

**STATISTICAL COMPENDIUM:
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2001
IDAHO**

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TABLE D.2
 CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a,b}
 DUAL ELIGIBLE BENEFICIARIES, IDAHO, 2001

Beneficiary Characteristics	No. of Benes						No. of Bene Mos					
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown
All	19,272	10,661	8,519	86	6	0	197,470	104,325	92,444	666	35	0
Age												
5 and younger	2	0	2	0	0	0	24	0	24	0	0	0
6-14	7	0	7	0	0	0	84	0	84	0	0	0
15-20	48	0	45	0	3	0	543	0	512	0	31	0
21-44	4,090	0	4,020	69	1	0	44,455	0	43,909	545	1	0
45-64	4,389	0	4,371	16	2	0	47,394	0	47,282	109	3	0
65-74	3,587	3,525	61	1	0	0	36,923	36,379	532	12	0	0
75-84	3,740	3,731	9	0	0	0	36,269	36,193	76	0	0	0
85 and older	3,409	3,405	4	0	0	0	31,778	31,753	25	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	12,030	7,661	4,311	54	4	0	123,647	76,288	46,917	418	24	0
Male	7,242	3,000	4,208	32	2	0	73,823	28,037	45,527	248	11	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	17,778	9,793	7,900	80	5	0	181,539	95,105	85,809	600	25	0
African American	71	32	39	0	0	0	759	337	422	0	0	0
Other/unknown	1,423	836	580	6	1	0	15,172	8,883	6,213	66	10	0
Use of Nursing Facilities^c												
Entire year	2,873	2,670	203	0	0	0	27,597	25,556	2,041	0	0	0
Part year	1,636	1,445	191	0	0	0	14,504	12,469	2,035	0	0	0
None	14,763	6,546	8,125	86	6	0	155,369	66,300	88,368	666	35	0
Maintenance Assistance Status												
Cash	10,349	2,093	8,214	42	0	0	112,637	23,129	89,138	370	0	0
Medically needy	1	0	0	0	1	2	0	0	0	0	2	0
Poverty-related	293	133	142	13	5	0	2,706	1,139	1,450	84	33	0
Other/unknown	8,629	8,435	163	31	0	0	82,125	80,057	1,856	212	0	0
Dual Medicare Status^d												
Full dual, all year	18,688	10,343	8,254	86	5	0	191,721	101,368	89,664	666	23	0
Full dual, part year	584	318	265	0	1	0	5,749	2,957	2,780	0	12	0
Managed Care Status												
FFS all year	19,272	10,661	8,519	86	6	0	197,470	104,325	92,444	666	35	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 2001 file for Idaho, released by CMS in 07/2005. This table was produced on 09/19/2006.

- a. Table D.2 includes the beneficiaries represented by Cell G of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- b. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services. The total includes some beneficiaries with unknown basis of eligibility and some whose age categories are not consistent with basis of eligibility.
- c. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.
- d. The "Full dual, all year" group contains beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefits during all months of Medicaid enrollment in 2001. 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 D.3
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC^{a,b}
 DUAL ELIGIBLE BENEFICIARIES, IDAHO, 2001

Beneficiary Characteristics	% with at Least One Rx	Mean No. of Rx	Mean Rx \$	\$ per Rx	Mean \$, All Services	Rx \$ as % of All Services	No. of Benes
All	89.3 %	52.5	\$2,709	\$52	\$15,464	17.5 %	19,272
Age							
5 and younger	100.0	44.5	4,638	104	39,261	11.8	2
6-14	85.7	66.9	6,277	94	11,123	56.4	7
15-20	81.3	24.9	1,886	76	14,412	13.1	48
21-44	86.8	40.9	2,960	72	15,056	19.7	4,090
45-64	91.4	63.0	3,620	58	15,451	23.4	4,389
65-74	86.5	53.4	2,482	47	11,173	22.2	3,587
75-84	88.4	53.2	2,257	42	15,615	14.5	3,740
85 and older	93.5	51.8	1,973	38	20,331	9.7	3,409
Unknown	0.0	0.0	0	0	0	0.0	0
Basis of Eligibility^c							
Aged	89.4	52.9	2,246	42	15,677	14.3	10,661
Disabled	89.1	52.3	3,295	63	15,296	21.5	8,519
Adults	82.6	30.6	2,121	69	6,651	31.9	86
Children	50.0	17.3	2,359	136	3,122	75.6	6
Unknown	0.0	0.0	0	0	0	0.0	0
Gender							
Female	92.4	58.7	2,856	49	15,613	18.3	12,030
Male	84.1	42.3	2,465	58	15,217	16.2	7,242
Unknown	0.0	0.0	0	0	0	0.0	0
Race							
White	89.6	53.7	2,768	52	16,041	17.3	17,778
African American	85.9	53.8	2,674	50	13,433	19.9	71
Other/unknown	85.7	38.0	1,982	52	8,365	23.7	1,423
Use of Nursing Facilities^d							
Entire year	95.5	66.5	2,841	43	33,747	8.4	2,873
Part year	93.5	58.0	2,527	44	20,124	12.6	1,636
None	87.6	49.2	2,704	55	11,390	23.7	14,763
Maintenance Assistance Status							
Cash	88.9	51.8	3,087	60	13,805	22.4	10,349
Medically needy	0.0	0.0	0	0	1,024	0.0	1
Poverty related	81.9	24.6	1,304	53	6,756	19.3	293
Other/unknown	89.9	54.4	2,304	42	17,752	13.0	8,629

Source: Data for this table are from the MAX 2001 file for Idaho, released by CMS in 07/2005. This table was produced on 09/19/2006.

- a. Table D.3 includes beneficiaries represented by Cell G of Table 1.
 - b. The Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
 - c. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.
 - d. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.
- 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 D.4
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a,b}
 DUAL ELIGIBLE BENEFICIARIES, IDAHO, 2001

Beneficiary Characteristics	Mean No. of Rx	Mean Rx \$	Rx \$ as % of All Services	No. of Rx, % with:					Mean \$, All Services	Benes	Bene Mos	
				10.7 % None	15.0 % More than 0, but 1 or Less	9.5 % More than 1, but 2 or Less	26.3 % More than 2, but 5 or Less	27.4 % More than 5, but 10 or Less				11.2 % More than 10
All	5.1	\$264	17.5 %	10.7 %	15.0 %	9.5 %	26.3 %	27.4 %	11.2 %	\$1,509	19,272	197,470
Age												
5 and younger	3.7	387	11.8	0.0	0.0	0.0	100.0	0.0	0.0	3,272	2	24
6-14	5.6	523	56.4	14.3	0.0	14.3	28.6	28.6	14.3	927	7	84
15-20	2.2	167	13.1	18.8	27.1	14.6	31.3	8.3	0.0	1,274	48	543
21-44	3.8	272	19.7	13.2	27.0	11.7	24.3	17.1	6.7	1,385	4,090	44,455
45-64	5.8	335	23.4	8.6	13.1	9.3	25.3	28.9	14.7	1,431	4,389	47,394
65-74	5.2	241	22.2	13.5	14.2	8.7	24.9	26.6	12.1	1,085	3,587	36,923
75-84	5.5	233	14.5	11.6	10.8	8.1	25.9	31.7	11.9	1,610	3,740	36,269
85 and older	5.6	212	9.7	6.5	8.2	9.2	31.7	34.2	10.2	2,181	3,409	31,778
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Basis of Eligibility^c												
Aged	5.4	230	14.3	10.6	11.1	8.7	27.4	30.9	11.4	1,602	10,661	104,325
Disabled	4.8	304	21.5	10.9	19.7	10.4	24.9	23.2	10.9	1,410	8,519	92,444
Adults	4.0	274	31.9	17.4	26.7	12.8	19.8	16.3	7.0	859	86	666
Children	3.0	404	75.6	50.0	0.0	0.0	50.0	0.0	0.0	535	6	35
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Gender												
Female	5.7	278	18.3	7.6	12.0	8.9	27.6	30.4	13.4	1,519	12,030	123,647
Male	4.1	242	16.2	15.9	20.0	10.4	24.0	22.4	7.4	1,493	7,242	73,823
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	5.3	271	17.3	10.4	14.2	9.3	26.2	28.2	11.6	1,571	17,778	181,539
African American	5.0	250	19.9	14.1	14.1	1.4	35.2	26.8	8.5	1,257	71	759
Other/unknown	3.6	186	23.7	14.3	24.7	12.1	26.4	17.3	5.3	785	1,423	15,172
use or nursing Facilities^d												
Entire year	6.9	296	8.4	4.5	4.6	6.3	27.5	38.6	18.4	3,513	2,873	27,597
Part year	6.5	285	12.6	6.5	7.0	7.5	26.0	38.4	14.7	2,270	1,636	14,504
None	4.7	257	23.7	12.4	17.9	10.3	26.1	24.0	9.4	1,082	14,763	155,369
Maintenance Assistance Status												
Cash	4.8	284	22.4	11.1	18.9	10.5	25.7	23.6	10.2	1,268	10,349	112,637
Medically needy	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	512	1	2
Poverty related	2.7	141	19.3	18.1	31.4	9.9	19.8	17.1	3.8	732	293	2,706
Other/unknown	5.7	242	13.0	10.1	9.7	8.2	27.2	32.3	12.6	1,865	8,629	82,125

