

# STATISTICAL COMPENDIUM: MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2003 NORTH DAKOTA

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TABLE ND.2

CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY<sup>a,b</sup>  
 NONDUAL BENEFICIARIES, NORTH DAKOTA, 2003

Beneficiary Characteristics	Number of Beneficiaries							Number of Benefit Months											
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown	
<b>All</b>	<b>60,458</b>	<b>303</b>	<b>4,575</b>	<b>18,666</b>	<b>36,914</b>	<b>0</b>	<b>506,810</b>	<b>2,999</b>	<b>46,209</b>	<b>141,242</b>	<b>316,360</b>	<b>0</b>	<b>506,810</b>	<b>2,999</b>	<b>46,209</b>	<b>141,242</b>	<b>316,360</b>	<b>0</b>	
<b>Age</b>																			
5 and younger	15,481	0	186	0	15,295	0	129,595	0	1,895	0	127,700	0	129,595	0	1,895	0	127,700	0	0
6-14	15,665	0	506	0	15,159	0	142,303	0	5,334	0	136,969	0	142,303	0	5,334	0	136,969	0	0
15-20	7,982	0	423	1,383	6,176	0	65,256	0	4,348	10,512	50,396	0	65,256	0	4,348	10,512	50,396	0	0
21-44	17,767	0	1,607	15,876	284	0	138,424	0	16,693	120,436	1,295	0	138,424	0	16,693	120,436	1,295	0	0
45-64	3,250	1	1,843	1,406	0	0	28,147	12	17,853	10,282	0	0	28,147	12	17,853	10,282	0	0	0
65-74	169	158	10	1	0	0	1,751	1,653	86	12	0	0	1,751	1,653	86	12	0	0	0
75-84	91	91	0	0	0	0	875	875	0	0	0	0	875	875	0	0	0	0	0
85 and older	53	53	0	0	0	0	459	459	0	0	0	0	459	459	0	0	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>Gender</b>																			
Female	34,961	200	2,364	14,277	18,120	0	292,788	1,932	24,137	111,910	154,809	0	292,788	1,932	24,137	111,910	154,809	0	0
Male	25,495	103	2,211	4,389	18,792	0	214,020	1,067	22,072	29,332	161,549	0	214,020	1,067	22,072	29,332	161,549	0	0
Unknown	2	0	0	0	2	2	0	0	0	0	2	0	0	0	0	0	2	0	0
<b>Race</b>																			
White	42,122	225	3,431	13,341	25,125	0	347,932	2,209	34,759	99,358	211,606	0	347,932	2,209	34,759	99,358	211,606	0	0
African American	1,435	12	92	369	962	0	11,721	86	861	2,693	8,081	0	11,721	86	861	2,693	8,081	0	0
Other/unknown	16,901	66	1,052	4,956	10,827	0	147,157	704	10,589	39,191	96,673	0	147,157	704	10,589	39,191	96,673	0	0
<b>Use of Nursing Facilities<sup>c</sup></b>																			
Entire year	136	56	79	1	0	0	1,366	547	814	5	0	0	1,366	547	814	5	0	0	0
Part year	117	22	88	3	4	0	1,115	224	834	26	31	0	1,115	224	834	26	31	0	0
None	60,205	225	4,408	18,662	36,910	0	504,329	2,228	44,561	141,211	316,329	0	504,329	2,228	44,561	141,211	316,329	0	0
<b>Maintenance Assistance Status</b>																			
Cash	26,479	163	3,953	8,376	13,987	0	223,652	1,809	41,899	60,638	119,306	0	223,652	1,809	41,899	60,638	119,306	0	0
Medically needy	4,510	113	621	1,571	2,205	0	28,675	987	4,307	7,992	15,389	0	28,675	987	4,307	7,992	15,389	0	0
Poverty-related	8,604	27	1	829	7,747	0	67,458	203	3	4,746	62,506	0	67,458	203	3	4,746	62,506	0	0
Other/unknown	20,865	0	0	7,890	12,975	0	187,025	0	0	67,866	119,159	0	187,025	0	0	67,866	119,159	0	0
<b>Managed Care (MC) Status</b>																			
Fee-for-service (FFS) all year	59,630	303	4,572	18,330	36,425	0	504,039	2,999	46,195	140,207	314,638	0	504,039	2,999	46,195	140,207	314,638	0	0
FFS part year, with Rx claims	439	0	2	207	230	0	1,651	0	13	688	950	0	1,651	0	13	688	950	0	0
FFS part year, no Rx claims	389	0	1	129	259	0	1,120	0	1	347	772	0	1,120	0	1	347	772	0	0

Table ND2

Nondual Beneficiaries

Source: Data for this table are from the MAX 2003 file for North Dakota, released by CMS in 05/2007. This table was produced on 11/01/2007.

