

**STATISTICAL COMPENDIUM:
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2002
IDAHO**

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TABLE ND.2

CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a,b}
NONDUAL BENEFICIARIES, IDAHO, 2002

Beneficiary Characteristics	No. of Benes						No. of Bene Mos					
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown
All	176,694	267	17,091	30,407	128,929	0	1,607,884	2,684	179,435	206,831	1,218,934	0
Age												
5 and younger	57,541	0	1,336	0	56,205	0	531,075	0	13,639	0	517,436	0
6-14	57,003	0	3,050	0	53,953	0	566,812	0	33,904	0	532,908	0
15-20	24,107	0	2,034	3,384	18,689	0	213,336	0	21,870	23,220	168,246	0
21-44	31,346	0	5,639	25,630	77	0	232,892	0	59,329	173,249	314	0
45-64	6,405	0	5,026	1,376	3	0	61,005	0	50,666	10,329	10	0
65-74	163	151	4	8	0	0	1,653	1,605	25	23	0	0
75-84	91	81	2	8	0	0	786	775	2	9	0	0
85 and older	36	35	0	1	0	0	305	304	0	1	0	0
Unknown	2	0	0	0	2	0	20	0	0	0	20	0
Gender												
Female	99,083	168	8,832	26,196	63,887	0	878,038	1,664	93,428	178,951	603,995	0
Male	77,611	99	8,259	4,211	65,042	0	729,846	1,020	86,007	27,880	614,939	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	149,654	208	15,620	26,221	107,605	0	1,370,203	2,094	164,013	184,506	1,019,590	0
African American	1,633	1	117	230	1,285	0	15,022	12	1,191	1,572	12,247	0
Other/unknown	25,407	58	1,354	3,956	20,039	0	222,659	578	14,231	20,753	187,097	0
Use of Nursing Facilities^c												
Entire year	178	37	140	1	0	0	1,677	321	1,352	4	0	0
Part year	258	17	227	7	7	0	2,523	132	2,260	52	79	0
None	176,258	213	16,724	30,399	128,922	0	1,603,684	2,231	175,823	206,775	1,218,855	0
Maintenance Assistance Status												
Cash	42,976	109	15,815	9,619	17,433	0	407,439	1,218	165,587	74,428	166,206	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0
Poverty-related	111,013	0	1	11,386	99,626	0	998,369	0	2	60,107	938,260	0
Other/unknown	22,705	158	1,275	9,402	11,870	0	202,076	1,466	13,846	72,296	114,468	0
Managed Care Status												
FFS all year	176,694	267	17,091	30,407	128,929	0	1,607,884	2,684	179,435	206,831	1,218,934	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

Table ND2

Nondual Beneficiaries

Source: Data for this table are from the MAX 2002 file for Idaho, released by CMS in 05/2006. This table was produced on 04/19/2007.

- a. Table ND.2 includes the beneficiaries represented by Cell K of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- b. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services. The total includes some beneficiaries with unknown basis of eligibility and some whose age categories are not consistent with basis of eligibility.
- c. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.

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

TABLE ND.3

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC^{a,b}
 NONDUAL BENEFICIARIES, IDAHO, 2002

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	62.2 %	6.6	\$367	\$56	\$2,681	13.7 %	176,694
Age							
5 and younger	65.3	3.2	124	39	1,516	8.2	57,541
6-14	55.7	3.5	198	57	1,475	13.4	57,003
15-20	59.9	5.2	304	59	2,728	11.2	24,107
21-44	66.6	11.8	717	61	5,025	14.3	31,346
45-64	79.6	43.0	2,512	59	11,790	21.3	6,405
65-74	71.8	30.5	1,645	54	12,010	13.7	163
75-84	64.8	34.2	1,350	40	12,134	11.1	91
85 and older	86.1	33.0	1,358	41	18,287	7.4	36
Unknown	50.0	2.0	29	15	336	8.6	2
Basis of Eligibility^c							
Aged	75.7	34.5	1,635	47	13,489	12.1	267
Disabled	80.0	31.3	2,217	71	14,335	15.5	17,091
Adults	63.8	7.2	317	44	2,590	12.2	30,407
Children	59.5	3.1	131	42	1,136	11.5	128,929
Unknown	0.0	0.0	0	0	0	0.0	0
Gender							
Female	64.1	7.5	388	52	2,748	14.1	99,083
Male	59.8	5.4	339	63	2,596	13.1	77,611
Unknown	0.0	0.0	0	0	0	0.0	0
Race							
White	63.4	7.1	401	57	2,820	14.2	149,654
African American	57.9	4.2	216	52	2,121	10.2	1,633
Other/unknown	55.7	3.9	173	44	1,904	9.1	25,407
Use of Nursing Facilities^d							
Entire year	93.3	83.7	4,669	56	49,840	9.4	178
Part year	96.9	86.1	4,527	53	59,087	7.7	258
None	62.1	6.4	356	56	2,551	14.0	176,258
Maintenance Assistance Status							
Cash	70.6	16.2	1,037	64	6,532	15.9	42,976
Medically needy	0.0	0.0	0	0	0	0.0	0
Poverty related	58.7	3.0	116	39	1,247	9.3	111,013
Other/unknown	63.8	6.3	326	52	2,407	13.6	22,705

Table ND3

Nondual Beneficiaries

Source: Data for this table are from the MAX 2002 file for Idaho, released by CMS in 05/2006. This table was produced on 04/19/2007.

- a. Table ND.3 includes beneficiaries represented by Cell K of Table 1.
 - b. The Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
 - c. 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 ND.4
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a,b}
 NONDUAL BENEFICIARIES, IDAHO, 2002

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	0.7	\$40	13.7 %	37.8 %	51.7 %	4.4 %	4.0 %	1.6 %	0.6 %	\$295	176,694	1,607,884
Age												
5 and younger	0.3	14	8.2	34.7	62.3	2.2	0.7	0.0	0.0	164	57,541	531,075
6-14	0.4	20	13.4	44.3	50.7	2.8	2.0	0.2	0.0	148	57,003	566,812
15-20	0.6	34	11.2	40.1	50.1	5.3	3.9	0.6	0.0	308	24,107	213,336
21-44	1.6	97	14.3	33.4	42.5	9.3	9.7	3.9	1.2	676	31,346	232,892
45-64	4.5	264	21.3	20.4	18.8	9.8	22.9	18.5	9.7	1,238	6,405	61,005
65-74	3.0	162	13.7	28.2	22.7	12.9	20.9	11.0	4.3	1,184	163	1,653
75-84	4.0	156	11.1	35.2	9.9	7.7	23.1	13.2	11.0	1,405	91	786
85 and older	3.9	160	7.4	13.9	8.3	13.9	36.1	22.2	5.6	2,158	36	305
Unknown	0.2	3	8.6	50.0	50.0	0.0	0.0	0.0	0.0	34	2	20
Basis of Eligibility^c												
Aged	3.4	163	12.1	24.3	17.2	12.4	24.7	14.2	7.1	1,342	267	2,684
Disabled	3.0	211	15.5	20.0	31.5	11.1	20.3	11.8	5.2	1,365	17,091	179,435
Adults	1.1	47	12.2	36.2	46.0	8.5	6.9	2.0	0.4	381	30,407	206,831
Children	0.3	14	11.5	40.5	55.8	2.5	1.1	0.1	0.0	120	128,929	1,218,934
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Gender												
Female	0.8	44	14.1	35.9	52.0	4.8	4.5	1.9	0.8	310	99,083	878,038
Male	0.6	36	13.1	40.2	51.4	3.8	3.4	1.1	0.3	276	77,611	729,846
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	0.8	44	14.2	36.6	52.0	4.7	4.3	1.7	0.6	308	149,654	1,370,203
African American	0.5	24	10.2	42.1	50.4	3.7	3.1	0.7	0.0	231	1,633	15,022
Other/unknown	0.4	20	9.1	44.3	50.0	2.8	2.0	0.7	0.2	217	25,407	222,659
Use of Nursing Facilities^d												
Entire year	8.9	496	9.4	6.7	2.8	1.7	18.5	37.1	33.1	5,290	178	1,677
Part year	8.8	463	7.7	3.1	7.0	7.0	26.4	24.8	31.8	6,042	258	2,523
None	0.7	39	14.0	37.9	51.8	4.4	3.9	1.5	0.5	280	176,258	1,603,684
Maintenance Assistance Status												
Cash	1.7	109	15.9	29.4	44.3	7.7	10.8	5.6	2.3	689	42,976	407,439
Medically needy	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Poverty related	0.3	13	9.3	41.3	54.9	2.7	1.0	0.1	0.0	139	111,013	998,369
Other/unknown	0.7	37	13.6	36.2	50.6	6.3	5.6	1.2	0.2	270	22,705	202,076

Table ND4

Nondual Beneficiaries

Source: Data for this table are from the MAX 2002 file for Idaho, released by CMS in 05/2006. This table was produced on 04/19/2007.