Table D4

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2001 file for Idaho, released by CMS in 07/2005. This table was produced on 09/19/2006.

- a. Table D.4 includes the beneficiaries represented by Cell G of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
 - b. The Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
 - c. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.
 - d. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.
- 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 D.5
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, IDAHO, 2001

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	5.1	\$264	\$52	2.4	\$200	\$84	0.4	\$18	\$47	2.3	\$46	\$20
Age												
5 and younger	3.7	387	104	1.8	337	192	0.5	16	29	1.4	34	24
6-14	5.6	523	94	3.2	454	144	1.0	47	48	1.5	23	16
15-20	2.2	167	76	1.0	124	119	0.1	14	115	1.0	29	28
21-44	3.8	272	72	1.9	213	113	0.3	20	81	1.6	38	24
45-64	5.8	335	58	2.8	258	91	0.4	22	59	2.6	54	21
65-74	5.2	241	47	2.5	182	74	0.3	13	40	2.4	45	19
75-84	5.5	233	42	2.4	170	70	0.5	15	33	2.6	46	18
85 and older	5.6	212	38	2.2	150	67	0.5	15	30	2.8	46	17
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility^d												
Aged	5.4	230	42	2.4	168	71	0.4	14	34	2.6	46	18
Disabled	4.8	304	63	2.4	235	100	0.3	21	67	2.1	46	22
Adults	4.0	274	69	1.9	188	98	0.2	19	94	1.8	67	37
Children	3.0	404	136	1.9	332	176	0.3	56	163	0.7	17	22
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Gender												
Female	5.7	278	49	2.6	210	79	0.4	18	43	2.6	49	19
Male	4.1	242	58	1.9	183	96	0.3	17	57	1.9	41	21
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Race												
White	5.3	271	52	2.4	204	84	0.4	18	47	2.4	47	20
African American	5.0	250	50	2.3	187	83	0.4	15	42	2.4	47	20
Other/unknown	3.6	186	52	1.8	146	82	0.2	10	44	1.5	30	19
Use of Nursing Facilities^e												
Entire year	6.9	296	43	2.9	213	73	0.6	20	36	3.4	60	18
Part year	6.5	285	44	2.7	209	76	0.5	19	36	3.2	56	17
None	4.7	257	55	2.2	197	88	0.3	17	52	2.1	42	20
Maintenance Assistance Status												
Cash	4.8	284	60	2.3	219	95	0.3	19	61	2.1	45	21
Medically needy	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Poverty related	2.7	141	53	1.2	108	89	0.2	9	41	1.2	24	20
Other/unknown	5.7	242	42	2.5	177	71	0.5	15	33	2.7	48	18

Source: Data for this table are from the MAX 2001 file for Idaho, released by CMS in 07/2005. This table was produced on 09/19/2006.

- a. Table D.5 includes the beneficiaries represented by Cell G of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- b. The Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
- c. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In Idaho, 0.8 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).
- d. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.
- e. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.

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

TABLE D.6

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, IDAHO, 2001

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				
	Patented			Patented			Total	Off-Patent	Generic							
	Brand-Name	Off-Patent	Generic	Brand-Name	Off-Patent	Generic										
Anti-infective Agents	0.4	0.2	0.0	\$17	\$15	\$0	\$2	\$49	\$82	\$56	\$14	41,771	\$2,035,253	10,725	55.7 %	116,944
Biologics	0.1	0.1	0.0	6	1	0	5	53	15	0	116	409	21,821	357	1.9	3,876
Antineoplastic Agents	0.7	0.3	0.1	127	101	14	11	194	321	147	46	3,496	677,499	523	2.7	5,349
Endocrine/Metabolic Drugs	1.2	0.7	0.2	42	34	3	4	34	52	17	12	117,937	4,059,811	9,190	47.7	97,772
Cardiovascular Agents	1.8	0.7	0.1	56	36	3	17	31	50	24	17	207,121	6,363,390	10,803	56.1	113,005
Respiratory Agents	0.9	0.5	0.0	42	34	0	8	48	65	32	23	72,946	3,477,078	7,564	39.2	82,473
Gastrointestinal Agents	0.9	0.5	0.0	74	65	3	7	84	120	96	21	72,051	6,075,199	7,682	39.9	81,752
Genitourinary Agents	0.6	0.4	0.0	29	27	0	2	52	63	40	19	18,398	960,074	3,017	15.7	32,643
CNS Drugs	1.6	0.8	0.1	116	89	11	16	74	108	104	26	182,701	13,570,631	11,013	57.1	116,653
Stimulants/Anti-obesity/Anorexia	0.7	0.2	0.0	40	14	4	22	59	83	95	47	1,878	109,983	250	1.3	2,730
Miscellaneous Psychological/Neurological Agents	0.7	0.7	0.0	107	106	0	1	143	152	38	27	4,840	692,658	627	3.3	6,457
Analgesics and Anesthetics	1.0	0.4	0.0	53	38	4	11	52	101	90	19	119,097	6,208,494	10,992	57.0	116,643
Neuromuscular Agents	1.2	0.5	0.1	67	50	3	14	58	100	39	24	78,244	4,545,710	6,215	32.2	67,696
Nutritional Products	0.7	0.0	0.1	13	0	5	8	18	46	33	14	28,476	524,763	3,840	19.9	39,607
Hematological Agents	0.9	0.2	0.3	34	22	6	6	40	138	22	15	26,262	1,053,486	2,980	15.5	30,866
Topical Products	0.4	0.2	0.0	12	8	1	3	34	49	39	17	27,249	918,436	6,818	35.4	75,134
Miscellaneous Products	0.9	0.4	0.2	210	141	37	32	232	384	207	88	2,829	655,033	301	1.6	3,124
Unknown Therapeutic Category	0.4	0.0	0.0	16	0	0	0	38	0	0	0	6,932	261,496	1,537	8.0	16,548
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.	1,012,637	52,210,815	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2001 file for Idaho, released by CMS in 07/2005. This table was produced on 09/19/2006.

- a. Table D.6 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 2001. 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 Idaho, 0.8 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 D.7

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, IDAHO, 2001

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	\$ per Rx	Rx \$ per Bene Mo
ANTIPSYCHOTICS	\$6,780,485	5,265	27.3 %	57,211	0.9	\$133	\$119
ANTIDEPRESSANTS	5,374,893	11,288	58.6	121,377	0.7	61	44
ULCER DRUGS	5,299,403	8,040	41.7	86,420	0.7	94	61
ANTICONVULSANT	3,512,366	5,088	26.4	56,112	0.9	70	63
ANALGESICS - Narcotic	3,280,150	12,966	67.3	138,299	0.5	44	24
ANTIDIABETIC	2,612,757	5,711	29.6	60,951	0.8	55	43
ANALGESICS - ANTI-INFLAMMATORY	2,587,748	7,057	36.6	77,848	0.5	69	33
ANTIASTHMATIC	1,960,989	7,212	37.4	78,228	0.5	47	25
ANTIHYPERTENSIVE	1,885,415	6,691	34.7	70,958	0.7	35	27
ANTIHYPERLIPIDEMIC	1,641,497	2,853	14.8	31,347	0.7	73	52
Total	34,935,703	72,171		778,751	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2001 file for Idaho, released by CMS in 07/2005. This table was produced on 09/19/2006.

a. Table D.7 includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2001. 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 2001. 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; n.a. = not applicable.

