaries

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. 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 12
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BENEFICIARY CHARACTERISTIC^{a,b}
 DUAL ELIGIBLE BENEFICIARIES, NORTH 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 \$ ^c	No. of Benef
All	82.7 %	40.3	\$1,576	\$39	\$15,761	10.0 %	\$25	13,427
Age								
5 and younger	0.0	0.0	0	0	0	0.0	0	0
6-14	100.0	8.0	342	43	5,079	6.7	22	1
15-20	64.7	11.7	213	18	12,124	1.8	3	17
21-44	76.4	27.8	1,676	60	17,329	9.7	16	2,157
45-64	77.2	37.5	1,840	49	17,909	10.3	27	2,315
65-74	74.8	39.1	1,494	38	10,712	14.0	34	2,333
75-84	84.9	44.8	1,547	35	13,424	11.5	29	3,009
85 and older	93.3	46.8	1,431	31	18,688	7.7	20	3,595
Unknown	0.0	0.0	0	0	0	0.0	0	0
Basis of Eligibility								
Aged	85.7	44.0	1,479	34	14,857	10.0	27	8,838
Disabled	77.0	33.4	1,774	53	17,659	10.0	22	4,539
Adults	70.2	16.7	754	45	3,179	23.7	40	47
Children	100.0	8.0	291	36	2,596	11.2	17	3
Unknown	0.0	0.0	0	0	0	0.0	0	0
Gender								
Female	86.2	44.4	1,641	37	15,298	10.7	27	8,506
Male	76.7	33.2	1,464	44	16,560	8.8	21	4,921
Unknown	0.0	0.0	0	0	0	0.0	0	0
Race								
White	83.8	41.2	1,608	39	16,086	10.0	24	12,577
African American	66.7	26.3	1,497	57	7,194	20.8	36	30
Other/unknown	65.6	27.2	1,084	40	11,082	9.8	38	820
Use of Nursing Facilities								
Entire year	96.7	55.3	1,880	34	26,506	7.1	27	4,032
Part year	96.5	49.7	1,689	34	16,735	10.1	27	993
None	74.3	32.0	1,417	44	10,489	13.5	24	8,402
Maintenance Assistance Status								
Cash	87.5	41.0	1,751	43	10,274	17.0	31	4,368
Medically needy	82.6	41.4	1,544	37	19,050	8.1	23	8,741
Poverty related	17.2	1.4	42	30	435	9.7	0	303
Other/unknown	86.7	17.7	456	26	6,691	6.8	35	15

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

Table 12

Dual Eligible Beneficiaries

a. Table 12 includes beneficiaries represented by Cell G of Table 1.

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

c. 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 13
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a,b}
 DUAL ELIGIBLE BENEFICIARIES, NORTH 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	4.0	\$157	10.0 %	17.3 %	15.7 %	10.2 %	27.9 %	23.3 %	5.5 %	\$1,570	13,427	134,771
Age												
5 and younger	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
6-14	0.7	29	6.7	0.0	100.0	0.0	0.0	0.0	0.0	423	1	12
15-20	1.2	21	1.8	35.3	41.2	11.8	11.8	0.0	0.0	1,198	17	172
21-44	2.6	157	9.7	23.6	27.1	13.4	21.9	11.3	2.8	1,622	2,157	23,042
45-64	3.6	175	10.3	22.8	18.2	11.3	24.6	18.4	4.7	1,707	2,315	24,294
65-74	3.9	149	14.0	25.2	14.7	8.9	24.0	21.0	6.4	1,070	2,333	23,348
75-84	4.5	157	11.5	15.1	12.7	8.8	28.3	28.2	6.8	1,364	3,009	29,622
85 and older	4.9	150	7.7	6.7	10.4	9.4	36.0	31.4	6.0	1,960	3,595	34,281
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Basis of Eligibility												
Aged	4.5	152	10.0	14.3	12.3	9.1	30.4	27.5	6.4	1,523	8,838	86,221
Disabled	3.1	167	10.0	23.0	22.3	12.0	23.2	15.5	3.9	1,663	4,539	48,202
Adults	2.5	111	23.7	29.8	21.3	21.3	19.1	6.4	2.1	467	47	320
Children	0.9	31	11.2	0.0	100.0	0.0	0.0	0.0	0.0	278	3	28
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Gender												
Female	4.4	162	10.7	13.8	14.2	9.8	30.0	25.9	6.3	1,510	8,506	86,185
Male	3.4	148	8.8	23.3	18.4	10.8	24.4	18.9	4.1	1,677	4,921	48,586
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	4.1	161	10.0	16.2	15.2	10.3	28.5	24.2	5.6	1,606	12,577	126,014
African American	2.9	168	20.8	33.3	16.7	13.3	20.0	16.7	0.0	805	30	268
Other/unknown	2.6	105	9.8	34.4	23.7	7.4	19.0	10.9	4.6	1,070	820	8,489
Use of Nursing Facilities												
Entire year	5.7	195	7.1	3.3	8.1	8.6	33.4	36.7	9.9	2,746	4,032	38,927
Part year	5.4	183	10.1	3.5	10.7	8.9	34.7	34.5	7.7	1,813	993	9,166
None	3.1	137	13.5	25.7	20.0	11.1	24.5	15.6	3.2	1,017	8,402	86,678
Maintenance Assistance Status												
Cash	3.6	156	17.0	12.5	21.4	12.3	29.4	19.7	4.6	913	4,368	49,144
Medically needy	4.4	164	8.1	17.4	12.9	9.4	28.1	26.0	6.2	2,021	8,741	82,379
Poverty related	0.1	4	9.7	82.8	13.2	2.0	2.0	0.0	0.0	42	303	3,121
Other/unknown	2.1	54	6.8	13.3	46.7	13.3	13.3	13.3	0.0	790	15	127