- a. Table ND.4 includes the beneficiaries represented by Cell K of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- b. The Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
- c. 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 ND.5
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC^{a, b, c}
 NONDUAL BENEFICIARIES, IDAHO, 2002

Beneficiary Characteristics	All Rx		Patented Brand-Name Drugs		Off-Patent Brand-Name Drugs		Generic Drugs	
	No. of Rx	Rx \$	No. of Rx	Rx \$	No. of Rx	Rx \$	No. of Rx	Rx \$
All	0.7	\$40	0.3	\$30	0.0	\$2	0.4	\$7
		\$ per Rx		\$ per Rx		\$ per Rx		\$ per Rx
Age								
5 and younger	0.3	14	0.1	10	0.0	1	0.2	3
6-14	0.4	20	0.2	15	0.0	2	0.2	3
15-20	0.6	34	0.3	26	0.0	2	0.3	6
21-44	1.6	97	0.6	73	0.1	5	0.9	18
45-64	4.5	264	2.0	197	0.3	14	2.2	53
65-74	3.0	162	1.2	119	0.2	7	1.6	36
75-84	4.0	156	1.5	105	0.3	12	2.1	38
85 and older	3.9	160	1.5	110	0.5	15	1.9	34
Unknown	0.2	3	0.0	0	0.0	0	0.2	3
Basis of Eligibility^d								
Aged	3.4	163	1.4	116	0.2	9	1.8	37
Disabled	3.0	211	1.4	167	0.2	11	1.4	34
Adults	1.1	47	0.4	32	0.1	3	0.6	12
Children	0.3	14	0.1	10	0.0	1	0.2	3
Unknown	0.0	0	0.0	0	0.0	0	0.0	0
Gender								
Female	0.8	44	0.3	32	0.1	3	0.4	9
Male	0.6	36	0.3	28	0.0	2	0.3	6
Unknown	0.0	0	0.0	0	0.0	0	0.0	0
Race								
White	0.8	44	0.3	33	0.0	3	0.4	8
African American	0.5	24	0.2	18	0.0	1	0.2	5
Other/unknown	0.4	20	0.2	14	0.0	2	0.3	5
Use of Nursing Facilities^e								
Entire year	8.9	496	3.6	358	0.7	31	4.5	103
Part year	8.8	463	3.5	328	0.6	26	4.7	107
None	0.7	39	0.3	30	0.0	2	0.4	7
Maintenance Assistance Status								
Cash	1.7	109	0.8	85	0.1	6	0.8	19
Medically needy	0.0	0	0.0	0	0.0	0	0.0	0
Poverty related	0.3	13	0.1	9	0.0	1	0.2	3
Other/unknown	0.7	37	0.3	27	0.0	3	0.4	7

Source: Data for this table are from the MAX 2002 file for Idaho, released by CMS in 05/2006. This table was produced on 04/19/2007.

- a. Table ND.5 includes the beneficiaries represented by Cell K of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- b. The Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
- c. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In 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 ND.6

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d}
 NONDUAL BENEFICIARIES, IDAHO, 2002

Therapeutic Category	No. of Rx per Bene Mo among Users				\$ per Bene Mo among Users				Total No. of Rx	Total Rx \$	No.	As % of All Benes	No. of Bene Mos				
	Patented		Off-Patent		Patented		Off-Patent										
	Total	Brand-Name	Generic	Total	Brand-Name	Generic	Total	Brand-Name						Generic			
Anti-infective Agents	0.2	0.1	0.0	0.1	\$9	\$6	\$1	\$2	\$38	\$62	\$75	\$15	191,430	\$7,255,650	78,088	44.2 %	825,470
Biologics	0.3	0.3	0.0	0.0	275	262	0	13	901	887	0	1,364	2,116	1,907,399	702	0.4	6,936
Antineoplastic Agents	0.6	0.3	0.0	0.2	191	177	2	13	320	514	79	56	2,601	833,210	414	0.2	4,353
Endocrine/Metabolic Drugs	0.5	0.2	0.1	0.2	21	15	3	4	42	62	30	21	96,587	4,042,062	18,272	10.3	188,939
Cardiovascular Agents	1.0	0.4	0.1	0.5	35	24	2	9	35	60	37	17	77,655	2,731,242	7,335	4.2	77,380
Respiratory Agents	0.3	0.1	0.0	0.2	14	10	2	3	45	76	58	18	155,128	6,904,154	45,670	25.8	489,325
Gastrointestinal Agents	0.4	0.2	0.0	0.2	31	24	3	5	73	117	27	23	47,788	3,506,546	10,753	6.1	111,875
Genitourinary Agents	0.2	0.2	0.0	0.1	11	10	0	1	45	56	29	17	13,015	591,766	5,475	3.1	54,963
CNS Drugs	0.9	0.6	0.0	0.4	82	69	1	11	86	119	92	32	207,941	17,970,694	21,277	12.0	220,166
Stimulants/Anti-obesity/Anorexia	0.6	0.3	0.1	0.2	40	26	4	10	63	78	65	42	32,309	2,049,103	4,645	2.6	51,437
Miscellaneous Psychological/Neurological Agents	0.5	0.4	0.0	0.1	112	110	0	2	219	251	0	21	857	188,071	157	0.1	1,683
Analgesics and Anesthetics	0.4	0.1	0.0	0.3	17	11	1	6	40	138	65	18	135,286	5,429,143	30,694	17.4	310,877
Neuromuscular Agents	0.8	0.4	0.0	0.3	58	48	3	7	75	120	63	22	87,340	6,532,830	10,576	6.0	113,116
Nutritional Products	0.2	0.0	0.0	0.2	3	0	0	2	12	20	15	12	29,728	354,790	13,699	7.8	133,500
Hematological Agents	0.6	0.1	0.1	0.3	152	144	3	5	253	1,002	27	15	8,898	2,248,187	1,450	0.8	14,790
Topical Products	0.2	0.1	0.0	0.1	5	3	0	2	27	50	61	15	69,727	1,861,398	37,149	21.0	398,340
Miscellaneous Products	0.4	0.2	0.0	0.3	74	52	12	11	166	331	288	43	1,593	264,172	371	0.2	3,555
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	5	0	0	0	25	0	0	0	4,245	104,455	1,962	1.1	21,682
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.	1,164,244	64,774,872	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2002 file for Idaho, released by CMS in 05/2006. This table was produced on 04/19/2007.

a. Table ND.6 includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 2002. A beneficiary who used drugs from two or more categories was counted as a user for each category. Therefore, the sum of users across categories may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

c. For information about these therapeutic categories, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (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 ND.7
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP^{a, b, c}
 NONDUAL BENEFICIARIES, IDAHO, 2002

Top 10 Drug Groups	Users				Among Users		
	Total Medicaid Rx \$	No. As % of All Benes	No. of Bene Mos	No. of Rx per Bene Mo	\$ per Rx	Rx \$ per Bene Mo	
ANTIPSYCHOTICS	\$9,040,799	7,739	85,459	0.7	\$160	\$106	
ANTIDEPRESSANTS	7,817,364	22,055	230,461	0.5	68	34	
ANTICONVULSANT	5,725,697	7,708	84,527	0.7	94	68	
ANTIASTHMATIC	3,236,930	23,716	256,418	0.3	50	13	
ANALGESICS - Narcotic	2,945,355	33,400	342,310	0.3	32	9	
ULCER DRUGS	2,688,170	11,165	118,583	0.3	75	23	
PENICILLINS	2,218,112	64,118	693,829	0.1	24	3	
STIMULANTS/ANTI-OBESITY/ANOREXIANTS	2,049,109	5,109	56,852	0.6	63	36	
PASSIVE IMMUNIZING AGENTS	1,902,804	422	3,777	0.5	1,053	504	
ANTIDIABETIC	1,862,432	4,128	43,949	0.7	61	42	
Total	39,486,772	179,560	1,916,165	n.a.	n.a.	n.a.	