TABLE D.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^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, IDAHO, 2001

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 \$
All	523,168	\$34,935,703	5,265	27.3 %	57,211	0.9	\$119	11,288	58.6 %	121,377	0.7	\$44
Female	348,706	22,310,485	3,048	25.3	32,817	0.8	103	7,827	65.1	83,906	0.7	44
Disabled	147,139	10,819,976	1,581	36.7	17,921	0.9	122	3,622	84.0	40,727	0.7	49
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	35	1,497	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	281	21,296	4	23.5	48	0.9	77	10	58.8	120	0.7	59
21-44	50,325	4,077,977	793	44.7	9,012	0.9	129	1,454	81.9	16,438	0.7	48
45-64	95,912	6,687,148	778	31.3	8,809	0.9	114	2,145	86.4	24,059	0.8	49
65-74	402	22,377	4	16.7	36	0.3	20	8	33.3	66	0.7	36
75-84	102	7,571	2	50.0	16	0.3	135	4	100.0	32	0.7	16
85 and older	82	2,110	0	0.0	0	0.0	0	1	33.3	12	0.9	65
Other Eligibles	201,567	11,490,509	1,467	19.0	14,896	0.7	80	4,205	54.5	43,179	0.7	40
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	29	1,525	0	0.0	0	0.0	0	1	50.0	12	0.6	50
21-44	910	70,792	14	27.5	149	0.7	74	44	86.3	391	0.7	53
45-64	115	8,102	0	0.0	0	0.0	0	9	225.0	90	0.7	56
65-74	69,483	4,230,685	381	16.5	4,097	0.8	84	1,281	55.3	13,885	0.7	37
75-84	70,132	3,972,116	549	20.7	5,515	0.7	84	1,418	53.5	14,566	0.7	40
85 and older	60,898	3,207,289	523	19.4	5,135	0.7	72	1,452	53.8	14,235	0.8	42
Male	174,462	12,625,218	2,217	30.6	24,394	1.0	140	3,461	47.8	37,471	0.7	45
Disabled	110,087	9,056,362	1,677	39.9	19,119	1.0	156	2,280	54.2	25,790	0.7	48
5 and younger	4	81	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	95	5,187	0	0.0	0	0.0	0	1	25.0	12	1.0	126
15-20	303	21,043	7	25.0	84	1.0	112	6	21.4	72	0.7	58
21-44	50,035	4,596,172	1,010	45.0	11,548	1.0	158	1,236	55.1	14,092	0.7	48
45-64	58,735	4,384,061	660	35.0	7,487	1.1	154	1,023	54.2	11,480	0.7	48
65-74	858	46,163	0	0.0	0	0.0	0	13	35.1	124	0.5	23
75-84	38	2,547	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	19	1,108	0	0.0	0	0.0	0	1	100.0	10	1.7	107
Other Eligibles	64,375	3,568,856	540	17.8	5,275	0.7	80	1,181	38.9	11,681	0.7	38
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	0.0	0
21-44	376	27,566	2	10.5	24	0.5	113	12	63.2	139	0.5	55
45-64	146	9,028	2	14.3	20	0.8	131	7	50.0	75	0.5	25
65-74	27,920	1,618,734	164	13.6	1,710	0.8	95	427	35.3	4,452	0.7	36
75-84	22,265	1,216,523	217	20.0	2,070	0.7	79	415	38.3	4,068	0.7	37
85 and older	13,668	697,005	155	21.9	1,451	0.7	62	320	45.3	2,947	0.8	43
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 2001 file for Idaho, released by CMS in 07/2005. This table was produced on 09/19/2006.

a. Table D.7A includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2001. 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 2001. 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 D.7B
 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, IDAHO, 2001

Beneficiary Characteristics	ULCER DRUGS					ANTICONSULSANT					ANALGESICS - Narcotic				
	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean Rx	Mean No. of Rx	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean Rx \$	Mean No. of Rx	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean Rx \$	Mean No. of Rx
All	8,040	41.7 %	86,420	0.7	0.9	5,088	26.4 %	56,112	\$61	0.9	12,966	67.3 %	138,299	\$24	0.5
Female	5,464	45.4	58,656	0.7	0.9	3,069	25.5	33,700	62	0.9	9,035	75.1	96,657	59	0.5
Disabled	2,065	47.9	23,339	0.6	0.9	1,821	42.2	20,622	63	0.9	3,641	84.5	40,896	73	0.5
5 and younger	0	0.0	0	0.0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0
6-14	1	33.3	12	0.7	0.6	3	100.0	36	22	0.6	0	0.0	0	29	0.0
15-20	6	35.3	72	0.5	1.2	5	29.4	60	26	1.2	9	52.9	108	126	0.2
21-44	678	38.2	7,708	0.5	0.9	859	48.4	9,778	54	0.9	1,432	80.7	16,287	81	0.4
45-64	1,364	54.9	15,376	0.7	0.9	949	38.2	10,703	68	0.9	2,172	87.4	24,257	65	0.6
65-74	12	50.0	131	0.4	0.4	3	12.5	21	36	0.4	22	91.7	172	40	0.5
75-84	4	100.0	40	0.6	0.7	1	25.0	12	41	0.7	5	125.0	60	54	0.4
85 and older	0	0.0	0	0.0	1.0	1	33.3	12	0	1.0	1	33.3	12	28	3.5
Other Eligibles	3,399	44.0	35,317	0.7	0.8	1,248	16.2	13,078	61	0.8	5,394	69.9	55,761	38	0.6
5 and younger	0	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	0.0
15-20	1	50.0	10	0.3	0.6	1	50.0	12	35	0.6	0	0.0	0	23	0.0
21-44	18	35.3	156	0.3	0.8	20	39.2	196	53	0.8	31	60.8	279	69	0.6
45-64	2	50.0	24	0.8	0.7	1	25.0	3	87	0.7	3	75.0	27	27	1.0
65-74	1,135	49.0	12,388	0.6	0.8	447	19.3	4,951	61	0.8	1,648	71.2	18,176	39	0.5
75-84	1,148	43.4	11,884	0.7	0.8	429	16.2	4,447	60	0.8	1,830	69.1	18,855	42	0.6
85 and older	1,095	40.6	10,855	0.8	0.7	350	13.0	3,469	62	0.7	1,882	69.8	18,424	28	0.6
Male	2,576	35.6	27,764	0.7	0.9	2,019	27.9	22,412	61	0.9	3,931	54.3	41,642	68	0.5
Disabled	1,456	34.6	16,413	0.6	1.0	1,519	36.1	17,320	63	1.0	2,336	55.5	25,845	74	0.5
5 and younger	1	100.0	12	0.3	0.0	0	0.0	0	7	0.0	0	0.0	0	0	0.0
6-14	3	75.0	36	0.7	1.0	1	25.0	12	47	1.0	2	50.0	24	30	0.2
15-20	8	28.6	96	0.3	0.8	7	25.0	83	33	0.8	14	50.0	152	38	0.2
21-44	641	28.6	7,307	0.6	0.9	872	38.8	9,989	60	0.9	1,099	49.0	12,198	76	0.4
45-64	785	41.6	8,760	0.7	0.7	633	33.5	7,184	67	0.7	1,191	63.1	13,169	73	0.5
65-74	15	40.5	168	0.5	0.7	5	13.5	42	60	0.7	27	73.0	266	27	0.8
75-84	3	60.0	34	0.4	0.0	0	0.0	0	47	0.0	3	60.0	36	0	0.4
85 and older	0	0.0	0	0.0	0.1	1	100.0	10	0	0.1	0	0.0	0	3	0.0
Other Eligibles	1,120	36.9	11,351	0.7	0.8	500	16.5	5,092	58	0.8	1,595	52.6	15,797	47	0.5
5 and younger	0	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	0.0
15-20	0	0.0	0	0.0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0
21-44	7	36.8	78	0.4	0.5	8	42.1	95	64	0.5	22	115.8	226	31	0.7
45-64	2	14.3	6	0.5	0.3	1	7.1	12	75	0.3	4	28.6	40	5	1.2
65-74	475	39.3	5,104	0.7	0.8	209	17.3	2,234	56	0.8	581	48.0	6,110	50	0.5
75-84	383	35.4	3,821	0.7	0.8	182	16.8	1,828	59	0.8	554	51.2	5,545	46	0.6
85 and older	253	35.8	2,342	0.7	0.8	100	14.1	923	58	0.8	434	61.4	3,876	40	0.6
Unknown	0	0.0	0	0.0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0