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

Table 13

Dual Eligible Beneficiaries

- a. Table 13 includes the beneficiaries represented by Cell G of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- b. The Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
- 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 14
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, NORTH DAKOTA, 1999

Beneficiary Characteristics	All Rx			Patented Brand-Name Drugs			Off-Patent Brand-Name Drugs			Generic Drugs		
	No. of Rx	Rx \$	\$ per Rx	No. of Rx	Rx \$	\$ per Rx	No. of Rx	Rx \$	\$ per Rx	No. of Rx	Rx \$	\$ per Rx
All	4.0	\$157	\$39	1.3	\$92	\$68	0.8	\$31	\$42	1.7	\$27	\$16
Age												
5 and younger	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
6-14	0.7	29	43	0.4	23	56	0.0	0	0	0.2	2	13
15-20	1.2	21	18	0.2	11	52	0.0	1	25	0.9	9	10
21-44	2.6	157	60	1.0	99	95	0.5	36	75	1.0	18	19
45-64	3.6	175	49	1.4	109	80	0.6	35	56	1.4	25	18
65-74	3.9	149	38	1.4	89	63	0.7	26	39	1.6	26	16
75-84	4.5	157	35	1.5	89	59	0.9	31	35	1.9	30	15
85 and older	4.9	150	31	1.4	80	58	1.0	30	30	2.3	32	14
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility												
Aged	4.5	152	34	1.4	85	60	0.9	29	34	2.0	29	15
Disabled	3.1	167	53	1.2	104	85	0.6	35	63	1.2	22	18
Adults	2.5	111	45	1.0	68	70	0.3	21	78	1.0	17	17
Children	0.9	31	36	0.6	28	44	0.0	1	13	0.1	1	10
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Gender												
Female	4.4	162	37	1.5	95	65	0.8	31	38	1.9	28	15
Male	3.4	148	44	1.1	86	76	0.6	32	49	1.4	24	17
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Race												
White	4.1	161	39	1.4	94	68	0.8	32	41	1.7	27	16
African American	2.9	168	57	1.2	120	100	0.4	23	55	1.1	16	15
Other/unknown	2.6	105	40	0.9	62	66	0.4	20	46	1.1	19	17
Use of Nursing Facilities												
Entire year	5.7	195	34	1.7	109	62	1.1	36	33	2.6	40	15
Part year	5.4	183	34	1.7	104	60	1.0	35	34	2.3	35	15
None	3.1	137	44	1.1	83	73	0.6	29	50	1.2	20	16
Maintenance Assistance Status												
Cash	3.6	156	43	1.3	92	71	0.7	33	49	1.5	24	16
Medically needy	4.4	164	37	1.4	95	67	0.8	31	38	1.9	29	16
Poverty related	0.1	4	30	0.0	2	52	0.0	1	34	0.1	1	13
Other/unknown	2.1	54	26	1.0	36	36	0.2	9	49	0.9	9	10

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

a. Table 14 includes the beneficiaries represented by Cell G of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

Table 14

Dual Eligible 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 North Dakota, 8.2 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all combined. For information about this classification method, see Wolters Kluwer Health, 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 15

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, NORTH DAKOTA, 1999

Therapeutic Category	No. of Rx per Bene Mo among Users			\$ per Bene Mo among Users			Total No. of Rx			Total Rx \$	No. Dual Benes	As % of Bene Mos					
	Users			Users			Total	Patented Brand-Name	Off-Patent Brand-Name				Generic Brand-Name				
	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name								Off-Patent Brand-Name	Generic		
Anti-infective Agents	0.3	0.2	0.0	0.2	\$14	\$12	\$0	\$2	\$43	\$73	\$50	\$13	24,158	6,936	51.7 %	74,722	
Biologics	0.1	0.1	0.0	0.0	1	1	0	0	12	9	0	28	101	98	0.7	1,148	
Antineoplastic Agents	0.7	0.4	0.1	0.2	83	64	11	8	124	176	96	42	2,064	302	2.2	3,085	
Endocrine/Metabolic Drugs	1.0	0.4	0.3	0.3	24	16	5	3	24	39	16	11	48,953	4,627	34.5	48,930	
Cardiovascular Agents	1.7	0.4	0.4	0.9	42	18	14	10	24	42	30	12	132,911	7,336	54.6	76,128	
Respiratory Agents	0.8	0.4	0.0	0.4	31	20	1	10	38	50	28	25	31,858	3,670	27.3	39,471	
Gastrointestinal Agents	0.8	0.3	0.1	0.3	46	30	8	7	59	94	74	22	32,203	3,937	29.3	41,779	
Genitourinary Agents	0.5	0.3	0.0	0.2	20	16	0	4	38	52	34	18	9,818	1,718	12.8	18,476	
CNS Drugs	1.4	0.6	0.2	0.5	84	56	20	9	62	89	100	16	90,997	6,377	47.5	66,877	
Stimulants/Anti-obesity/Anorexia	0.6	0.1	0.1	0.4	26	6	8	12	40	71	65	27	616	89	0.7	949	
Miscellaneous Psychological/Neurological Agents	0.6	0.5	0.0	0.1	53	50	2	2	92	107	94	21	1,833	305	2.3	3,169	
Analgesics and Anesthetics	0.7	0.2	0.1	0.4	28	17	5	6	40	78	54	15	37,232	5,010	37.3	52,736	
Neuromuscular Agents	1.0	0.4	0.2	0.4	53	35	9	9	51	88	42	21	36,347	3,203	23.9	34,632	
Nutritional Products	0.7	0.0	0.3	0.5	13	0	7	6	18	15	27	13	21,147	2,790	20.8	28,737	
Hematological Agents	0.8	0.1	0.5	0.3	25	10	10	5	32	188	22	18	16,714	2,031	15.1	21,175	
Topical Products	0.5	0.2	0.1	0.2	13	8	3	3	29	44	33	15	24,441	4,952	36.9	54,163	
Miscellaneous Products	0.6	0.2	0.2	0.2	111	63	38	10	179	280	214	46	1,245	193	1.4	2,007	
Unknown Therapeutic Category	0.6	0.0	0.0	0.0	20	0	0	0	35	0	0	0	28,547	4,739	35.3	51,129	
TOTAL NO. OF RX AND RX \$	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	541,185	n.a.	n.a.	n.a.	21,161,850