Source: Data for this table are from the MAX 2002 file for Idaho, released by CMS in 05/2006. This table was produced on 04/19/2007.

a. Table ND.7 includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2002. 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 2002. 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 ND.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}
 NONDUAL BENEFICIARIES, IDAHO, 2002

Beneficiary Characteristics	All Top 10 Drug Groups					ANTIPSYCHOTICS					ANTIDEPRESSANTS						
	No. of Rx	Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
All	580,521	\$39,486,772	7,739	4.4 %	85,459	0.7	\$106	22,055	12.5 %	230,461	0.5	\$34					
Female																	
Disabled																	
5 and younger	349,601	22,556,597	4,153	4.2	45,523	0.6	92	15,423	15.6	159,094	0.5	34					
6-14	172,267	13,681,781	2,564	29.0	29,194	0.7	112	5,671	64.2	63,754	0.6	44					
15-20	2,617	420,858	11	2.0	121	0.5	75	11	2.0	124	0.4	15					
21-44	8,557	810,277	200	17.9	2,271	0.7	122	242	21.7	2,797	0.5	36					
45-64	8,353	741,958	203	24.5	2,341	0.6	88	324	39.1	3,722	0.5	40					
65-74	68,896	5,582,983	1,268	40.1	14,434	0.7	108	2,500	79.1	28,126	0.6	44					
85 and older	83,838	6,125,505	882	27.7	10,027	0.8	120	2,593	81.5	28,984	0.7	45					
Other Eligibles																	
5 and younger	5	193	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
6-14	1	7	0	0.0	0	0.0	0	1	50.0	1	1.0	7					
15-20	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
21-44	177,334	8,874,816	1,589	1.8	16,329	0.4	58	9,752	10.8	95,340	0.4	28					
45-64	30,888	1,371,846	18	0.1	214	0.4	76	39	0.1	452	0.3	12					
85 and older	34,547	1,691,978	351	1.3	3,924	0.5	78	1,189	4.5	13,164	0.4	24					
Male																	
Disabled																	
5 and younger	25,479	1,330,267	378	2.9	4,007	0.4	60	2,035	15.7	20,990	0.3	24					
6-14	76,606	3,907,763	763	3.5	7,439	0.3	45	5,950	26.9	55,842	0.4	29					
15-20	7,473	424,347	48	5.1	419	0.5	45	482	50.8	4,323	0.5	36					
21-44	1,314	87,305	16	16.7	192	1.2	143	27	28.1	298	0.6	26					
45-64	803	46,189	8	13.1	61	1.1	39	18	29.5	169	0.6	32					
85 and older	224	15,121	7	26.9	73	0.7	90	12	46.2	102	0.7	33					
Other Eligibles																	
5 and younger	230,920	16,930,175	3,586	4.6	39,936	0.7	121	6,632	8.5	71,367	0.5	33					
6-14	109,369	10,238,254	2,329	28.2	26,406	0.8	139	3,106	37.6	34,875	0.6	41					
15-20	3,643	479,624	17	2.1	197	0.4	94	24	3.0	259	0.4	20					
21-44	21,720	2,051,079	597	30.9	6,916	0.7	129	659	34.1	7,587	0.6	34					
45-64	14,096	1,554,965	432	35.8	5,034	0.7	136	466	38.6	5,374	0.6	47					
85 and older	38,446	3,738,471	913	36.8	10,266	0.9	144	1,155	46.6	12,885	0.6	44					
Other Eligibles																	
5 and younger	31,438	2,411,817	370	20.1	3,993	1.0	152	802	43.5	8,770	0.6	38					
6-14	26	2,298	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	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
85 and older	121,550	6,691,901	1,257	1.8	13,530	0.5	86	3,526	5.1	36,492	0.4	27					
Other Eligibles																	
5 and younger	38,448	1,746,393	45	0.2	490	0.5	106	43	0.1	489	0.2	10					
6-14	51,429	3,008,790	663	2.4	7,488	0.6	95	1,701	6.2	18,984	0.4	24					
15-20	18,063	1,146,006	411	4.5	4,236	0.5	70	1,094	12.0	11,032	0.4	30					
21-44	10,267	566,848	110	3.0	1,025	0.4	64	569	15.7	4,980	0.4	29					
45-64	2,244	135,683	15	3.5	135	0.6	74	100	23.3	840	0.5	32					
85 and older	728	67,138	9	14.3	108	0.9	159	8	12.7	85	0.8	48					
Unknown																	
5 and younger	254	13,977	3	10.7	36	0.9	84	4	14.3	37	1.2	44					
6-14	117	7,066	1	10.0	12	0.8	96	7	70.0	45	0.6	32					
15-20	1	20	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
21-44																	
45-64																	
85 and older																	

Source: Data for this table are from the MAX 2002 file for Idaho, released by CMS in 05/2006. This table was produced on 04/19/2007.

a. Table ND.7A includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2002. 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 2002. 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 ND.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}
 NONDUAL BENEFICIARIES, IDAHO, 2002