Dual Eligible Beneficiaries

Table D7B

Source: Data for this table are from the MAX 2001 file for Idaho, released by CMS in 07/2005. This table was produced on 09/19/2006.

- a. Table D.7B includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2001. 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 2001. 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 D.7C
 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, IDAHO, 2001

Beneficiary Characteristics	ANTIDIABETIC					ANALGESICS - ANTI-INFLAMMATORY					ANTI-ASTHMATIC				
	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	5,711	29.6 %	60,951	0.8	\$43	7,057	36.6 %	77,848	0.5	\$33	7,212	37.4 %	78,228	0.5	\$25
Female	3,939	32.7	42,077	0.8	42	4,901	40.7	54,083	0.5	36	4,893	40.7	53,513	0.5	25
Disabled	1,302	30.2	14,567	0.8	48	2,176	50.5	24,648	0.4	33	1,983	46.0	22,545	0.5	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	2	11.8	24	0.8	28	5	29.4	60	0.1	4	0	0.0	0	0.0	0
21-44	310	17.5	3,551	0.7	47	803	45.2	9,163	0.3	20	651	36.7	7,440	0.4	22
45-64	980	39.5	10,909	0.8	48	1,352	54.4	15,285	0.5	41	1,319	53.1	15,009	0.5	26
65-74	10	41.7	83	0.9	44	14	58.3	124	0.3	14	7	29.2	54	0.4	11
75-84	0	0.0	0	0.0	0	2	50.0	16	0.7	80	2	50.0	24	0.4	23
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	4	133.3	18	0.2	6
Other Eligibles	2,637	34.2	27,510	0.8	40	2,725	35.3	29,435	0.5	39	2,910	37.7	30,968	0.6	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	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	3	5.9	33	0.3	19	15	29.4	148	0.5	22	17	33.3	167	0.4	27
45-64	0	0.0	0	0.0	0	2	50.0	15	0.5	35	0	0.0	0	0.0	0
65-74	1,062	45.9	11,711	0.8	44	970	41.9	10,956	0.5	41	1,173	50.6	13,023	0.6	28
75-84	958	36.2	9,727	0.8	39	926	35.0	9,981	0.5	38	1,038	39.2	10,900	0.6	25
85 and older	614	22.8	6,039	0.8	32	812	30.1	8,335	0.6	40	682	25.3	6,878	0.5	22
Male	1,772	24.5	18,874	0.8	44	2,156	29.8	23,765	0.4	26	2,319	32.0	24,715	0.6	25
Disabled	799	19.0	8,936	0.8	49	1,374	32.7	15,486	0.4	23	1,135	27.0	12,432	0.5	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	1	25.0	12	0.2	3
15-20	0	0.0	0	0.0	0	6	21.4	72	0.3	4	3	10.7	36	0.1	2
21-44	242	10.8	2,686	0.8	49	674	30.0	7,584	0.3	15	428	19.1	4,824	0.4	17
45-64	545	28.9	6,140	0.8	50	683	36.2	7,707	0.5	30	674	35.7	7,272	0.6	30
65-74	12	32.4	110	0.7	46	10	27.0	111	0.5	29	28	75.7	278	0.6	30
75-84	0	0.0	0	0.0	0	1	20.0	12	0.8	60	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	100.0	10	0.1	1
Other Eligibles	973	32.1	9,938	0.8	39	782	25.8	8,279	0.5	33	1,184	39.0	12,283	0.6	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	1	5.3	7	0.9	23	6	31.6	61	0.3	15	1	5.3	12	0.1	1
45-64	0	0.0	0	0.0	0	4	28.6	40	0.5	59	4	28.6	27	0.4	11
65-74	473	39.1	5,037	0.8	43	335	27.7	3,690	0.5	29	510	42.1	5,527	0.6	30
75-84	329	30.4	3,379	0.8	36	261	24.1	2,746	0.5	34	423	39.1	4,418	0.6	24
85 and older	170	24.0	1,515	0.8	34	176	24.9	1,742	0.6	38	246	34.8	2,299	0.5	19
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2001 file for Idaho, released by CMS in 07/2005. This table was produced on 09/19/2006.

- a. Table D.7C includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2001. 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 2001. 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 D.7D
 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, IDAHO, 2001

Beneficiary Characteristics	ANTHYPERTENSIVE				ANTHYPERLIPIDEMIC				No. of Bene Mos			
	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	6,691	34.7 %	70,958	0.7	\$27	2,853	14.8 %	31,347	0.7	\$52	19,272	197,470
Female	4,522	37.6	47,935	0.8	27	1,930	16.0	21,222	0.7	51	12,030	123,647
Disabled	1,081	25.1	12,010	0.7	25	707	16.4	7,990	0.7	51	4,311	46,917
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12
6-14	0	0.0	0	0.0	0	1	33.3	12	0.4	14	3	36
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	17	204
21-44	206	11.6	2,352	0.6	21	136	7.7	1,569	0.6	42	1,775	19,464
45-64	866	34.9	9,574	0.7	27	565	22.7	6,377	0.7	54	2,484	26,962
65-74	7	29.2	70	0.5	18	5	20.8	32	0.8	78	24	195
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	4	29
85 and older	2	66.7	14	0.9	40	0	0.0	0	0.0	0	3	15
Other Eligibles	3,441	44.6	35,925	0.8	27	1,223	15.8	13,232	0.7	51	7,719	76,730
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	50.0	12	0.5	10	1	50.0	12	0.5	15	2	22
21-44	3	5.9	31	0.1	3	1	2.0	2	0.5	15	51	380
45-64	0	0.0	0	0.0	0	0	0.0	0	0.0	0	4	28
65-74	1,104	47.7	12,066	0.7	27	627	27.1	6,934	0.7	53	2,316	24,234
75-84	1,226	46.3	12,865	0.8	27	449	17.0	4,776	0.7	49	2,648	26,322
85 and older	1,107	41.0	10,951	0.8	28	145	5.4	1,508	0.7	48	2,698	25,744
Male	2,169	30.0	23,023	0.7	26	923	12.7	10,125	0.8	55	7,242	73,823
Disabled	962	22.9	10,714	0.7	26	541	12.9	6,097	0.8	56	4,208	45,527
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12
6-14	3	75.0	36	0.8	35	1	25.0	12	0.8	27	4	48
15-20	2	7.1	24	0.8	19	0	0.0	0	0.0	0	28	308
21-44	287	12.8	3,199	0.7	26	166	7.4	1,883	0.7	50	2,245	24,445
45-64	654	34.7	7,283	0.7	26	369	19.6	4,156	0.8	58	1,887	20,320
65-74	16	43.2	172	0.7	26	5	13.5	46	0.9	76	37	337
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	5	47
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	10
Other Eligibles	1,207	39.8	12,309	0.8	26	382	12.6	4,028	0.7	53	3,034	28,296
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	1	9
21-44	4	21.1	43	0.8	40	0	0.0	0	0.0	0	19	166
45-64	1	7.1	12	0.3	7	1	7.1	12	0.4	49	14	84
65-74	549	45.4	5,937	0.7	26	233	19.3	2,500	0.7	54	1,210	12,157
75-84	409	37.8	4,048	0.8	26	113	10.4	1,137	0.7	54	1,083	9,871
85 and older	244	34.5	2,269	0.8	26	35	5.0	379	0.8	46	707	6,009
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0