- 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 = Centers for Medicare & Medicaid Services; FFS = fee-for-service pharmacy benefit; MAX = Medicaid Analytic Extract; Rx = pharmacy benefit.

TABLE ND.3

ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC<sup>a, b</sup>  
NONDUAL BENEFICIARIES, NORTH DAKOTA, 2003

Beneficiary Characteristics	Percentage with at Least One Rx	Mean Number of Rx	Mean Rx \$	\$ per Rx	Mean \$, All Medicaid FFS \$ <sup>c</sup>	Rx \$ as a Percentage of All Medicaid FFS \$ <sup>d</sup>	Number of Beneficiaries
All	59.7 %	7.0	\$364	\$52	\$2,950	12.3 %	60,458
<b>Age</b>							
5 and younger	60.2	3.1	104	34	1,673	6.2	15,481
6-14	53.6	4.3	231	54	1,820	12.7	15,665
15-20	57.5	5.9	342	58	3,373	10.1	7,982
21-44	63.7	8.9	472	53	3,678	12.8	17,767
45-64	69.0	27.4	1,567	57	8,245	19.0	3,250
65-74	73.4	36.9	1,995	54	13,940	14.3	169
75-84	73.6	39.4	1,629	41	14,672	11.1	91
85 and older	84.9	40.8	1,719	42	21,669	7.9	53
Unknown	0.0	0.0	0	0	0	0.0	0
<b>Basis of Eligibility<sup>e</sup></b>							
Aged	74.9	37.8	1,783	47	15,427	11.6	303
Disabled	77.9	30.6	2,054	67	16,188	12.7	4,575
Adults	62.3	7.2	311	43	2,000	15.6	18,666
Children	56.0	3.7	170	46	1,686	10.1	36,914
Unknown	0.0	0.0	0	0	0	0.0	0
<b>Gender</b>							
Female	63.0	7.8	382	49	2,785	13.7	34,961
Male	55.2	5.8	339	59	3,175	10.7	25,495
Unknown	0.0	0.0	0	0	1,238	0.0	2
<b>Race</b>							
White	63.2	7.8	416	53	3,056	13.6	42,122
African American	61.6	5.5	261	47	1,858	14.0	1,435
Other/unknown	50.7	5.0	244	49	2,776	8.8	16,901
<b>Use of Nursing Facilities<sup>f</sup></b>							
Entire year	97.1	70.2	3,966	57	49,883	7.9	136
Part year	97.4	54.1	2,816	52	44,185	6.4	117
None	59.5	6.7	351	52	2,763	12.7	60,205
<b>Maintenance Assistance Status</b>							
Cash	59.7	9.0	511	57	3,832	13.3	26,479
Medically needy	47.6	8.2	421	51	5,771	7.3	4,510
Poverty related	54.1	3.1	128	41	1,031	12.4	8,604
Other/unknown	64.6	5.7	263	46	2,010	13.1	20,865

Table ND3

Nondual Beneficiaries

Source: Data for this table are from the MAX 2003 file for North Dakota, released by CMS in 05/2007. This table was produced on 11/01/2007.

- 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. In seven states (DE, IA, NE, NY, TX, UT, and WV) the expenditures in this column include only Rx drug expenditures for those enrolled in capitated managed care plans, and not expenditures for other services covered by the plans or long-term-care services not covered by the plans. As a result, the amounts shown in this column for all Medicaid fee-for-service expenditures are lower than they would otherwise be.
  - d. In seven states (DE, IA, NE, NY, TX, UT, and WV) the Rx share of expenditures for all Medicaid services shown in this column is higher than it would be if all expenditures for these other services, including services provided in capitated managed care plans and long-term-care services, were included.
  - e. 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.
  - f. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.
- Bene(s) = beneficiary (or beneficiaries); CMS = Centers for Medicare & Medicaid Services; FFS = fee-for-service; 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<sup>a,b</sup>  
 NONDUAL BENEFICIARIES, NORTH DAKOTA, 2003