Beneficiary Characteristics	ANTICONVULSANT					ANTIASTHMATIC					ANALGESICS - Narcotic				
	No. of Users	Users as % of All Benes	No. of Bene Mos among	Mean Rx	Mean No. of Rx	No. of Users	Users as % of All Benes	No. of Bene Mos among	Mean Rx	Mean No. of Rx	No. of Users	Users as % of All Benes	No. of Bene Mos among	Mean Rx	Mean No. of Rx
All	7,708	4.4 %	84,527	\$68	0.7	23,716	13.4 %	256,418	\$13	0.3	33,400	18.9 %	342,310	\$9	0.3
Female	4,612	4.7	50,206	65	0.7	12,872	13.0	138,207	13	0.3	23,986	24.2	242,332	8	0.3
Disabled	2,944	33.3	33,247	77	0.8	3,512	39.8	39,856	23	0.4	5,791	65.6	65,122	20	0.4
5 and younger	69	12.8	773	78	0.7	167	30.9	1,938	21	0.3	55	10.2	611	1	0.1
6-14	258	23.1	2,943	85	0.7	196	17.6	2,274	16	0.3	156	14.0	1,827	2	0.1
15-20	230	27.8	2,616	99	0.8	133	16.1	1,539	17	0.3	300	36.2	3,495	3	0.2
21-44	1,368	43.3	15,526	79	0.8	1,254	39.7	14,327	19	0.3	2,563	81.1	28,922	4	0.4
45-64	1,019	32.0	11,389	66	0.8	1,762	55.4	19,778	27	0.5	2,716	85.3	30,263	27	0.5
65-74	0	0.0	0	0	0.0	0	0.0	0	0	0.0	1	50.0	4	1.3	48
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	1,668	1.8	16,959	41	0.5	9,360	10.4	98,351	9	0.2	18,195	20.2	177,210	4	0.2
5 and younger	59	0.2	639	46	0.5	3,137	11.4	34,430	6	0.2	993	3.6	11,148	1	0.1
6-14	296	1.1	3,259	44	0.5	2,243	8.4	24,962	10	0.2	2,177	8.2	24,448	1	0.1
15-20	274	2.1	2,866	45	0.4	1,280	9.9	13,390	9	0.2	3,911	30.2	39,618	2	0.2
21-44	929	4.2	9,129	38	0.4	2,463	11.2	23,454	12	0.3	10,510	47.6	96,207	5	0.3
45-64	88	9.3	817	42	0.5	207	21.8	1,784	21	0.4	527	55.5	4,992	4	0.4
65-74	14	14.6	168	65	1.2	20	20.8	231	17	0.3	36	37.5	425	25	0.5
75-84	6	9.8	60	34	0.9	10	16.4	100	46	0.4	29	47.5	273	43	0.8
85 and older	2	7.7	21	28	0.7	0	0.0	0	0	0.0	12	46.2	99	27	0.4
Male	3,096	4.0	34,321	72	0.8	10,844	14.0	118,211	12	0.2	9,414	12.1	99,978	10	0.2
Disabled	2,128	25.8	24,243	86	0.9	1,887	22.8	21,204	22	0.4	2,819	34.1	30,843	23	0.4
5 and younger	88	11.1	1,029	68	0.7	281	35.3	3,158	17	0.3	91	11.4	1,071	2	0.1
6-14	498	25.7	5,774	75	0.8	361	18.7	4,236	18	0.3	224	11.6	2,614	4	0.2
15-20	341	28.3	4,006	97	0.8	171	14.2	1,962	17	0.3	266	22.1	3,033	4	0.2
21-44	836	33.7	9,451	99	1.0	438	17.7	4,912	22	0.4	1,122	45.3	12,243	4	0.2
45-64	365	19.8	3,983	63	0.8	636	34.5	6,936	29	0.5	1,115	60.5	11,870	37	0.6
65-74	0	0.0	0	0	0.0	0	0.0	0	0	0.0	1	50.0	12	1.0	43
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	968	1.4	10,078	41	0.5	8,957	12.9	97,007	10	0.2	6,595	9.5	69,135	4	0.2
5 and younger	84	0.3	917	24	0.4	4,658	16.2	50,334	7	0.2	1,296	4.5	14,413	1	0.1
6-14	431	1.6	4,914	39	0.5	3,152	11.5	35,062	13	0.2	2,081	7.6	23,330	1	0.1
15-20	218	2.4	2,230	49	0.5	775	8.5	8,290	12	0.2	1,712	18.8	18,165	2	0.1
21-44	189	5.2	1,596	43	0.5	291	8.0	2,513	16	0.3	1,273	35.2	11,080	4	0.4
45-64	30	7.0	259	58	0.7	56	13.0	547	20	0.4	207	48.1	1,882	12	0.3
65-74	14	22.2	149	48	1.2	9	14.3	90	11	0.5	14	22.2	156	162	1.0
75-84	2	7.1	13	18	0.5	11	39.3	120	24	0.5	8	28.6	74	6	0.3
85 and older	0	0.0	0	0	0.0	5	50.0	51	42	0.7	4	40.0	35	30	0.7
Unknown	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0.0	0

Table ND7B Nondual Beneficiaries

Source: Data for this table are from the MAX 2002 file for Idaho, released by CMS in 05/2006. This table was produced on 04/19/2007.

- a. Table ND.7B includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2002. 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 2002. 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 ND.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}
 NONDUAL BENEFICIARIES, IDAHO, 2002

Beneficiary Characteristics	ULCER DRUGS					PENICILLINS					STIMULANTS/ANTI-OBESITY/ANOREXIANTS				
	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
All	11,165	6.3 %	118,553	0.3	\$23	64,118	36.3 %	693,829	0.1	\$3	5,109	2.9 %	56,852	0.6	\$36
Female	7,688	7.8	81,745	0.3	23	35,147	35.5	377,601	0.1	3	1,508	1.5	16,815	0.5	33
Disabled	3,562	40.3	40,715	0.4	32	3,156	35.7	36,543	0.1	5	412	4.7	4,729	0.6	37
5 and younger	88	16.3	969	0.4	25	371	68.6	4,242	0.2	4	12	2.2	141	0.3	20
6-14	67	6.0	783	0.3	24	519	46.5	6,081	0.1	4	178	16.0	2,043	0.6	39
15-20	120	14.5	1,399	0.3	20	289	34.9	3,347	0.1	4	66	8.0	763	0.5	31
21-44	1,315	41.6	15,038	0.4	29	1,150	36.4	13,388	0.1	4	95	3.0	1,091	0.6	36
45-64	1,972	62.0	22,526	0.4	36	827	26.0	9,485	0.1	6	61	1.9	691	0.6	43
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	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	4,126	4.6	41,030	0.2	14	31,991	35.4	341,058	0.1	3	1,096	1.2	12,086	0.5	31
5 and younger	577	2.1	5,197	0.2	7	14,320	52.2	154,388	0.1	3	39	0.1	423	0.4	19
6-14	480	1.8	5,476	0.1	7	9,031	33.9	101,166	0.1	3	781	2.9	8,748	0.5	31
15-20	719	5.6	7,510	0.2	10	3,334	25.7	35,016	0.1	3	127	1.0	1,374	0.5	31
21-44	2,091	9.5	20,258	0.2	16	5,097	23.1	48,447	0.1	4	138	0.6	1,421	0.5	34
45-64	197	20.8	1,914	0.4	29	190	20.0	1,843	0.1	4	11	1.2	120	0.5	33
65-74	30	31.3	352	0.3	27	14	14.6	157	0.2	10	0	0.0	0	0.0	0
75-84	25	41.0	266	0.4	30	5	8.2	41	0.2	10	0	0.0	0	0.0	0
85 and older	7	26.9	57	0.6	28	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male	3,477	4.5	36,838	0.3	22	28,971	37.3	316,228	0.1	3	3,601	4.6	40,037	0.6	38
Disabled	1,646	19.9	18,566	0.4	33	2,623	31.8	30,237	0.1	5	896	10.8	10,303	0.7	45
5 and younger	105	13.2	1,154	0.3	20	533	67.0	6,073	0.2	4	28	3.5	330	0.4	26
6-14	106	5.5	1,236	0.4	33	826	42.7	9,728	0.1	4	578	29.9	6,645	0.7	44
15-20	120	10.0	1,362	0.3	30	398	33.0	4,641	0.1	5	197	16.3	2,288	0.7	49
21-44	626	25.3	7,139	0.4	32	563	22.7	6,415	0.1	5	72	2.9	793	0.6	38
45-64	687	37.3	7,651	0.4	36	302	16.4	3,368	0.1	6	21	1.1	247	1.0	71
65-74	2	100.0	24	0.5	74	1	50.0	12	0.1	1	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
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	1,831	2.6	18,272	0.2	12	26,347	38.0	285,979	0.1	3	2,705	3.9	29,734	0.6	35
5 and younger	693	2.4	6,654	0.2	7	15,966	55.5	171,839	0.1	3	114	0.4	1,264	0.4	18
6-14	381	1.4	4,308	0.2	7	8,127	29.8	90,852	0.1	3	2,173	8.0	24,035	0.6	35
15-20	280	3.1	2,979	0.2	11	1,632	17.9	17,534	0.1	3	380	4.2	4,082	0.6	38
21-44	350	9.7	3,073	0.3	22	535	14.8	4,877	0.1	4	35	1.0	322	0.5	39
45-64	94	21.9	916	0.3	28	82	19.1	819	0.1	5	3	0.7	31	0.7	54
65-74	22	34.9	235	0.4	34	3	4.8	34	0.1	4	0	0.0	0	0.0	0
75-84	8	28.6	76	0.4	36	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	3	30.0	31	0.4	28	2	20.0	24	0.2	15	0	0.0	0	0.0	0
Unknown	0	0.0	0	0.0	0	1	50.0	12	0.1	2	0	0.0	0	0.0	0

Table ND7C
 Nondual Beneficiaries

Source: Data for this table are from the MAX 2002 file for Idaho, released by CMS in 05/2006. This table was produced on 04/19/2007.