Table D7D

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2001 file for Idaho, released by CMS in 07/2005. This table was produced on 09/19/2006.

a. Table D.7D includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2001. 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 2001. 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 D.8
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BENEFICIARY CHARACTERISTIC^{a, b}
 DUAL ELIGIBLE BENEFICIARIES, IDAHO, 2001

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	\$296	6.9	2,873	27,597
Age				
0-64	511	8.6	197	2,004
65-74	380	8.4	361	3,439
75-84	303	7.1	922	8,721
85 and older	238	6.2	1,393	13,433
Unknown	0	0.0	0	0
Gender				
Female	289	6.9	2,049	20,126
Male	315	6.9	824	7,471
Unknown	0	0.0	0	0
Race				
White	296	6.9	2,813	27,040
African American	329	7.9	9	87
Other/unknown	299	6.4	51	470
Basis of Eligibility^c				
Aged	279	6.8	2,670	25,556
Disabled	507	8.6	203	2,041
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 2001 file for Idaho, released by CMS in 07/2005. This table was produced on 09/19/2006.

a. Table D.8 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their 2001 Medicaid enrollment. A total of 1,636 beneficiaries who were in nursing facilities for part of their enrollment and their 14,504 benefit months were excluded from the analysis. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

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

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

TABLE D.9
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d, e}
 DUAL ELIGIBLE BENEFICIARIES, IDAHO, 2001

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	Generic	Total	Patented	Off-Patent	Generic	Total	Patented	Off-Patent	Generic	Total Rx \$	No.	As % of Dual All-Year NF Residents	No. of Bene Mos
Anti-infective Agents	0.4	0.2	0.0	0.2	\$17	\$15	\$0	\$2	\$41	\$63	\$57	\$12	8,021	1,881	65.5 %	19,387
Biologics	0.1	0.0	0.0	0.1	2	0	0	1	17	11	0	19	116	107	3.7	1,153
Antineoplastic Agents	0.7	0.3	0.2	0.3	108	63	27	18	149	243	148	63	915	131	4.6	1,266
Endocrine/Metabolic Drugs	1.3	0.6	0.2	0.5	38	28	3	6	28	47	15	11	19,768	1,462	50.9	14,708
Cardiovascular Agents	2.0	0.6	0.2	1.2	46	24	3	20	23	42	18	16	37,868	1,959	68.2	19,273
Respiratory Agents	0.9	0.4	0.0	0.5	32	21	0	11	37	58	24	23	9,546	1,067	37.1	11,001
Gastrointestinal Agents	1.1	0.5	0.0	0.5	69	56	2	11	63	104	65	20	14,949	1,371	47.7	13,640
Genitourinary Agents	0.7	0.5	0.0	0.2	33	29	0	4	47	57	24	20	4,741	659	22.9	6,724
CNS Drugs	1.6	1.0	0.1	0.5	111	90	8	13	68	90	84	24	32,901	2,018	70.2	19,996
Stimulants/Anti-obesity/Anorexia	0.6	0.0	0.0	0.5	12	1	0	11	21	32	8	21	217	39	1.4	386
Miscellaneous Psychological/Neurological Agents	0.8	0.8	0.0	0.0	100	99	0	1	126	130	0	19	1,404	178	6.2	1,769
Analgesics and Anesthetics	1.3	0.6	0.1	0.7	58	45	3	10	43	77	59	14	23,852	1,806	62.9	17,772
Neuromuscular Agents	1.4	0.6	0.1	0.7	70	44	5	21	51	79	37	30	13,032	916	31.9	9,396
Nutritional Products	0.9	0.0	0.1	0.7	15	0	5	10	18	11	35	14	7,518	891	31.0	8,796
Hematological Agents	1.2	0.2	0.3	0.7	36	22	5	8	30	118	16	12	7,785	674	23.5	6,652
Topical Products	0.4	0.2	0.0	0.2	13	8	1	4	30	44	40	17	6,529	1,406	48.9	14,863
Miscellaneous Products	0.3	0.1	0.1	0.2	16	3	9	4	50	60	143	18	168	53	1.8	527
Unknown Therapeutic Category	0.5	0.0	0.0	0.0	18	0	0	0	40	0	0	0	1,632	346	12.0	3,596
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.	190,962	8,163,110	n.a.	n.a.

Source: Data for this table are from the MAX 2001 file for Idaho, released by CMS in 07/2005. This table was produced on 09/19/2006.

- a. Table D.9 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2001. A total of 1,636 beneficiaries who were in nursing facilities for part of their enrollment and their 14,504 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 2001. 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 Idaho, 0.8 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 D9

Dual Eligible 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 D.10
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS,
 BY TOP-10 DRUG GROUP^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, IDAHO, 2001

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	
ANTIPSYCHOTICS	\$1,032,059	1,011	35.2 %	10,275	0.8	\$121	\$100	
ANTIDEPRESSANTS	969,785	1,989	69.2	20,160	0.9	55	48	
ULCER DRUGS	813,347	1,221	42.5	12,115	0.8	80	67	
ANALGESICS - Narcotic	657,178	2,062	71.8	20,066	0.9	39	33	
ANTICONVULSANT	410,680	746	26.0	7,768	1.0	54	53	
ANALGESICS - ANTI-INFLAMMATORY	349,853	817	28.4	8,553	0.7	61	41	
ANTIDIABETIC	317,983	871	30.3	8,564	0.9	42	37	
ANTIHYPERTENSIVE	294,475	1,020	35.5	10,095	0.9	33	29	
ANTIASTHMATIC	215,018	928	32.3	9,513	0.6	36	23	
ANTIANSIETY AGENTS	190,604	819	28.5	8,244	0.7	34	23	
Total	5,250,982	11,484		115,353	n.a.	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2001 file for Idaho, released by CMS in 07/2005. This table was produced on 09/19/2006.

a. Table D.10 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2001. A total of 1,636 beneficiaries who were in nursing facilities for part of their enrollment and their 14,504 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 2001. 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 2001 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 (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 D.10A

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR TOP 10 DRUG GROUPS COMBINED AND FIRST AND SECOND TOP DRUG GROUPS SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BOE, AND AGE^{a, b, c, d}
DUAL ELIGIBLE BENEFICIARIES, IDAHO, 2001