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

- a. Table 15 includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 1999. A beneficiary who used drugs from two or more categories was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
- c. For information about these therapeutic categories, see Wolters Kluwer Health, http://www.Medi-Span.com/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 North Dakota, 8.2 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, http://www.Medi-Span.com/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 16

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP^{a, b, c}
DUAL ELIGIBLE BENEFICIARIES, NORTH DAKOTA, 1999

Top 10 Drug Groups	Users			Among Users		
	Total Medicaid Rx \$	No.	As % of Dual Benes	No. of Bene Mos	No. of Rx per Bene Mo	Rx \$ per Bene Mo
ANTIPSYCHOTICS	\$2,831,100	3,065	22.8 %	32,776	0.9	\$102
ANTIDEPRESSANTS	2,160,530	5,560	41.4	58,857	0.7	51
ULCER DRUGS	1,572,653	3,641	27.1	39,025	0.6	73
ANTICONVULSANT	1,510,824	2,447	18.2	26,847	1.0	58
ANTIHYPERTENSIVE	1,000,988	3,838	28.6	40,490	0.7	34
ANTIASTHMATIC	851,243	3,417	25.4	36,122	0.6	39
ANTIDIABETIC	777,801	2,743	20.4	29,097	0.8	33
ANALGESICS - Narcotic	736,608	4,507	33.6	47,175	0.4	36
CALCIUM BLOCKERS	654,540	1,965	14.6	20,673	0.8	41
ANALGESICS - ANTI-INFLAMMATORY	652,504	3,057	22.8	33,748	0.4	51

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

a. Table 16 includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 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 (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 16A
 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^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, NORTH DAKOTA, 1999

Beneficiary Characteristics	All Top 10 Drug Groups					ANTIPSYCHOTICS					ANTIDEPRESSANTS					
	No. of Rx	Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx
All	242,251	\$12,748,791	3,065	22.8 %	32,776	0.9	\$86	5,560	41.4 %	58,857	0.7	\$37				
Female																
Disabled	162,842	8,147,441	1,820	21.4	19,698	0.8	76	3,875	45.6	41,281	0.7	37				
5 and younger	43,853	2,811,940	637	28.7	7,348	1.0	112	1,165	52.5	13,117	0.7	42				
6-14	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0				
15-20	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0				
21-44	106	2,137	1	12.5	12	0.3	31	1	12.5	12	0.1	1				
45-64	15,892	1,134,694	276	29.3	3,182	1.0	122	487	51.8	5,473	0.7	43				
65-74	26,045	1,592,997	342	28.2	3,950	1.0	108	649	53.5	7,318	0.7	41				
75-84	1,755	79,950	18	31.6	204	0.6	57	28	49.1	314	0.7	39				
85 and older	55	2,162	0	0.0	0	0.0	0	0	0.0	0	0.0	0				
Other Eligibles	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0				
5 and younger	118,989	5,335,501	1,183	18.8	12,350	0.7	54	2,710	43.1	28,164	0.7	34				
6-14	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0				
15-20	12	462	0	0.0	0	0.0	0	0	0.0	0	0.0	0				
21-44	266	13,896	1	3.7	12	0.9	243	11	40.7	113	0.5	45				
45-64	30	1,552	1	20.0	12	0.1	1	3	60.0	25	0.2	1				
65-74	27,517	1,350,753	237	17.0	2,620	0.8	74	530	37.9	5,886	0.7	35				
75-84	40,572	1,814,559	389	19.2	4,092	0.7	59	874	43.2	9,157	0.7	33				
85 and older	50,592	2,154,279	555	19.6	5,614	0.6	40	1,292	45.6	12,983	0.8	34				
Male																
Disabled	79,409	4,601,350	1,245	25.3	13,078	0.9	103	1,685	34.2	17,576	0.7	37				
5 and younger	35,165	2,575,261	646	27.9	7,251	1.1	143	715	30.8	7,980	0.7	38				
6-14	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0				
15-20	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0				
21-44	1	23	0	0.0	0	0.0	0	0	0.0	0	0.0	0				
45-64	16,227	1,333,227	344	29.2	3,841	1.1	161	376	31.9	4,231	0.7	40				
65-74	18,043	1,200,526	295	26.9	3,335	1.0	125	328	29.9	3,626	0.7	35				
75-84	893	41,478	7	19.4	75	1.0	46	11	30.6	123	0.9	50				
85 and older	1	7	0	0.0	0	0.0	0	0	0.0	0	0.0	0				
Other Eligibles	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0				
5 and younger	44,244	2,026,089	599	23.0	5,827	0.7	52	970	37.3	9,596	0.7	37				
6-14	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0				
15-20	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0				
21-44	51	2,456	2	18.2	13	0.9	90	7	63.6	61	0.3	14				
45-64	20	614	0	0.0	0	0.0	0	3	150.0	36	0.3	9				
65-74	13,186	636,492	157	18.6	1,618	0.8	71	244	28.9	2,579	0.7	39				
75-84	17,825	802,828	240	24.4	2,284	0.7	48	375	38.1	3,495	0.8	36				
85 and older	13,162	583,699	200	26.2	1,912	0.7	42	341	44.8	3,425	0.8	36				
Unknown	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0				