- a. Table ND.7C includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2002. 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 2002. 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 ND.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}
 NONDUAL BENEFICIARIES, IDAHO, 2002

Beneficiary Characteristics	PASSIVE IMMUNIZING AGENTS				ANTIDIABETIC				Mean Rx \$	Mean No. of Rx	No. of Bene Mos	
	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean Rx \$				
All	422	0.2 %	3,777	0.5	\$504	4,128	2.3 %	43,949	0.7	\$42	176,694	1,607,884
Female	198	0.2	1,785	0.5	536	2,964	3.0	31,519	0.7	41	99,082	878,030
Disabled	47	0.5	495	0.5	609	1,854	21.0	20,872	0.7	46	8,832	93,428
5 and younger	44	8.1	459	0.5	574	2	0.4	24	0.5	24	541	5,539
6-14	1	0.1	12	0.4	353	22	2.0	261	0.8	61	1,115	12,312
15-20	0	0.0	0	0.0	0	55	6.6	637	0.8	46	828	8,921
21-44	1	0.0	12	0.4	2,569	581	18.4	6,635	0.7	41	3,161	33,711
45-64	1	0.0	12	1.2	258	1,194	37.5	13,315	0.8	48	3,183	32,935
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	8
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	2
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Other Eligibles	151	0.2	1,290	0.5	508	1,110	1.2	10,647	0.6	33	90,250	784,602
5 and younger	149	0.5	1,271	0.5	474	11	0.0	120	0.6	29	27,418	252,756
6-14	0	0.0	0	0.0	0	104	0.4	1,171	0.7	39	26,662	263,653
15-20	0	0.0	0	0.0	0	130	1.0	1,299	0.6	33	12,950	109,284
21-44	2	0.0	19	1.2	2,793	685	3.1	6,351	0.5	30	22,088	149,988
45-64	0	0.0	0	0.0	0	117	12.3	1,026	0.7	42	949	7,227
65-74	0	0.0	0	0.0	0	34	35.4	360	0.7	43	96	956
75-84	0	0.0	0	0.0	0	27	44.3	300	0.7	40	61	521
85 and older	0	0.0	0	0.0	0	2	7.7	20	0.5	22	26	217
Male	224	0.3	1,992	0.5	475	1,164	1.5	12,430	0.7	45	77,610	729,834
Disabled	54	0.7	585	0.4	469	793	9.6	8,787	0.8	46	8,259	86,007
5 and younger	53	6.7	573	0.4	475	4	0.5	37	0.8	33	795	8,100
6-14	1	0.1	12	0.3	152	15	0.8	178	0.8	48	1,935	21,592
15-20	0	0.0	0	0.0	0	28	2.3	324	0.4	25	1,206	12,949
21-44	0	0.0	0	0.0	0	230	9.3	2,594	0.8	46	2,478	25,618
45-64	0	0.0	0	0.0	0	516	28.0	5,654	0.8	47	1,843	17,731
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	17
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Other Eligibles	170	0.2	1,407	0.5	477	371	0.5	3,643	0.7	42	69,351	643,827
5 and younger	170	0.6	1,407	0.5	477	15	0.1	155	0.7	29	28,787	264,680
6-14	0	0.0	0	0.0	0	100	0.4	1,140	0.8	44	27,291	269,255
15-20	0	0.0	0	0.0	0	61	0.7	621	0.9	62	9,123	82,182
21-44	0	0.0	0	0.0	0	103	2.8	868	0.6	38	3,619	23,575
45-64	0	0.0	0	0.0	0	65	15.1	553	0.5	34	430	3,112
65-74	0	0.0	0	0.0	0	14	22.2	168	0.5	27	63	672
75-84	0	0.0	0	0.0	0	9	32.1	108	0.6	28	28	263
85 and older	0	0.0	0	0.0	0	4	40.0	30	0.2	4	10	88
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	20

Table ND7D

Nondual Beneficiaries

Source: Data for this table are from the MAX 2002 file for Idaho, released by CMS in 05/2006. This table was produced on 04/19/2007.

- a. Table ND.7D includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2002. 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 2002. 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 ND.8
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BENEFICIARY CHARACTERISTIC^{a, b}
 NONDUAL BENEFICIARIES, IDAHO, 2002

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	\$496	8.9	178	1,677
Age				
0-64	513	9.2	141	1,356
65-74	747	10.6	10	109
75-84	321	7.4	14	115
85 and older	183	3.8	13	97
Unknown	0	0.0	0	0
Gender				
Female	494	9.1	114	1,106
Male	498	8.4	64	571
Unknown	0	0.0	0	0
Race				
White	500	9	170	1,597
African American	364	6.3	1	12
Other/unknown	416	7.6	7	68
Basis of Eligibility^c				
Aged	424	7.4	37	321
Disabled	514	9.3	140	1,352
Adults	226	5.3	1	4
Children	0	0.0	0	0
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 2002 file for Idaho, released by CMS in 05/2006. This table was produced on 04/19/2007.

a. Table ND.8 includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their 2002 Medicaid enrollment. A total of 258 beneficiaries who were in nursing facilities for part of their enrollment and their 2,523 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 ND.9
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d, e}
 NONDUAL BENEFICIARIES, IDAHO, 2002

Therapeutic Category	No. of Rx per Bene Mo among Users			\$ per Bene Mo among Users			Total # of Rx	Total Rx \$	No.	As % of All-Year NF Residents	No. of Bene Mos						
	Patented			Patented													
	Total	Off-Patent	Generic	Total	Off-Patent	Generic											
Anti-infective Agents	0.6	0.4	0.0	0.2	\$29	\$23	\$3	\$3	\$46	\$65	\$64	\$15	687	\$31,786	109	61.2 %	1,094
Biologicals	0.3	0.0	0.0	0.3	6	0	0	6	19	0	0	19	11	211	4	2.2	38
Antineoplastic Agents	0.9	0.6	0.1	0.2	401	352	20	30	444	574	176	167	56	24,890	8	4.5	62
Endocrine/Metabolic Drugs	1.5	0.8	0.4	0.3	60	46	7	7	39	54	19	21	1,416	54,984	94	52.8	917
Cardiovascular Agents	2.0	0.6	0.1	1.2	58	34	4	20	29	53	31	16	2,046	59,236	106	59.6	1,023
Respiratory Agents	0.9	0.4	0.1	0.5	41	27	4	11	46	71	62	24	728	33,730	77	43.3	819
Gastrointestinal Agents	1.3	0.5	0.0	0.8	67	48	2	17	50	100	65	20	1,230	61,920	91	51.1	923
Genitourinary Agents	0.7	0.6	0.0	0.2	43	39	0	4	59	67	0	26	323	18,941	46	25.8	439
CNS Drugs	1.9	1.0	0.1	0.8	169	137	5	27	88	130	71	34	2,789	244,253	143	80.3	1,443
Stimulants/Anti-obesity/Anorexia	0.4	0.0	0.0	0.4	11	0	0	11	27	0	0	27	15	398	3	1.7	36
Miscellaneous Psychological/Neurological Agents	0.9	0.6	0.0	0.2	76	69	0	6	88	113	0	26	42	3,711	5	2.8	49
Analgesics and Anesthetics	1.6	0.5	0.1	0.9	89	62	7	20	56	114	48	22	1,835	101,992	115	64.6	1,140
Neuromuscular Agents	1.9	0.7	0.2	1.0	118	77	13	28	60	105	66	27	2,207	133,502	108	60.7	1,132
Nutritional Products	0.9	0.0	0.0	0.9	15	0	0	15	16	0	27	16	537	8,743	58	32.6	587
Hematological Agents	0.9	0.2	0.1	0.5	84	76	2	6	95	319	20	10	314	29,899	38	21.3	355
Topical Products	0.5	0.2	0.0	0.3	16	8	1	6	32	49	35	22	471	15,172	95	53.4	973
Miscellaneous Products	0.3	0.0	0.0	0.3	6	0	0	6	19	0	0	19	32	599	10	5.6	93
Unknown Therapeutic Category	0.4	0.0	0.0	0.0	17	0	0	0	43	0	0	0	167	7,194	38	21.3	419
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.	14,906	831,161	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2002 file for Idaho, released by CMS in 05/2006. This table was produced on 04/19/2007.

a. Table ND.9 includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2002. A total of 258 beneficiaries who were in nursing facilities for part of their enrollment and their 2,523 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 2002. 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.