Beneficiary Characteristics	All Top 10 Drug Groups					ANTIPSYCHOTICS					ANTIDEPRESSANTS				
	No. of Rx	Rx \$	No. of Users	Users as %		Mean Rx \$	Mean No. of Rx	No. of Bene Mos among Users	NF Residents	All-Year Residents	No. of Bene Mos among Users	NF Residents	All-Year Residents	Mean No. of Rx	Mean Rx \$
				35.2 %	10,275										
All	94,880	\$5,250,982	1,011	35.2 %	10,275	0.8	\$100	1,989	69.2 %	20,160	0.9	\$48			
Female	67,756	3,714,798	689	33.6	7,043	0.8	99	1,464	71.4	14,826	0.9	47			
Disabled	4,994	348,456	52	54.7	611	0.7	115	91	95.8	967	1.0	62			
64 or younger	4,967	344,652	50	53.8	595	0.7	114	89	95.7	959	1.0	62			
65-74	12	1,093	1	100.0	12	0.3	50	0	0.0	0	0.0	0			
75-84	15	2,711	1	100.0	4	1.0	534	2	200.0	8	0.6	30			
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0			
Other Eligibles	62,762	3,366,342	637	32.6	6,432	0.8	97	1,373	70.3	13,859	0.9	46			
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0			
65-74	8,957	513,224	94	47.5	955	0.9	114	180	90.9	1,834	0.9	46			
75-84	22,161	1,228,557	246	39.0	2,470	0.9	107	486	77.0	4,879	0.8	48			
85 and older	31,644	1,624,561	297	26.4	3,007	0.8	84	707	62.8	7,146	0.9	46			
Male	27,124	1,536,184	322	39.1	3,232	0.8	104	525	63.7	5,334	0.9	50			
Disabled	4,691	331,828	54	50.0	577	0.9	167	73	67.6	800	1.0	63			
64 or younger	4,607	327,841	54	51.9	577	0.9	167	72	69.2	790	0.9	63			
65-74	63	2,852	0	0.0	0	0.0	0	0	0.0	0	0.0	0			
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0			
85 and older	21	1,135	0	0.0	0	0.0	0	1	100.0	10	1.7	107			
Other Eligibles	22,433	1,204,356	268	37.4	2,655	0.8	90	452	63.1	4,534	0.9	48			
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0			
65-74	6,520	364,450	69	43.1	738	0.9	101	120	75.0	1,231	0.9	51			
75-84	9,049	494,418	110	38.1	1,074	0.9	97	171	59.2	1,796	0.9	45			
85 and older	6,864	345,488	89	33.3	843	0.8	72	161	60.3	1,507	0.9	49			
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 2001 file for Idaho, released by CMS in 07/2005. This table was produced on 09/19/2006.

a. Table D.10A includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2001. A total of 1,636 beneficiaries who were in nursing facilities for part of their enrollment and their 14,504 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 2001. 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 2001 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 (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 D.10B
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY
 AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BOE, AND AGE^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, IDAHO, 2001

Beneficiary Characteristics	ULCER DRUGS						ANALGESICS - Narcotic						ANTICONVULSANT					
	Users as %			Users as %			Users as %			Users as %			Users as %			Users as %		
	No. of Users	No. of Bene Users	Mean No. of Rx	No. of Users	No. of Bene Users	Mean No. of Rx	No. of Users	No. of Bene Users	Mean No. of Rx	No. of Users	No. of Bene Users	Mean No. of Rx	No. of Users	No. of Bene Users	Mean No. of Rx	No. of Users	No. of Bene Users	Mean No. of Rx
All	1,221	12,115	0.8	2,062	20,066	0.9	746	7,768	0.9	746	26.0 %	746	7,768	1.0	553			
Female	886	8,840	0.8	1,542	15,154	0.8	476	4,976	0.8	476	23.2	476	4,976	0.9	46			
Disabled	54	554	0.8	80	854	1.1	77	75	1.1	77	60.0	57	659	1.0	75			
64 or younger	53	550	0.8	80	854	1.1	77	75	1.1	77	61.3	57	659	1.0	75			
65-74	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0			
75-84	1	4	0.8	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			
Other Eligibles	832	8,286	0.8	1,462	14,300	0.8	419	4,317	0.8	419	21.4	419	4,317	0.9	41			
64 or younger	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0			
65-74	103	1,023	0.9	148	1,422	1.1	92	965	1.1	92	46.5	92	965	1.0	49			
75-84	269	2,609	0.8	480	4,710	0.9	162	1,610	0.9	162	25.7	162	1,610	1.0	47			
85 and older	460	4,654	0.8	834	8,168	0.8	165	1,742	0.8	165	14.7	165	1,742	0.8	31			
Male	335	3,275	0.8	520	4,912	0.9	270	2,792	0.9	270	32.8	270	2,792	1.1	66			
Disabled	52	529	0.9	75	749	1.0	67	728	1.0	67	62.0	67	728	1.3	89			
64 or younger	51	520	0.9	74	740	0.9	65	709	0.9	65	62.5	65	709	1.3	91			
65-74	1	9	0.9	1	9	4.1	1	9	4.1	1	50.0	1	9	0.4	30			
75-84	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			
Other Eligibles	283	2,746	0.8	445	4,163	0.8	203	2,064	0.8	203	28.4	203	2,064	1.0	58			
64 or younger	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0			
65-74	76	746	0.8	83	832	1.0	64	668	1.0	64	40.0	64	668	1.1	72			
75-84	106	1,024	0.8	165	1,596	0.9	93	983	0.9	93	32.2	93	983	1.0	55			
85 and older	101	976	0.8	197	1,735	0.6	46	413	0.6	46	17.2	46	413	0.9	41			
Unknown	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 2001 file for Idaho, released by CMS in 07/2005. This table was produced on 09/19/2006.

a. Table D.10B includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2001. A total of 1,636 beneficiaries who were in nursing facilities for part of their enrollment and their 14,504 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 2001. 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 2001 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 (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 D.10C
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY
 AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BOE, AND AGE^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, IDAHO, 2001

Beneficiary Characteristics	ANALGESICS - ANTI-INFLAMMATORY					ANTI-DIABETIC					ANTI-HYPERTENSIVE				
	Users as %					Users as %					Users as %				
	No. of Users	No. of Bene NF Residents	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	No. of Bene NF Residents	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	No. of Bene NF Residents	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
All	817	28.4 %	8,553	0.7	\$41	871	30.3 %	8,564	0.9	\$37	1,020	35.5 %	10,095	0.9	\$29
Female	608	29.7	6,360	0.7	43	605	29.5	6,001	0.9	38	724	35.3	7,213	0.9	29
Disabled	28	29.5	308	0.7	37	35	36.8	315	0.8	42	39	41.1	421	0.8	27
64 or younger	27	29.0	304	0.7	37	35	37.6	315	0.8	42	39	41.9	421	0.8	27
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	1	100.0	4	0.8	54	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	580	29.7	6,052	0.7	43	570	29.2	5,686	0.9	38	685	35.1	6,792	0.9	29
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	67	33.8	712	0.7	39	95	48.0	982	0.9	42	65	32.8	657	0.9	31
75-84	190	30.1	1,977	0.7	45	218	34.5	2,097	0.9	40	226	35.8	2,250	0.9	30
85 and older	323	28.7	3,363	0.7	42	257	22.8	2,607	0.9	34	394	35.0	3,885	0.9	29
Male	209	25.4	2,193	0.6	36	266	32.3	2,563	0.9	35	296	35.9	2,882	0.9	29
Disabled	19	17.6	208	0.4	16	18	16.7	213	1.0	43	30	27.8	311	0.8	28
64 or younger	19	18.3	208	0.4	16	17	16.3	204	1.0	44	29	27.9	302	0.8	28
65-74	0	0.0	0	0.0	0	1	50.0	9	0.6	15	1	50.0	9	1.0	26
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	190	26.5	1,985	0.6	39	248	34.6	2,350	0.9	35	266	37.2	2,571	0.9	29
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	37	23.1	383	0.6	34	85	53.1	823	0.9	41	71	44.4	722	0.9	28
75-84	77	26.6	859	0.6	40	90	31.1	912	0.8	30	106	36.7	1,036	0.9	31
85 and older	76	28.5	743	0.7	40	73	27.3	615	0.9	34	89	33.3	813	0.9	28
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2001 file for Idaho, released by CMS in 07/2005. This table was produced on 09/19/2006.

a. Table D.10C includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2001. A total of 1,636 beneficiaries who were in nursing facilities for part of their enrollment and their 14,504 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 2001. 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 2001 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 (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 D.10D
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR NINTH AND TENTH TOP DRUG GROUPS
 SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BOE, AND AGE^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, IDAHO, 2001