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

a. Table 16A includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 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 (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 16B
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR THIRD TO FIFTH TOP DRUG GROUPS
 SEPARATELY, BY SEX, BOE, AND AGE^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, NORTH DAKOTA, 1999

Beneficiary Characteristics	ULCER DRUGS					ANTICONVULSANT					ANTIHYPERTENSIVE				
	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
All	3,641	27.1 %	39,025	0.6	\$40	2,447	18.2 %	26,847	1.0	\$56	3,838	28.6 %	40,490	0.7	\$25
Female	2,438	28.7	26,198	0.6	41	1,425	16.8	15,668	0.9	51	2,647	31.1	28,151	0.7	24
Disabled	558	25.1	6,403	0.5	37	665	30.0	7,570	1.0	68	371	16.7	4,152	0.7	24
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	2	25.0	14	0.1	12	3	37.5	36	0.8	22	3	37.5	36	0.6	6
21-44	192	20.4	2,193	0.4	34	316	33.6	3,633	1.0	73	85	9.0	969	0.7	22
45-64	329	27.1	3,809	0.5	39	333	27.5	3,745	1.0	64	259	21.4	2,886	0.7	25
65-74	33	57.9	363	0.5	33	12	21.1	144	1.1	49	23	40.4	249	0.7	18
75-84	2	100.0	24	0.4	33	1	50.0	12	0.1	3	1	50.0	12	0.7	5
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	1,880	29.9	19,795	0.6	42	760	12.1	8,098	0.9	35	2,276	36.2	23,999	0.7	25
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	1	100.0	12	0.8	36	0	0.0	0	0.0	0
21-44	3	11.1	28	0.2	15	6	22.2	47	0.4	13	2	7.4	24	0.5	10
45-64	0	0.0	0	0.0	0	1	20.0	3	0.3	78	0	0.0	0	0.0	0
65-74	431	30.9	4,793	0.5	38	224	16.0	2,524	1.0	52	472	33.8	5,198	0.7	23
75-84	593	29.3	6,342	0.6	42	262	13.0	2,775	0.8	28	785	38.8	8,475	0.7	25
85 and older	853	30.1	8,632	0.6	44	266	9.4	2,737	0.8	26	1,017	35.9	10,302	0.8	25
Male	1,203	24.4	12,827	0.5	40	1,022	20.8	11,179	1.0	64	1,191	24.2	12,339	0.8	25
Disabled	427	18.4	4,881	0.5	40	639	27.6	7,260	1.1	79	344	14.8	3,798	0.7	25
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	1	12.5	10	0.1	2	0	0.0	0	0.0	0
21-44	168	14.3	1,959	0.5	36	336	28.5	3,859	1.1	81	113	9.6	1,259	0.7	24
45-64	248	22.6	2,804	0.5	41	295	26.9	3,308	1.1	77	215	19.6	2,362	0.7	25
65-74	11	30.6	118	0.7	68	7	19.4	83	1.3	78	16	44.4	177	0.8	29
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	776	29.8	7,946	0.6	40	383	14.7	3,919	0.9	37	847	32.6	8,541	0.8	26
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	2	18.2	10	0.2	4	2	18.2	6	0.7	7	0	0.0	0	0.0	0
45-64	1	50.0	12	0.3	17	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	215	25.5	2,327	0.5	36	127	15.1	1,359	1.0	50	250	29.7	2,691	0.7	25
75-84	293	29.8	2,975	0.6	46	167	17.0	1,712	0.9	31	344	35.0	3,512	0.8	26
85 and older	265	34.8	2,622	0.6	38	87	11.4	842	0.9	26	253	33.2	2,338	0.8	26
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Table 16B

Dual Eligible Beneficiaries

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

a. Table 16B includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 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 (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 16C
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR SIXTH TO EIGHTH TOP DRUG GROUPS
 SEPARATELY, BY SEX, BOE, AND AGE^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, NORTH DAKOTA, 1999