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 ND.10
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS,
 BY TOP-10 DRUG GROUP^{a, b, c, d}
 NONDUAL BENEFICIARIES, IDAHO, 2002

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	\$147,312	92	51.7 %	1,006	0.9	\$166	\$146
ANTICONVULSANT	104,637	116	65.2	1,257	1.2	72	83
ANTIDEPRESSANTS	83,241	150	84.3	1,528	0.9	60	54
ANALGESICS - Narcotic	75,717	139	78.1	1,321	1.1	53	57
ULCER DRUGS	52,241	113	63.5	1,189	0.7	64	44
ANTIDIABETIC	34,691	77	43.3	727	0.9	51	48
ANTINEOPLASTICS	24,890	9	5.1	74	0.8	444	336
ANTIASTHMATIC	21,637	74	41.6	761	0.6	48	28
HEMATOPOIETIC AGENTS	20,146	30	16.9	298	0.5	133	68
ANALGESICS - ANTI-INFLAMMATORY	17,560	57	32.0	656	0.5	51	27
Total	582,072	857		8,817	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2002 file for Idaho, released by CMS in 05/2006. This table was produced on 04/19/2007.

- a. Table ND.10 includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2002. A total of 258 beneficiaries who were in nursing facilities for part of their enrollment and their 2,523 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 2002. 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 2002 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 ND.10A

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR TOP 10 DRUG GROUPS COMBINED AND FIRST AND SECOND TOP DRUG GROUPS SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BOE, AND AGE^{a, b, c, d} NONDUAL BENEFICIARIES, IDAHO, 2002

Beneficiary Characteristics	All Top 10 Drug Groups						ANTIPSYCHOTICS						ANTICONVULSANT					
	No. of Rx	Rx \$	Users as %			Mean Rx \$	Mean No. of Rx	No. of Users	No. of Bene Mos among NF Residents	No. of Bene Mos among NF Residents	Users as %	Mean Rx \$	Mean No. of Rx	No. of Users	No. of Bene Mos among NF Residents	Users as %	Mean Rx \$	Mean No. of Rx
			51.7 %	61.4	60.2													
All	7,627	\$582,072	92	51.7 %	1,006	0.9	\$146	116	65.2 %	1,257	1.2	\$63						
Female	5,165	382,366	70	61.4	779	0.8	124	77	67.5	837	1.1	74						
Disabled	4,411	329,132	53	60.2	609	0.8	129	68	77.3	729	1.1	74						
64 or younger	4,411	329,132	53	60.2	609	0.8	129	68	77.3	729	1.1	74						
65-74	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0						
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0						
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0						
Other Eligibles	754	53,234	17	65.4	170	0.9	108	9	34.6	108	1.0	68						
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0						
65-74	348	29,128	6	100.0	72	0.8	147	6	100.0	72	1.1	71						
75-84	255	12,484	6	60.0	38	1.3	45	2	20.0	24	1.1	74						
85 and older	151	11,622	5	50.0	60	0.7	102	1	10.0	12	0.8	35						
Male	2,462	199,706	22	34.4	227	1.1	222	39	60.9	420	1.2	103						
Disabled	2,004	153,298	17	32.7	167	1.1	210	30	57.7	323	1.2	118						
64 or younger	2,004	153,298	17	32.7	167	1.1	210	30	57.7	323	1.2	118						
65-74	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0						
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0						
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0						
Other Eligibles	458	46,408	5	41.7	60	1.2	254	9	75.0	97	1.2	51						
64 or younger	1	8	0	0.0	0	0.0	0	0	0.0	0	0.0	0						
65-74	346	39,535	4	100.0	48	1.1	273	7	175.0	84	1.3	56						
75-84	87	6,009	1	25.0	12	1.3	181	2	50.0	13	0.5	18						
85 and older	24	856	0	0.0	0	0.0	0	0	0.0	0	0.0	0						
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 2002 file for Idaho, released by CMS in 05/2006. This table was produced on 04/19/2007.

a. Table ND.10A includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2002. A total of 258 beneficiaries who were in nursing facilities for part of their enrollment and their 2,523 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 2002. 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 2002 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 ND.10B
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY
 AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BOE, AND AGE^{a, b, c, d}
 NONDUAL BENEFICIARIES, IDAHO, 2002

Beneficiary Characteristics	ANTIDEPRESSANTS					ANALGESICS - Narcotic					ULCER DRUGS				
	Users as %					Users as %					Users as %				
	No. of Users	No. of Bene Users	Mean No. of Rx	Mean Rx \$	Mean No. of Rx	No. of Users	No. of Bene Users	Mean No. of Rx	Mean Rx \$	Mean No. of Rx	No. of Users	No. of Bene Users	Mean No. of Rx	Mean Rx \$	Mean No. of Rx
All	150	1,528	0.9	\$55	1.1	139	1,321	1.1	\$57	1.1	113	1,189	0.7	\$44	0.7
Female	99	1,030	0.9	55	1.0	99	954	1.0	53	1.0	73	769	0.7	39	0.7
Disabled	82	889	0.9	59	1.0	76	762	1.0	49	1.0	64	676	0.7	38	0.7
64 or younger	82	889	0.9	59	1.0	76	762	1.0	49	1.0	64	676	0.7	38	0.7
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	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	17	141	0.7	33	1.2	23	192	1.2	69	1.2	9	93	0.7	49	0.7
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	3	36	0.8	33	2.4	4	48	2.4	174	2.4	4	48	0.6	67	0.6
75-84	5	26	0.9	49	0.9	13	106	0.9	41	0.9	3	36	0.6	23	0.6
85 and older	9	79	0.6	28	0.5	6	38	0.5	16	0.5	2	9	1.0	58	1.0
Male	51	498	0.9	53	1.2	40	367	1.2	68	1.2	40	420	0.7	52	0.7
Disabled	44	448	1.0	51	1.0	33	307	1.0	43	1.0	37	400	0.7	54	0.7
64 or younger	44	448	1.0	51	1.0	33	307	1.0	43	1.0	37	400	0.7	54	0.7
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	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	7	50	0.8	69	2.1	7	60	2.1	191	2.1	3	20	0.3	10	0.3
64 or younger	0	0	0.0	0	0.0	1	4	0.0	2	0.0	0	0	0.0	0	0.0
65-74	2	24	0.8	85	3.0	3	36	3.0	302	3.0	0	0	0.0	0	0.0
75-84	2	13	1.1	74	0.8	2	13	0.8	21	0.8	2	13	0.2	8	0.2
85 and older	3	13	0.7	32	1.0	1	7	1.0	44	1.0	1	7	0.6	14	0.6
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 2002 file for Idaho, released by CMS in 05/2006. This table was produced on 04/19/2007.

a. Table ND.10B includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2002. A total of 258 beneficiaries who were in nursing facilities for part of their enrollment and their 2,523 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 2002. 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 2002 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 ND.10C
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY
 AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BOE, AND AGE^{a, b, c, d}
 NONDUAL BENEFICIARIES, IDAHO, 2002

Beneficiary Characteristics	ANTIDIABETIC					ANTINEOPLASTICS					ANTIASTHMATIC				
	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	77	43.3 %	727	0.9	\$48	9	5.1 %	74	0.8	\$336	74	41.6 %	761	0.6	\$28
Female	47	41.2	476	0.9	46	7	6.1	50	0.7	339	45	39.5	477	0.7	36
Disabled	45	51.1	452	0.9	48	5	5.7	43	0.7	378	42	47.7	441	0.7	38
64 or younger	45	51.1	452	0.9	48	5	5.7	43	0.7	378	42	47.7	441	0.7	38
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	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	2	7.7	24	1.0	25	2	7.7	7	0.7	102	3	11.5	36	0.2	7
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	1	16.7	12	1.1	30	0	0.0	0	0.0	0	1	16.7	12	0.2	2
75-84	1	10.0	12	1.0	20	0	0.0	0	0.0	0	2	20.0	24	0.3	10
85 and older	0	0.0	0	0.0	0	2	20.0	7	0.7	102	0	0.0	0	0.0	0
Male	30	46.9	251	1.0	50	2	3.1	24	0.9	330	29	45.3	284	0.5	16
Disabled	22	42.3	173	1.1	58	0	0.0	0	0.0	0	24	46.2	233	0.5	18
64 or younger	22	42.3	173	1.1	58	0	0.0	0	0.0	0	24	46.2	233	0.5	18
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	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	8	66.7	78	0.6	33	2	16.7	24	0.9	330	5	41.7	51	0.5	10
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	1	25.0	12	0.9	36	2	50.0	24	0.9	330	2	50.0	24	0.8	19
75-84	5	125.0	60	0.6	36	0	0.0	0	0.0	0	2	50.0	24	0.1	3
85 and older	2	66.7	6	0.5	6	0	0.0	0	0.0	0	1	33.3	3	0.3	0
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2002 file for Idaho, released by CMS in 05/2006. This table was produced on 04/19/2007.