Beneficiary Characteristics	ANTI-ASTHMATIC					ANTI-ANXIETY AGENTS						
	Users as %		Users as %		Mean Rx \$	Users as %		Users as %		Mean Rx \$		
	No. of Users	No. of Bene Mos among Users	No. of Bene Mos among Users	No. of Bene Mos among Users		No. of Residents	No. of Residents	No. of Rx	No. of Rx			
All	928	32.3 %	9,513	0.6	\$23	819	28.5 %	8,244	0.7	\$23	2,873	27,597
Female	612	29.9	6,279	0.6	23	609	29.7	6,120	0.7	23	2,049	20,126
Disabled	33	34.7	326	0.8	30	46	48.4	496	1.1	40	95	1,017
64 or younger	33	35.5	326	0.8	30	45	48.4	484	1.1	40	93	1,001
65-74	0	0.0	0	0.0	0	1	100.0	12	0.7	41	1	12
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	4
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Other Eligibles	579	29.6	5,953	0.6	22	563	28.8	5,624	0.6	21	1,954	19,109
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	87	43.9	814	0.7	22	79	39.9	734	0.7	25	198	1,927
75-84	201	31.9	2,087	0.7	26	191	30.3	1,919	0.7	21	631	6,101
85 and older	291	25.9	3,052	0.5	20	293	26.0	2,971	0.6	21	1,125	11,081
Male	316	38.3	3,234	0.7	23	210	25.5	2,124	0.7	24	824	7,471
Disabled	34	31.5	350	0.7	21	49	45.4	518	0.9	32	108	1,024
64 or younger	33	31.7	340	0.7	22	48	46.2	508	1.0	32	104	1,003
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	10
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	1
85 and older	1	100.0	10	0.1	1	1	100.0	10	0.2	3	1	10
Other Eligibles	282	39.4	2,884	0.6	23	161	22.5	1,606	0.7	21	716	6,447
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	73	45.6	792	0.8	33	43	26.9	450	0.8	23	160	1,490
75-84	100	34.6	1,079	0.6	20	70	24.2	693	0.7	20	289	2,615
85 and older	109	40.8	1,013	0.6	19	48	18.0	463	0.6	22	267	2,342
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 2001 file for Idaho, released by CMS in 07/2005. This table was produced on 09/19/2006.

a. Table D.10D includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2001. A total of 1,636 beneficiaries who were in nursing facilities for part of their enrollment and their 14,504 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 2001. 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 2001 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 (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 D.11
 USE OF AND REIMBURSEMENT FOR PART D EXCLUDED DRUGS AMONG DUALS
 BY BENEFICIARY CHARACTERISTIC^{a,b}
 IDAHO, 2001

Beneficiary Characteristics	No. of Benes with at Least One Part D Excl Rx	% Benes with at Least One Part D Excl Rx	No. of Part D Excl Rx per Bene	Total No. Part D Excl Rx	Total Part D Excl Rx \$	\$ per Part D Excl Rx	Part D Excl Rx as % of All Rx \$	Total No. of Benes
	9,561	49.6 %	3.9	74,608	\$1,674,850	\$22	3.2 %	19,272
Age								
5 and younger	2	100.0	9.5	19	424	22	4.6	2
6-14	4	57.1	10.7	75	1,572	21	3.6	7
15-20	22	45.8	2.3	108	5,697	53	6.3	48
21-44	1,723	42.1	3.0	12,162	321,568	26	2.7	4,090
45-64	2,278	51.9	4.5	19,818	506,584	26	3.2	4,389
65-74	1,693	47.2	3.8	13,714	300,179	22	3.4	3,587
75-84	1,927	51.5	3.9	14,572	288,469	20	3.4	3,740
85 and older	1,912	56.1	4.1	14,140	250,357	18	3.7	3,409
Unknown	0	0.0	0.0	0	0	0	0.0	0
Basis of Eligibility^c								
Aged	5,495	51.5	4.0	42,216	834,758	20	3.5	10,661
Disabled	4,033	47.3	3.8	32,250	822,307	25	2.9	8,519
Adults	32	37.2	1.6	136	17,755	131	9.7	86
Children	1	16.7	1.0	6	30	5	0.2	6
Unknown	0	0.0	0.0	0	0	0	0.0	0
Gender								
Female	6,555	54.5	4.4	52,914	1,165,416	22	3.4	12,030
Male	3,006	41.5	3.0	21,694	509,434	23	2.9	7,242
Unknown	0	0.0	0.0	0	0	0	0.0	0
Race								
White	8,979	50.5	4.0	70,893	1,596,664	23	3.2	17,778
African American	32	45.1	3.8	272	7,536	28	4.0	71
Other/unknown	550	38.7	2.4	3,443	70,650	21	2.5	1,423
Use of Nursing Facilities^d								
Entire year	1,722	59.9	4.9	14,089	276,760	20	3.4	2,873
Part year	1,052	64.3	4.7	7,696	146,478	19	3.5	1,636
None	6,787	46.0	3.6	52,823	1,251,612	24	3.1	14,763
Maintenance Assistance Status								
Cash	4,822	46.6	3.7	38,487	963,393	25	3.0	10,349
Medically needy	0	0.0	0.0	0	0	0	0.0	1
Poverty related	119	40.6	2.0	573	12,218	21	3.2	293
Other/unknown	4,620	53.5	4.1	35,548	699,239	20	3.5	8,629

Table D11

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2001 file for Idaho, released by CMS in 07/2005. This table was produced on 09/19/2006.

- a. Table D.11 includes the beneficiaries represented by Cell G of Table 1. Beneficiaries include all dual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2001.
 - b. Excluded drugs include benzodiazepines; barbiturates; nonprescription (OTC) medications; prescription vitamins and minerals (not including prenatal vitamins and fluoride preparations); and drugs used for anorexia, weight loss, or weight gain. Other excluded drugs include those that promote fertility; those used for cosmetic purposes or hair growth, for symptomatic relief of coughs and colds; or drugs for which the manufacturer requires that associated tests or monitoring services be purchased exclusively from the manufacturer.
 - c. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.
 - d. Please refer to footnote f on Table 1 for methodology used to determine use of nursing facilities.
- Bene(s) = beneficiary (or beneficiaries); CMS = Center for Medicare and Medicaid Services; Excl = excluded; MAX = Medicaid Analytic Extract; OTC = over-the-counter; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.12
 USE OF AND REIMBURSEMENT FOR PART D EXCLUDED DRUGS AMONG DUALS PER BENEFIT MONTH
 BY BENEFICIARY CHARACTERISTIC^{a,b}
 IDAHO, 2001

Beneficiary Characteristics	No. Rx per Bene Mo.	Rx \$ per Bene Mo.	\$ per Rx	Barbiturate \$ per Bene Mo.	Benzodiazapine \$ per Bene Mo.	No. of Bene Mos
	0.4	\$8	\$22	\$0	\$3	197,470
Age						
5 and younger	0.8	18	22	0	0	24
6-14	0.9	19	21	0	4	84
15-20	0.2	10	53	0	2	543
21-44	0.3	7	26	0	4	44,455
45-64	0.4	11	26	0	4	47,394
65-74	0.4	8	22	0	2	36,923
75-84	0.4	8	20	0	2	36,269
85 and older	0.4	8	18	0	1	31,778
Unknown	0.0	0	0	0	0	0
Basis of Eligibility^c						
Aged	0.4	8	20	0	2	104,325
Disabled	0.3	9	25	0	4	92,444
Adults	0.2	27	131	0	2	666
Children	0.2	1	5	0	0	35
Unknown	0.0	0	0	0	0	0
Gender						
Female	0.4	9	22	0	3	123,647
Male	0.3	7	23	0	3	73,823
Unknown	0.0	0	0	0	0	0
Race						
White	0.4	9	23	0	3	181,539
African American	0.4	10	28	0	6	759
Other/unknown	0.2	5	21	0	2	15,172
Use of Nursing Facilities^d						
Entire year	0.5	10	20	0	2	27,597
Part year	0.5	10	19	0	3	14,504
None	0.3	8	24	0	3	155,369
Maintenance Assistance Status						
Cash	0.3	9	25	0	3	112,637
Medically needy	0.0	0	0	0	0	2
Poverty related	0.2	5	21	0	1	2,706
Other/unknown	0.4	9	20	0	2	82,125

Source: Data for this table are from the MAX 2001 file for Idaho, released by CMS in 07/2005. This table was produced on 09/19/2006.