Beneficiary Characteristics	Mean Number of Rx	Mean Rx \$	Rx \$ as a Percentage of		Number of Rx, Percentage with:							Mean \$, All Medicaid FFS <sup>d</sup>	Beneficiaries	Benefit Months
			All Medicaid FFS <sup>c</sup>	All Medicaid FFS <sup>c</sup>	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	0.8	\$43	12.3 %	40.3 %	46.0 %	6.1 %	5.4 %	1.8 %	0.4 %	\$352	60,458	506,810		
<b>Age</b>														
5 and younger	0.4	12	6.2	39.8	56.4	2.9	0.8	0.1	0.0	200	15,481	129,595		
6-14	0.5	25	12.7	46.4	45.3	4.4	3.5	0.4	0.0	200	15,665	142,303		
15-20	0.7	42	10.1	42.5	44.3	6.7	5.6	0.7	0.1	413	7,982	65,256		
21-44	1.1	61	12.8	36.3	43.1	9.4	8.1	2.6	0.4	472	17,767	138,424		
45-64	3.2	181	19.0	31.0	22.9	9.2	19.6	13.2	4.1	952	3,250	28,147		
65-74	3.6	193	14.3	26.6	18.3	8.3	24.3	15.4	7.1	1,346	169	1,751		
75-84	4.1	169	11.1	26.4	15.4	8.8	23.1	17.6	8.8	1,526	91	875		
85 and older	4.7	199	7.9	15.1	11.3	13.2	22.6	30.2	7.5	2,502	53	459		
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0		
<b>Basis of Eligibility<sup>e</sup></b>														
Aged	3.8	180	11.6	25.1	16.2	9.2	23.4	18.8	7.3	1,559	303	2,999		
Disabled	3.0	203	12.7	22.1	26.0	11.5	23.0	14.0	3.5	1,603	4,575	46,209		
Adults	1.0	41	15.6	37.7	44.6	8.9	6.9	1.6	0.3	264	18,666	141,242		
Children	0.4	20	10.1	44.0	49.5	3.9	2.3	0.2	0.0	197	36,914	316,360		
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0		
<b>Gender</b>														
Female	0.9	46	13.7	37.0	47.6	6.8	5.9	2.1	0.5	333	34,961	292,788		
Male	0.7	40	10.7	44.8	43.9	5.0	4.7	1.3	0.3	378	25,495	214,020		
Unknown	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	1,238	2	2		
<b>Race</b>														
White	0.9	50	13.6	36.8	47.8	6.7	6.2	2.0	0.5	370	42,122	347,932		
African American	0.7	32	14.0	38.4	49.8	6.2	4.0	1.4	0.2	227	1,435	11,721		
Other/unknown	0.6	28	8.8	49.3	41.4	4.4	3.6	1.1	0.2	319	16,901	147,157		
<b>Use of Nursing Facilities<sup>f</sup></b>														
Entire year	7.0	395	7.9	2.9	3.7	8.1	22.8	45.6	16.9	4,966	136	1,366		
Part year	5.7	296	6.4	2.6	10.3	13.7	29.1	33.3	11.1	4,637	117	1,115		
None	0.8	42	12.7	40.5	46.2	6.0	5.3	1.6	0.3	330	60,205	504,329		
<b>Maintenance Assistance Status</b>														
Cash	1.1	61	13.3	40.3	43.0	6.3	6.9	2.9	0.7	454	26,479	223,652		
Medically needy	1.3	66	7.3	52.4	28.8	6.9	7.9	3.2	0.9	908	4,510	28,675		
Poverty related	0.4	16	12.4	45.9	48.6	3.7	1.6	0.2	0.0	131	8,604	67,458		
Other/unknown	0.6	29	13.1	35.4	52.6	6.6	4.6	0.7	0.1	224	20,865	187,025		

Source: Data for this table are from the MAX 2003 file for North Dakota, released by CMS in 05/2007. This table was produced on 11/01/2007.

- 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. In seven states (DE, IA, NE, NY, TX, UT, and WV) the expenditures in this column include only Rx drug expenditures for those enrolled in capitated managed care plans, and not expenditures for other services covered by the plans or long-term-care services not covered by the plans. As a result, the amounts shown in this column for all Medicaid fee-for-service expenditures are lower than they would otherwise be.
  - d. In seven states (DE, IA, NE, NY, TX, UT, and WV) the Rx share of expenditures for all Medicaid services shown in this column is higher than it would be if all expenditures for these other services, including services provided in capitated managed care plans and long-term-care services, were included.
  - e. 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.
  - f. 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 = Centers for Medicare & Medicaid Services; FFS = fee-for-service; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.