a. Table ND.10C includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2002. A total of 258 beneficiaries who were in nursing facilities for part of their enrollment and their 2,523 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 2002. 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 2002 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 ND.10D
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR NINTH AND TENTH TOP DRUG GROUPS
 SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BOE, AND AGE^{a, b, c, d}
 NONDUAL BENEFICIARIES, IDAHO, 2002

Beneficiary Characteristics	HEMATOPOIETIC AGENTS					ANALGESICS - ANTI-INFLAMMATORY						
	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 Bene Mos among Users	No. of Bene Mos among Users	No. of Bene Mos among Users	No. of Bene Mos among Users			
All	30	16.9 %	298	0.5	\$68	57	32.0 %	656	0.5	\$27	178	1,677
Female	20	17.5	198	0.5	81	39	34.2	451	0.6	31	114	1,106
Disabled	16	18.2	150	0.5	92	34	38.6	402	0.6	31	88	883
64 or younger	16	18.2	150	0.5	92	34	38.6	402	0.6	31	88	883
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Other Eligibles	4	15.4	48	0.5	45	5	19.2	49	0.7	27	26	223
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	1	16.7	12	1.0	15	2	33.3	24	0.6	6	6	61
75-84	3	30.0	36	0.4	55	1	10.0	1	2.0	119	10	78
85 and older	0	0.0	0	0.0	0	2	20.0	24	0.7	44	10	84
Male	10	15.6	100	0.4	42	18	28.1	205	0.4	19	64	571
Disabled	9	17.3	88	0.5	48	17	32.7	204	0.4	18	52	469
64 or younger	9	17.3	88	0.5	48	17	32.7	204	0.4	18	52	469
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Other Eligibles	1	8.3	12	0.1	0	1	8.3	1	1.0	80	12	102
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	4
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	4	48
75-84	1	25.0	12	0.1	0	1	25.0	1	1.0	80	4	37
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	13
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 2002 file for Idaho, released by CMS in 05/2006. This table was produced on 04/19/2007.

a. Table ND.10D includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2002. A total of 258 beneficiaries who were in nursing facilities for part of their enrollment and their 2,523 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 2002. 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 2002 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 ND.11
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
 AMONG NONDUALS, BY BENEFICIARY CHARACTERISTIC^{a,b}
 IDAHO, 2002

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	Part D Excl Rx \$ per Bene	Total Part D Excl Rx \$	\$ per Part D Excl Rx	Part D Excl Rx \$ as % of All Nonduals Rx \$	Total No. of Benes
Age									
5 and younger	13,210	23.0	0.4	24,313	8	468,474	19	6.6	57,541
6-14	9,076	15.9	0.3	15,885	6	364,398	23	3.2	57,003
15-20	3,771	15.6	0.3	7,634	8	197,620	26	2.7	24,107
21-44	6,865	21.9	0.8	26,498	20	636,291	24	2.8	31,346
45-64	2,605	40.7	3.0	19,369	61	390,480	20	2.4	6,405
65-74	46	28.2	2.5	410	38	6,175	15	2.3	163
75-84	23	25.3	2.8	254	50	4,576	18	3.7	91
85 and older	17	47.2	2.4	86	40	1,454	17	3.0	36
Unknown	0	0.0	0.0	0	0	0	0	0.0	2
Basis of Eligibility^c									
Aged	83	31.1	2.8	744	45	12,145	16	2.8	267
Disabled	6,046	35.4	2.2	36,793	53	905,323	25	2.4	17,091
Adults	5,542	18.2	0.5	15,444	11	335,867	22	3.5	30,407
Children	23,942	18.6	0.3	41,468	6	816,133	20	4.9	128,929
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Gender									
Female	21,105	21.3	0.6	60,990	13	1,337,371	22	3.5	99,083
Male	14,508	18.7	0.4	33,459	9	732,097	22	2.8	77,611
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Race									
White	30,332	20.3	0.6	83,508	12	1,801,576	22	3.0	149,654
African American	255	15.6	0.3	481	6	10,337	21	2.9	1,633
Other/unknown	5,026	19.8	0.4	10,460	10	257,555	25	5.9	25,407
Use of Nursing Facilities^d									
Entire year	107	60.1	6.6	1,171	126	22,390	19	2.7	178
Part year	173	67.1	6.6	1,706	118	30,422	18	2.6	258
None	35,333	20.0	0.5	91,572	11	2,016,656	22	3.2	176,258
Maintenance Assistance Status									
Cash	11,810	27.5	1.2	50,397	26	1,131,536	22	2.5	42,976
Medically needy	0	0.0	0.0	0	0	0	0	0.0	0
Poverty related	19,254	17.3	0.3	33,122	6	635,904	19	5.0	111,013
Other/unknown	4,549	20.0	0.5	10,930	13	302,028	28	4.1	22,705

Table ND11

Nondual Beneficiaries

Source: Data for this table are from the MAX 2002 file for Idaho, released by CMS in 05/2006. This table was produced on 04/19/2007.

- a. Table ND.11 includes the beneficiaries represented by Cell K of Table 1. Beneficiaries include all nondual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2002.
- b. The statute establishing the Medicare Part D prescription program that started in 2006 excludes several types of drugs from coverage. State Medicaid programs have been allowed to exclude these drugs since 1990, but many states have chosen to cover them, and if states cover them for any Medicaid beneficiaries they must also cover them for dual eligibles, who as of 2006 receive the remainder of their prescription drug coverage through Part D. Excluded drugs include benzodiazepines; barbiturates; nonprescription (OTC) medications; prescription vitamins and minerals (not including prenatal vitamins and fluoride preparations); and drugs used for anorexia, weight loss, or weight gain. Other excluded drugs include those that promote fertility; those used for cosmetic purposes or hair growth, for symptomatic relief of coughs and colds; or drugs for which the manufacturer requires that associated tests or monitoring services be purchased exclusively from the manufacturer.
- c. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.
- d. Please refer to footnote f on Table 1 for methodology used to determine use of nursing facilities.
- Bene(s) = beneficiary (or beneficiaries); CMS = 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 ND.12
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
 AMONG NONDUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a,b}
 IDAHO, 2002

Beneficiary Characteristics	No. Rx per Bene Mo.	Rx \$ per Bene Mo.	\$ per Rx	Barbiturate \$ per Bene Mo.	Benzodiazepine \$ per Bene Mo.	No. of Bene Mos
All	0.1	\$1	\$22	\$0	\$0	1,607,884
Age						
5 and younger	0.0	1	19	0	0	531,075
6-14	0.0	1	23	0	0	566,812
15-20	0.0	1	26	0	0	213,336
21-44	0.1	3	24	0	1	232,892
45-64	0.3	6	20	0	3	61,005
65-74	0.2	4	15	0	2	1,653
75-84	0.3	6	18	0	3	786
85 and older	0.3	5	17	0	1	305
Unknown	0.0	0	0	0	0	20
Basis of Eligibility^c						
Aged	0.3	5	16	0	2	2,684
Disabled	0.2	5	25	0	3	179,435
Adults	0.1	2	22	0	0	206,831
Children	0.0	1	20	0	0	1,218,934
Unknown	0.0	0	0	0	0	0
Gender						
Female	0.1	2	22	0	0	878,038
Male	0.0	1	22	0	0	729,846
Unknown	0.0	0	0	0	0	0
Race						
White	0.1	1	22	0	0	1,370,203
African American	0.0	1	21	0	0	15,022
Other/unknown	0.0	1	25	0	0	222,659
Use of Nursing Facilities^d						
Entire year	0.7	13	19	0	6	1,677
Part year	0.7	12	18	0	6	2,523
None	0.1	1	22	0	0	1,603,684
Maintenance Assistance Status						
Cash	0.1	3	22	0	1	407,439
Medically needy	0.0	0	0	0	0	0
Poverty related	0.0	1	19	0	0	998,369
Other/unknown	0.1	1	28	0	0	202,076

Source: Data for this table are from the MAX 2002 file for Idaho, released by CMS in 05/2006. This table was produced on 04/19/2007.