- a. Table D.12 includes the beneficiaries represented by Cell G of Table 1. Beneficiaries include all dual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2001.
- b. Excluded drugs include benzodiazepines; barbiturates; nonprescription (OTC) medications; prescription vitamins and minerals (not including prenatal vitamins and fluoride preparations); and drugs used for anorexia, weight loss, or weight gain. Other excluded drugs include those that promote fertility; those used for cosmetic purposes or hair growth, for symptomatic relief of coughs and colds; or drugs for which the manufacturer requires that associated tests or monitoring services be purchased exclusively from the manufacturer.
- c. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.
- d. Please refer to footnote f on Table 1 for methodology used to determine use of nursing facilities.

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

TABLE D.13
 USE OF AND REIMBURSEMENT FOR PART D EXCLUDED DRUGS FOR SELECTED DRUG CATEGORIES AMONG DUALS^{a,b,c}
 IDAHO, 2001

Drug Category	No. Users	Rx \$ per User	Total Rx \$	Rx \$ as % of All Part D Excl Rx \$	Total No. Rx.	\$ per Rx	No. Rx as % of All Part D Excl Rx
All	12,774	\$131	\$1,674,850	100.0 %	74,608	\$22	100.0 %
Anorexia or weight loss/gain	231	192	44,299	2.6	404	110	0.5
Fertility drugs	67	30	2,034	0.1	82	25	0.1
Drugs for cosmetic purposes	95	446	42,379	2.5	568	75	0.8
Cough and cold medications	2,986	107	318,517	19.0	9,306	34	12.5
Vitamins and minerals	3,689	139	513,494	30.7	27,434	19	36.8
Non-prescription drugs	1,290	115	148,791	8.9	5,328	28	7.1
Barbiturates	178	89	15,777	0.9	2,118	7	2.8
Benzodiazepines	4,036	136	550,803	32.9	28,375	19	38.0
Other Part D Excl Rx Drugs	202	192	38,756	2.3	993	39	1.3

Source: Data for this table are from the MAX 2001 file for Idaho, released by CMS in 07/2005. This table was produced on 09/19/2006.

a. Table D.13 includes the beneficiaries represented by Cell G of Table 1. Beneficiaries include all dual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2001. A user is a beneficiary who had at least one prescription filled for a Part D excluded drug in 2001. A beneficiary who used drugs from two or more Part D excluded categories was counted as a user for each category. Therefore, the sum of users across drug categories may exceed the total number of individual users as noted on Table D11.

b. Includes OTC drugs as well as prescription drugs.

c. Excluded drugs include benzodiazepines; barbiturates; nonprescription (OTC) medications; prescription vitamins and minerals (not including prenatal vitamins and fluoride preparations); and drugs used for anorexia, weight loss, or weight gain. Other excluded drugs include those that promote fertility; those used for cosmetic purposes or hair growth, for symptomatic relief of coughs and colds; or drugs for which the manufacturer requires that associated tests or monitoring services be purchased exclusively from the manufacturer.

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

SUPPLEMENTAL TABLE 1E
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 85 AND OLDER^{a, b}
 IDAHO, 2001

Total Number of Dual Eligible Beneficiaries, Age 85+ 3,409
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 85+ \$6,727,369
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 85+ \$1,973

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 85+ 6.5 %	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	223		0	0.0 %
1-500	651	19.1	157,082	2.3
501-1,000	484	14.2	356,558	5.3
1,001-1,500	400	11.7	493,069	7.3
1,501-2,000	336	9.9	585,066	8.7
2,001-2,500	294	8.6	657,759	9.8
2,501-3,000	231	6.8	634,957	9.4
3,001-3,500	181	5.3	587,435	8.7
3,501-4,000	142	4.2	529,807	7.9
4,001-4,500	108	3.2	461,533	6.9
4,501-5,000	88	2.6	418,451	6.2
5,001-5,500	68	2.0	354,583	5.3
5,501-6,000	55	1.6	314,457	4.7
6,001-6,500	29	0.9	179,432	2.7
6,501-7,000	39	1.1	263,821	3.9
7,001-7,500	16	0.5	115,663	1.7
7,501-8,000	16	0.5	123,416	1.8
8,001-8,500	7	0.2	57,223	0.9
8,501-9,000	13	0.4	113,082	1.7
9,001-9,500	6	0.2	55,630	0.8
9,501-10,000	5	0.1	49,045	0.7
10,001+	17	0.5	219,300	3.3

Source: Data for this table are from the MAX 2001 file for Idaho, released by CMS in 07/2005. This table was produced on 09/19/2006.

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 2001.

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

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, IDAHO, 2001

Beneficiary Characteristics	No. of Benes				No. of Bene Mos			
	All	Aged	Disabled	Unknown	All	Aged	Disabled	Unknown
All	19,272	10,661	8,519	0	197,470	104,325	92,444	0
Age								
5 and younger	2	0	2	0	24	0	24	0
6-14	7	0	7	0	84	0	84	0
15-20	48	0	45	0	543	0	512	0
21-44	4,090	0	4,020	0	44,455	0	43,909	0
45-64	4,389	0	4,371	0	47,394	0	47,282	0
65-74	3,587	3,525	61	0	36,923	36,379	532	0
75-84	3,740	3,731	9	0	36,269	36,193	76	0
85 and older	3,409	3,405	4	0	31,778	31,753	25	0
Unknown	0	0	0	0	0	0	0	0
Gender								
Female	12,030	7,661	4,311	0	123,647	76,288	46,917	0
Male	7,242	3,000	4,208	0	73,823	28,037	45,527	0
Unknown	0	0	0	0	0	0	0	0
Race								
White	17,778	9,793	7,900	0	181,539	95,105	85,809	0
African American	71	32	39	0	759	337	422	0
Other/unknown	1,423	836	580	0	15,172	8,883	6,213	0
Use of Nursing Facilities^c								
Entire year	2,873	2,670	203	0	27,597	25,556	2,041	0
Part year	1,636	1,445	191	0	14,504	12,469	2,035	0
None	14,763	6,546	8,125	0	155,369	66,300	88,368	0
Maintenance Assistance Status								
Cash	10,349	2,093	8,214	0	112,637	23,129	89,138	0
Medically needy	1	0	0	0	0	0	0	0
Poverty related	293	133	142	0	2,706	1,139	1,450	0
Other/unknown	8,629	8,435	163	0	82,125	80,057	1,856	0
Dual Status^d								
Full dual, all year	18,688	10,343	8,254	0	191,721	101,368	89,664	0
Full dual, part year	584	318	265	0	5,749	2,957	2,780	0
Managed Care Status								
FFS all year	19,272	10,661	8,519	0	197,470	104,325	92,444	0
FFS part year, with Rx claims	0	0	0	0	0	0	0	0
FFS part year, no Rx claims	0	0	0	0	0	0	0	0
MC all year, with Rx claims	0	0	0	0	0	0	0	0
MC all year, no Rx claims	0	0	0	0	0	0	0	0

Source: Data for this table are from the MAX 2001 file for Idaho, released by CMS in 07/2005. This table was produced on 09/19/2006.

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

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

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

d. The "Full dual, all year" group contains beneficiaries who had Medicare as well as Medicaid pharmacy benefits during all months of Medicaid enrollment in 2001. 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^a
 DUAL ELIGIBLE BENEFICIARIES, IDAHO, 2001

Beneficiary Characteristics	Bene Mos in Cell F of Table 1		Bene Mos and		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	No. of Benes	No. of Bene Mos	No. of Benes	No. of Bene Mos
All	19,272	197,470	19,272	197,470	19,272	197,470	0	0
FFS all year	19,272	197,470	19,272	197,470	19,272	197,470	0	0
FFS part year, with Rx claims	0	0	0	0	0	0	0	0
FFS part year, with no Rx claims	0	0	0	0	0	0	0	0
MC all year, with Rx claims	0	0	0	0	0	0	0	0
MC all year, with no Rx claims	0	0	0	0	0	0	0	0

Source: Data for this table are from the MAX 2001 file for Idaho, released by CMS in 07/2005. This table was produced on 09/19/2006.

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

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.