Beneficiary Characteristics	ANTI-ASTHMATIC				ANTI-DIABETIC				ANALGESICS - Narcotic						
	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
All	3,417	25.4 %	36,122	0.6	\$24	2,743	20.4 %	29,097	0.8	\$27	4,507	33.6 %	47,175	0.4	\$16
Female	2,269	26.7	24,296	0.6	23	1,887	22.2	20,184	0.8	27	3,168	37.2	33,426	0.5	16
Disabled	538	24.2	6,059	0.5	23	358	16.1	3,965	0.8	31	808	36.4	9,110	0.4	16
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	2	25.0	6	0.5	22	0	0.0	0	0.0	0	7	87.5	81	0.5	4
21-44	152	16.2	1,711	0.4	17	86	9.1	987	0.9	39	322	34.2	3,610	0.3	10
45-64	351	29.0	3,985	0.6	23	254	21.0	2,796	0.7	28	444	36.6	5,014	0.4	21
65-74	33	57.9	357	1.0	47	17	29.8	170	0.8	25	34	59.6	393	0.6	13
75-84	0	0.0	0	0.0	0	1	50.0	12	1.0	14	1	50.0	12	0.4	7
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	1,731	27.5	18,237	0.6	23	1,529	24.3	16,219	0.8	26	2,360	37.5	24,316	0.5	16
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	8	29.6	84	0.9	30	2	7.4	17	1.1	26	17	63.0	130	0.3	3
45-64	0	0.0	0	0.0	0	1	20.0	12	1.0	85	1	20.0	12	0.8	11
65-74	516	36.9	5,702	0.6	25	430	30.8	4,685	0.7	27	511	36.6	5,621	0.4	14
75-84	589	29.1	6,168	0.6	25	566	28.0	6,019	0.9	27	695	34.4	7,281	0.4	18
85 and older	618	21.8	6,283	0.6	21	530	18.7	5,486	0.8	23	1,136	40.1	11,272	0.5	17
Male	1,148	23.3	11,826	0.6	24	856	17.4	8,913	0.8	27	1,339	27.2	13,749	0.4	14
Disabled	302	13.0	3,314	0.5	18	270	11.6	2,994	0.9	33	566	24.4	6,137	0.4	14
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	113	9.6	1,274	0.4	11	85	7.2	903	0.9	38	263	22.3	2,920	0.4	14
45-64	179	16.3	1,920	0.5	20	174	15.9	1,975	0.8	31	290	26.5	3,079	0.4	14
65-74	10	27.8	120	1.3	51	11	30.6	116	1.0	22	12	33.3	126	0.2	2
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	100.0	12	0.1	1
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	846	32.5	8,512	0.7	27	586	22.5	5,919	0.8	25	773	29.7	7,612	0.4	14
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	1	9.1	12	0.1	1	0	0.0	0	0.0	0	3	27.3	22	0.3	7
45-64	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	50.0	12	0.2	1
65-74	228	27.0	2,389	0.6	24	206	24.4	2,204	0.8	27	210	24.9	2,161	0.3	10
75-84	349	35.5	3,470	0.7	27	248	25.2	2,553	0.8	23	296	30.1	2,937	0.5	17
85 and older	268	35.2	2,641	0.6	28	132	17.3	1,162	0.8	22	263	34.5	2,480	0.4	15
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Table 16C

Dual Eligible Beneficiaries

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

a. Table 16C includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 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 (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 16D
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR NINTH AND TENTH TOP DRUG GROUPS
 SEPARATELY, BY SEX, BOE, AND AGE^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, NORTH DAKOTA, 1999

Beneficiary Characteristics	CALCIUM BLOCKERS				ANALGESICS - ANTI-INFLAMMATORY				Mean Rx \$	No. of Benes	No. of Benes among Users	Users as % of Dual Benes	No. of Benes among Users	Mean Rx \$	No. of Benes	No. of Benes among Users	Users as % of Dual Benes	No. of Benes among Users	Mean Rx \$	No. of Benes
	No. of Users	Users as % of Dual Benes	No. of Benes among Users	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Benes among Users	Mean Rx \$												
All	1,955	14.6 %	20,673	0.8	\$32	3,057	22.8 %	33,748	0.4	\$19	13,427	134,771								
Female	1,455	17.1	15,430	0.8	31	2,206	25.9	24,412	0.4	20	8,506	86,185								
Disabled	201	9.1	2,202	0.7	30	609	27.4	7,020	0.3	17	2,220	23,873								
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0								
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0								
15-20	1	12.5	11	0.2	6	3	37.5	27	0.1	1	8	86								
21-44	40	4.3	446	0.6	27	257	27.3	2,979	0.3	12	941	10,266								
45-64	144	11.9	1,578	0.7	31	335	27.6	3,860	0.4	21	1,212	12,888								
65-74	14	24.6	143	0.8	28	14	24.6	154	0.4	17	57	609								
75-84	2	100.0	24	0.8	43	0	0.0	0	0.0	0	2	24								
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0								
Other Eligibles	1,254	19.9	13,228	0.8	32	1,597	25.4	17,392	0.4	21	6,286	62,312								
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0								
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0								
15-20	0	0.0	0	0.0	0	1	100.0	12	0.2	2	1	12								
21-44	1	3.7	12	0.8	65	6	22.2	36	0.3	14	27	181								
45-64	1	20.0	3	0.3	4	1	20.0	10	0.2	11	5	49								
65-74	231	16.5	2,490	0.7	29	419	30.0	4,815	0.4	22	1,397	14,207								
75-84	458	22.6	4,946	0.8	33	502	24.8	5,508	0.4	21	2,023	20,435								
85 and older	563	19.9	5,777	0.8	31	668	23.6	7,011	0.4	21	2,833	27,428								
Male	510	10.4	5,243	0.7	33	851	17.3	9,336	0.3	18	4,921	48,586								
Disabled	149	6.4	1,642	0.7	34	374	16.1	4,241	0.3	17	2,319	24,329								
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0								
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0								
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	8	74								
21-44	49	4.2	521	0.7	37	177	15.0	1,982	0.2	11	1,178	12,519								
45-64	97	8.9	1,086	0.7	33	188	17.2	2,156	0.4	23	1,096	11,343								
65-74	3	8.3	35	0.9	35	9	25.0	103	0.4	22	36	381								
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12								
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0								
Other Eligibles	361	13.9	3,601	0.8	32	477	18.3	5,095	0.4	19	2,602	24,257								
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0								
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12								
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0								
21-44	1	9.1	5	0.2	2	3	27.3	20	0.3	8	11	76								
45-64	0	0.0	0	0.0	0	2	100.0	24	0.1	3	2	14								
65-74	105	12.5	1,099	0.8	34	135	16.0	1,485	0.4	18	843	8,151								
75-84	156	15.9	1,585	0.7	31	177	18.0	1,934	0.4	18	983	9,151								
85 and older	99	13.0	912	0.8	31	160	21.0	1,632	0.4	21	762	6,853								
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0								