- a. Table ND.12 includes the beneficiaries represented by Cell K of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits. Beneficiaries include all nondual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2002.
 - b. The statute establishing the Medicare Part D prescription program that started in 2006 excludes several types of drugs from coverage. State Medicaid programs have been allowed to exclude these drugs since 1990, but many states have chosen to cover them, and if states cover them for any Medicaid beneficiaries they must also cover them for dual eligibles, who as of 2006 receive the remainder of their prescription drug coverage through Part D. Excluded drugs include benzodiazepines; barbiturates; nonprescription (OTC) medications; prescription vitamins and minerals (not including prenatal vitamins and fluoride preparations); and drugs used for anorexia, weight loss, or weight gain. Other excluded drugs include those that promote fertility; those used for cosmetic purposes or hair growth, for symptomatic relief of coughs and colds; or drugs for which the manufacturer requires that associated tests or monitoring services be purchased exclusively from the manufacturer.
 - c. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.
 - d. Please refer to footnote f on Table 1 for methodology used to determine use of nursing facilities.
- Bene(s) = beneficiary (or beneficiaries); CMS = 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 ND.13
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
 FOR SELECTED DRUG CATEGORIES AMONG NONDUALS^{a,b,c}
 IDAHO, 2002

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	40,347	\$51	\$2,069,468	100.0 %	94,449	\$22	100.0 %
Anorexia or weight loss/gain	0	0	0	0.0	0	0	0.0
Fertility drugs	1	39	39	0.0	1	39	0.0
Drugs for cosmetic purposes	84	17	1,398	0.1	124	11	0.1
Cough and cold medications	26,601	41	1,094,961	52.9	47,188	23	50.0
Vitamins and minerals	4,346	41	178,646	8.6	12,492	14	13.2
Non-prescription drugs	3,640	14	51,373	2.5	5,311	10	5.6
Barbiturates	244	56	13,590	0.7	1,707	8	1.8
Benzodiazepines	4,741	124	586,035	28.3	25,443	23	26.9
Other Part D Excl Rx Drugs	690	208	143,426	6.9	2,183	66	2.3

Source: Data for this table are from the MAX 2002 file for Idaho, released by CMS in 05/2006. This table was produced on 04/19/2007.

a. Table ND.13 includes the beneficiaries represented by Cell K of Table 1. Beneficiaries include all nondual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2002. A user is a beneficiary who had at least one prescription filled for a Part D excluded drug in 2002. A beneficiary who used drugs from two or more Part D excluded categories was counted as a user for each category. Therefore, the sum of users across drug categories may exceed the total number of individual users as noted on Table ND11.

b. Includes OTC drugs as well as prescription drugs.

c. The statute establishing the Medicare Part D prescription program that started in 2006 excludes several types of drugs from coverage. State Medicaid programs have been allowed to exclude these drugs since 1990, but many states have chosen to cover them, and if states cover them for any Medicaid beneficiaries they must also cover them for dual eligibles, who as of 2006 receive the remainder of their prescription drug coverage through Part D. Excluded drugs include benzodiazepines; barbiturates; nonprescription (OTC) medications; prescription vitamins and minerals (not including prenatal vitamins and fluoride preparations); and drugs used for anorexia, weight loss, or weight gain. Other excluded drugs include those that promote fertility; those used for cosmetic purposes or hair growth, for symptomatic relief of coughs and colds; or drugs for which the manufacturer requires that associated tests or monitoring services be purchased exclusively from the manufacturer.

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

APPENDIX TABLE A.1

CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY^{a, b}
 NONDUAL BENEFICIARIES, IDAHO, 2002

Beneficiary Characteristics	No. of Benefes					No. of Bene Mos						
	All	Aged	Disabled	Adults	Children	Unknown	All	Aged	Disabled	Adults	Children	Unknown
All	176,694	267	17,091	30,407	128,929	0	1,607,884	2,684	179,435	206,831	1,218,934	0
Age												
5 and younger	57,541	0	1,336	0	56,205	0	531,075	0	13,639	0	517,436	0
6-14	57,003	0	3,050	0	53,953	0	566,812	0	33,904	0	532,908	0
15-20	24,107	0	2,034	3,384	18,689	0	213,336	0	21,870	23,220	168,246	0
21-44	31,346	0	5,639	25,630	77	0	232,892	0	59,329	173,249	314	0
45-64	6,405	0	5,026	1,376	3	0	61,005	0	50,666	10,329	10	0
65-74	163	151	4	8	0	0	1,653	1,605	25	23	0	0
75-84	91	81	2	8	0	0	786	775	2	9	0	0
85 and older	36	35	0	1	0	0	305	304	0	1	0	0
Unknown	2	0	0	0	2	0	20	0	0	0	20	0
Gender												
Female	99,083	168	8,832	26,196	63,887	0	878,038	1,664	93,428	178,951	603,995	0
Male	77,611	99	8,259	4,211	65,042	0	729,846	1,020	86,007	27,880	614,939	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	149,654	208	15,620	26,221	107,605	0	1,370,203	2,094	164,013	184,506	1,019,590	0
African American	1,633	1	117	230	1,285	0	15,022	12	1,191	1,572	12,247	0
Other/unknown	25,407	58	1,354	3,956	20,039	0	222,659	578	14,231	20,753	187,097	0
Use of Nursing Facilities^c												
Entire year	178	37	140	1	0	0	1,677	321	1,352	4	0	0
Part year	258	17	227	7	7	0	2,523	132	2,260	52	79	0
None	176,258	213	16,724	30,399	128,922	0	1,603,684	2,231	175,823	206,775	1,218,855	0
Maintenance Assistance Status												
Cash	42,976	109	15,815	9,619	17,433	0	407,439	1,218	165,587	74,428	166,206	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0
Poverty related	111,013	0	1	11,386	99,626	0	998,369	0	2	60,107	938,260	0
Other/unknown	22,705	158	1,275	9,402	11,870	0	202,076	1,466	13,846	72,296	114,468	0
Managed Care Status												
FFS all year	176,694	267	17,091	30,407	128,929	0	1,607,884	2,684	179,435	206,831	1,218,934	0
FFS part year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
FFS part year, no Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
MC all year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
MC all year, no Rx claims	0	0	0	0	0	0	0	0	0	0	0	0

Source: Data for this table are from the MAX 2002 file for Idaho, released by CMS in 05/2006. This table was produced on 04/19/2007.

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

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

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

Bene 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.2
MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS^a
NONDUAL BENEFICIARIES, IDAHO, 2002

	Bene Mos in Cell J of Table 1		Included in Cell K of Table 1		Excluded from Cell K of Table 1	
	No. of Benes	No. of Bene Mos	No. of Benes	No. of Bene Mos	No. of Benes	No. of Bene Mos
All	176,694	1,607,884	176,694	1,607,884	0	0
FFS all year	176,694	1,607,884	176,694	1,607,884	0	0
FFS part year, with Rx claims	0	0	0	0	0	0
FFS part year, with no Rx claims	0	0	0	0	0	0
MC all year, with Rx claims	0	0	0	0	0	0
MC all year, with no Rx claims	0	0	0	0	0	0

Source: Data for this table are from the MAX 2002 file for Idaho, released by CMS in 05/2006. This table was produced on 04/19/2007.

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.