Table 16D

Dual Eligible Beneficiaries

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

- a. Table 16D includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 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 (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 17
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BENEFICIARY CHARACTERISTIC^{a, b}
 DUAL ELIGIBLE BENEFICIARIES, NORTH 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
All	\$195	5.7	4,032	38,927
Age				
0-64	270	6.2	188	2,006
65-74	270	6.9	418	4,236
75-84	215	6.1	1,103	10,602
85 and older	164	5.3	2,323	22,083
Unknown	0	0.0	0	0
Gender				
Female	186	5.7	2,820	27,592
Male	217	5.8	1,212	11,335
Unknown	0	0.0	0	0
Race				
White	193	5.7	3,947	38,064
African American	37	2.3	1	12
Other/unknown	264	6.1	84	851
Basis of Eligibility				
Aged	190	5.7	3,823	36,695
Disabled	276	6.4	209	2,232
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 North Dakota, released by CMS in 11/2003. This table was produced on 06/25/2004.

a. Table 17 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their 1999 Medicaid enrollment. A total of 993 beneficiaries who were in nursing facilities for part of their enrollment and their 9,166 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 18
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d, e}
 DUAL ELIGIBLE BENEFICIARIES, NORTH 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	Off-Patent	Brand-Name	Total	Patented	Off-Patent	Brand-Name	Total	Patented	Off-Patent	Brand-Name	Total	Patented	Off-Patent	Brand-Name	No.	As % of Dual All-Year NF Residents	No. of Bene Mos
Anti-infective Agents	0.3	0.2	0.0	0.2	\$15	\$13	\$0	\$2	\$42	\$67	\$41	\$12	9,729	\$412,212	2,732	67.8 %	28,128		
Biologicals	0.1	0.0	0.0	0.1	2	0	0	2	22	10	0	29	21	455	19	0.5	217		
Antineoplastic Agents	0.7	0.4	0.1	0.2	84	60	16	8	121	166	117	41	600	72,580	90	2.2	862		
Endocrine/Metabolic Drugs	1.1	0.4	0.3	0.4	22	14	4	4	21	39	14	10	17,207	353,587	1,587	39.4	15,727		
Cardiovascular Agents	1.9	0.4	0.5	1.0	38	13	14	12	20	34	26	11	55,500	1,090,437	2,921	72.4	28,785		
Respiratory Agents	0.9	0.3	0.0	0.5	32	16	0	16	37	47	25	30	10,777	397,680	1,214	30.1	12,291		
Gastrointestinal Agents	1.0	0.4	0.1	0.5	52	32	10	10	54	90	71	21	14,537	778,629	1,498	37.2	15,055		
Genitourinary Agents	0.6	0.3	0.0	0.3	22	17	0	5	36	51	30	19	4,706	171,158	737	18.3	7,628		
CNS Drugs	1.5	0.8	0.1	0.5	76	58	11	7	52	74	73	14	36,817	1,928,522	2,549	63.2	25,359		
Stimulants/Anti-obesity/Anorexia	0.7	0.0	0.1	0.6	17	0	3	14	24	0	40	22	273	6,593	37	0.9	377		
Miscellaneous Psychological/Neurological Agents	0.7	0.7	0.0	0.1	72	70	0	1	98	105	88	23	879	86,123	121	3.0	1,198		
Analgesics and Anesthetics	0.8	0.3	0.1	0.4	30	18	5	7	38	70	52	16	14,368	543,802	1,814	45.0	17,880		
Neuromuscular Agents	1.0	0.3	0.2	0.5	38	18	9	11	39	64	39	23	13,185	511,844	1,286	31.9	13,329		
Nutritional Products	0.9	0.0	0.3	0.5	15	0	7	7	17	12	26	13	11,316	194,756	1,336	33.1	13,256		
Hematological Agents	1.0	0.1	0.6	0.3	31	14	11	6	33	219	20	18	8,618	280,153	898	22.3	8,949		
Topical Products	0.5	0.2	0.1	0.2	14	8	3	4	28	42	34	15	11,399	313,652	2,073	51.4	21,829		
Miscellaneous Products	0.2	0.1	0.0	0.1	16	9	2	5	72	146	136	34	160	11,527	74	1.8	711		
Unknown Therapeutic Category	0.7	0.0	0.0	0.0	22	0	0	0	33	0	0	0	12,929	424,708	1,873	46.5	19,334		
TOTAL NO. OF RX AND RX \$	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	223,021	7,578,418	n.a.	n.a.	n.a.		

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

- a. Table 18 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 1999. A total of 993 beneficiaries who were in nursing facilities for part of their enrollment and their 9,166 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 (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 (May 13 2003). In North Dakota, 8.2 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.

Bene Mo(s) = benefit month(s); CMS = 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.

APPENDIX TABLE A.3

CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY^{a, b}
DUAL ELIGIBLE BENEFICIARIES, NORTH DAKOTA, 1999

Beneficiary Characteristics	No. of Benes					No. of Bene Mos					
	All	Aged	Disabled	Adults	Children	All	Aged	Disabled	Adults	Children	Unknown
All	13,427	8,838	4,539	47	3	134,771	86,221	48,202	320	28	0
Age											
5 and younger	0	0	0	0	0		0	0	0	0	0
6-14	1	0	0	0	1	12	0	0	0	12	0
15-20	17	0	16	0	1	172	0	160	0	12	0
21-44	2,157	0	2,119	37	1	23,042	0	22,785	253	4	0
45-64	2,315	2	2,308	5	0	24,294	24	24,231	39	0	0
65-74	2,333	2,236	93	4	0	23,348	22,332	990	26	0	0
75-84	3,009	3,005	3	1	0	29,622	29,584	36	2	0	0
85 and older	3,595	3,595	0	0	0	34,281	34,281	0	0	0	0
Unknown	0	0	0	0	0		0	0	0	0	0
Gender											
Female	8,506	6,253	2,220	31	2	86,185	62,081	23,873	215	16	0
Male	4,921	2,585	2,319	16	1	48,586	24,140	24,329	105	12	0
Unknown	0	0	0	0	0		0	0	0	0	0
Race											
White	12,577	8,415	4,126	36	0	126,014	81,789	43,968	257	0	0
African American	30	7	23	0	0	268	77	191	0	0	0
Other/unknown	820	416	390	11	3	8,489	4,355	4,043	63	28	0
Use of Nursing Facilities											
All year	4,032	3,823	209	0	0	38,927	36,695	2,232	0	0	0
Part year	993	911	82	0	0	9,166	8,327	839	0	0	0
None	8,402	4,104	4,248	47	3	86,678	41,199	45,131	320	28	0
Maintenance Assistance Status											
Cash	4,368	2,157	2,197	14	0	49,144	24,431	24,633	80	0	0
Medically needy	8,741	6,492	2,228	21	0	82,379	59,816	22,430	133	0	0
Poverty related	303	188	114	1	0	3,121	1,970	1,139	12	0	0
Other/unknown	15	1	0	11	3	127	4	0	95	28	0
Dual Status^c											
Full dual, all year	13,086	8,624	4,412	47	3	131,201	83,949	46,904	320	28	0
Full dual, part year	341	214	127	0	0	3,570	2,272	1,298	0	0	0
Managed Care Status											
FFS all year	13,427	8,838	4,539	47	3	134,771	86,221	48,202	320	28	0
FFS part year, with Rx claims	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
MC all year, with Rx claims	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

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

a. Table A.3 includes the beneficiaries represented by Cell F 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. Refer to footnote g of Table 1 for more information about how we determined dual eligibility status.

Bene Mo(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.4
 MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS
 DUAL ELIGIBLE BENEFICIARIES, NORTH DAKOTA, 1999

Beneficiary Characteristics	Benes and			
	Bene Mos in Cell F of Table 1	Bene Mos in Cell G of Table 1	Included in Cell G of Table 1	Excluded from Cell G of Table 1
	No. of Benes	No. of Bene Mos	No. of Benes	No. of Bene Mos
All	13,427	134,771	13,427	134,771
FFS all year	13,427	134,771	13,427	134,771
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 North Dakota, 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.

SUPPLEMENTAL TABLE 1
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES^{a, b}
 NORTH DAKOTA, 1999

Total Number of Dual Eligible Beneficiaries 13,427
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries \$21,161,850
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary \$1,576

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	2,325	17.3 %	\$0	0.0 %
1-500	3,087	23.0	653,162	3.1
501-1,000	1,719	12.8	1,277,789	6.0
1,001-1,500	1,434	10.7	1,782,539	8.4
1,501-2,000	1,068	8.0	1,859,910	8.8
2,001-2,500	842	6.3	1,884,825	8.9
2,501-3,000	646	4.8	1,770,612	8.4
3,001-3,500	512	3.8	1,659,217	7.8
3,501-4,000	412	3.1	1,538,580	7.3
4,001-4,500	302	2.2	1,280,892	6.1
4,501-5,000	223	1.7	1,060,233	5.0
5,001-5,500	174	1.3	914,060	4.3
5,501-6,000	135	1.0	775,733	3.7
6,001-6,500	96	0.7	597,530	2.8
6,501-7,000	79	0.6	532,868	2.5
7,001-7,500	66	0.5	476,684	2.3
7,501-8,000	61	0.5	471,695	2.2
8,001-8,500	45	0.3	371,869	1.8
8,501-9,000	34	0.3	297,042	1.4
9,001-9,500	32	0.2	296,512	1.4
9,501-10,000	34	0.3	331,647	1.6
10,001+	101	0.8	1,328,451	6.3

Source: Data for this table are from the MAX 1999 file for North Dakota, released by CMS in 11/2003. This table was produced on 10/26/2004.

a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 1999.

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

SUPPLEMENTAL TABLE 1A

MEDICAID PHARMACY REIMBURSEMENT FOR DISABLED DUAL ELIGIBLE BENEFICIARIES UNDER AGE 65^{a, b, c}
 NORTH DAKOTA, 1999

Total Number of Disabled Dual Eligible Beneficiaries, Age < 65 4,443
 Total Pharmacy Reimbursement for Disabled Dual Eligible Beneficiaries, Age < 65 \$7,841,524
 Mean Pharmacy Reimbursement per Disabled Dual Eligible Beneficiary, Age < 65 \$1,765

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age < 65	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	1,031	23.2 %	0	0.0 %
1-500	1,072	24.1	206,865	2.6
501-1,000	428	9.6	313,331	4.0
1,001-1,500	356	8.0	433,950	5.5
1,501-2,000	264	5.9	460,914	5.9
2,001-2,500	210	4.7	468,862	6.0
2,501-3,000	165	3.7	452,299	5.8
3,001-3,500	142	3.2	460,437	5.9
3,501-4,000	127	2.9	474,643	6.1
4,001-4,500	102	2.3	434,993	5.5
4,501-5,000	76	1.7	361,967	4.6
5,001-5,500	79	1.8	416,704	5.3
5,501-6,000	57	1.3	327,455	4.2
6,001-6,500	44	1.0	276,140	3.5
6,501-7,000	43	1.0	290,063	3.7
7,001-7,500	36	0.8	260,022	3.3
7,501-8,000	38	0.9	293,668	3.7
8,001-8,500	28	0.6	231,089	2.9
8,501-9,000	17	0.4	148,178	1.9
9,001-9,500	25	0.6	231,573	3.0
9,501-10,000	26	0.6	253,837	3.2
10,001+	77	1.7	1,044,534	13.3

Source: Data for this table are from the MAX 1999 file for North Dakota, released by CMS in 11/2003. This table was produced on 10/26/2004.

a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 1999.

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

c. This table is limited to dual eligible beneficiaries who were under age 65 and also indicated as disabled in the MAX files. Therefore, dual eligible beneficiaries under age 65 in "adults" or "children" basis-of-eligibility categories in Table 12 are excluded because they were not classified as disabled in the MAX files. Disabled dual eligible beneficiaries age 65 and over are included in Supplemental Tables 1B through 1D, depending on their age.

SUPPLEMENTAL TABLE 1B
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 TO 74^{a, b}
 NORTH DAKOTA, 1999

Total Number of Dual Eligible Beneficiaries, Age 65-74 2,333
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65-74 \$3,486,524
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65-74 \$1,494

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 65-74	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	587	25.2 %	0	0.0
1-500	459	19.7	93,100	2.7
501-1,000	254	10.9	190,550	5.5
1,001-1,500	216	9.3	271,674	7.8
1,501-2,000	180	7.7	314,584	9.0
2,001-2,500	134	5.7	298,678	8.6
2,501-3,000	88	3.8	240,914	6.9
3,001-3,500	90	3.9	291,443	8.4
3,501-4,000	74	3.2	278,016	8.0
4,001-4,500	54	2.3	228,795	6.6
4,501-5,000	40	1.7	190,491	5.5
5,001-5,500	34	1.5	178,192	5.1
5,501-6,000	34	1.5	196,495	5.6
6,001-6,500	14	0.6	86,139	2.5
6,501-7,000	14	0.6	95,027	2.7
7,001-7,500	14	0.6	101,441	2.9
7,501-8,000	14	0.6	108,204	3.1
8,001-8,500	9	0.4	74,889	2.1
8,501-9,000	8	0.3	70,525	2.0
9,001-9,500	3	0.1	27,813	0.8
9,501-10,000	3	0.1	29,178	0.8
10,001+	10	0.4	120,376	3.5

Source: Data for this table are from the MAX 1999 file for North Dakota, released by CMS in 11/2003. This table was produced on 10/26/2004.

a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 1999.

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

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SUPPLEMENTAL TABLE 1C
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 75 TO 84^{a, b}
 NORTH DAKOTA, 1999

Total Number of Dual Eligible Beneficiaries, Age 75-84	3,009
Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 75-84	\$4,653,876
Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 75-84	\$1,547

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 75-84	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	453	15.1 %	0	0.0 %
1-500	632	21.0	134,748	2.9
501-1,000	399	13.3	297,748	6.4
1,001-1,500	351	11.7	439,959	9.5
1,501-2,000	259	8.6	452,881	9.7
2,001-2,500	231	7.7	515,365	11.1
2,501-3,000	184	6.1	506,172	10.9
3,001-3,500	127	4.2	412,838	8.9
3,501-4,000	102	3.4	379,691	8.2
4,001-4,500	81	2.7	342,149	7.4
4,501-5,000	64	2.1	303,809	6.5
5,001-5,500	35	1.2	182,426	3.9
5,501-6,000	23	0.8	131,557	2.8
6,001-6,500	13	0.4	79,921	1.7
6,501-7,000	14	0.5	93,881	2.0
7,001-7,500	9	0.3	64,668	1.4
7,501-8,000	2	0.1	15,841	0.3
8,001-8,500	6	0.2	49,533	1.1
8,501-9,000	6	0.2	52,396	1.1
9,001-9,500	4	0.1	37,126	0.8
9,501-10,000	4	0.1	38,873	0.8
10,001+	10	0.3	122,294	2.6

Source: Data for this table are from the MAX 1999 file for North Dakota, released by CMS in 11/2003. This table was produced on 10/26/2004.

a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 1999.

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

SUPPLEMENTAL TABLE 1D
MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 85 AND OLDER^{a, b}
 NORTH DAKOTA, 1999

Total Number of Dual Eligible Beneficiaries, Age 85+ 3,595
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 85+ \$5,143,088
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 85+ \$1,431

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 85+	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	242	6.7 %	0	0.0 %
1-500	903	25.1	214,692	4.2
501-1,000	634	17.6	473,332	9.2
1,001-1,500	507	14.1	631,827	12.3
1,501-2,000	364	10.1	629,872	12.2
2,001-2,500	266	7.4	599,631	11.7
2,501-3,000	209	5.8	571,227	11.1
3,001-3,500	153	4.3	494,499	9.6
3,501-4,000	108	3.0	402,590	7.8
4,001-4,500	64	1.8	270,721	5.3
4,501-5,000	43	1.2	203,966	4.0
5,001-5,500	25	0.7	131,262	2.6
5,501-6,000	21	0.6	120,226	2.3
6,001-6,500	25	0.7	155,330	3.0
6,501-7,000	8	0.2	53,897	1.0
7,001-7,500	7	0.2	50,553	1.0
7,501-8,000	6	0.2	46,156	0.9
8,001-8,500	2	0.1	16,358	0.3
8,501-9,000	3	0.1	25,943	0.5
9,001-9,500	1	0.0	9,759	0.2
9,501-10,000	4	0.1	41,247	0.8
10,001+				

Source: Data for this table are from the MAX 1999 file for North Dakota, released by CMS in 11/2003. This table was produced on 10/26/2004.

a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 1999.

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