TABLE ND.5  
 AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, NORTH DAKOTA, 2003

Beneficiary	All Rx			Patented Brand-Name Drugs			Off-Patent Brand-Name Drugs			Generic Drugs		
	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx
<b>All</b>	<b>0.8</b>	<b>\$43</b>	<b>\$52</b>	<b>0.4</b>	<b>\$34</b>	<b>\$88</b>	<b>0.0</b>	<b>\$2</b>	<b>\$48</b>	<b>0.4</b>	<b>\$8</b>	<b>\$19</b>
<b>Age</b>												
5 and younger	0.4	12	34	0.2	9	56	0.0	1	42	0.2	3	15
6-14	0.5	25	54	0.3	21	80	0.0	1	57	0.2	4	19
15-20	0.7	42	58	0.4	34	91	0.0	1	51	0.3	7	21
21-44	1.1	61	53	0.5	48	94	0.0	2	40	0.6	11	19
45-64	3.2	181	57	1.4	139	99	0.1	8	62	1.6	34	21
65-74	3.6	193	54	1.7	154	89	0.1	6	38	1.7	33	20
75-84	4.1	169	41	1.8	133	74	0.2	4	22	2.1	33	15
85 and older	4.7	199	42	2.1	162	76	0.2	5	27	2.4	32	13
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Basis of Eligibility<sup>d</sup></b>												
Aged	3.8	180	47	1.8	145	81	0.1	3	24	1.9	32	17
Disabled	3.0	203	67	1.4	162	115	0.1	8	62	1.5	33	22
Adults	1.0	41	43	0.4	31	77	0.0	1	32	0.5	8	17
Children	0.4	20	46	0.2	16	72	0.0	1	50	0.2	3	17
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Gender</b>												
Female	0.9	46	49	0.4	35	83	0.0	2	43	0.5	9	18
Male	0.7	40	59	0.3	33	95	0.0	1	59	0.3	6	20
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Race</b>												
White	0.9	50	53	0.5	40	88	0.0	2	46	0.4	8	19
African American	0.7	32	47	0.3	26	83	0.0	1	44	0.3	5	15
Other/unknown	0.6	28	49	0.2	21	88	0.0	1	62	0.3	6	19
<b>Use of Nursing Facilities<sup>e</sup></b>												
Entire year	7.0	395	57	3.0	302	102	0.3	11	34	3.7	82	22
Part year	5.7	296	52	2.4	228	93	0.2	7	27	3.0	61	20
None	0.8	42	52	0.4	33	87	0.0	2	49	0.4	7	19
<b>Maintenance Assistance Status</b>												
Cash	1.1	61	57	0.5	47	98	0.0	2	56	0.5	11	20
Medically needy	1.3	66	51	0.6	53	84	0.1	2	35	0.6	11	19
Poverty related	0.4	16	41	0.2	12	65	0.0	1	44	0.2	3	16
Other/unknown	0.6	29	46	0.3	23	75	0.0	1	37	0.3	5	17

Source: Data for this table are from the MAX 2003 file for North Dakota, released by CMS in 05/2007. This table was produced on 11/01/2007.

- 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 North Dakota, 1.5 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all combined. For information about this classification method, see Wolters Kluwer Health, <http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).
- 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 = Centers for Medicare & 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<sup>a, b, c, d</sup>  
 NONDUAL BENEFICIARIES, NORTH DAKOTA, 2003

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				Users <sup>e</sup>								
	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total Number of Rx	Total Rx \$	Number of Users	Percentage of All Benes	As a Percentage	Number of Benefit Months			
															Patented Brand-Name	Off-Patent Brand-Name	Generic
Anti-infective Agents	0.2	0.1	0.0	0.1	\$10	\$7	\$0	\$3	\$38	\$62	\$65	\$19	63,007	\$2,415,424	25,084	41.5 %	252,951
Biologicals	0.2	0.1	0.0	0.0	114	84	1	28	635	583	152	1,091	167	106,067	86	0.1	933
Antineoplastic Agents	0.5	0.2	0.0	0.3	118	101	1	16	219	573	61	46	873	190,764	158	0.3	1,612
Endocrine/Metabolic Drugs	0.5	0.2	0.1	0.2	20	14	2	4	40	62	25	20	42,206	1,675,026	8,365	13.8	84,550
Cardiovascular Agents	0.9	0.3	0.0	0.6	28	19	0	8	29	58	21	14	37,949	1,117,015	3,942	6.5	40,244
Respiratory Agents	0.4	0.2	0.0	0.2	16	13	0	3	45	67	47	17	52,488	2,338,150	14,117	23.4	145,114
Gastrointestinal Agents	0.4	0.2	0.0	0.2	31	25	1	6	75	108	165	31	16,817	1,265,716	3,978	6.6	40,499
Genitourinary Agents	0.2	0.2	0.0	0.1	11	10	0	1	46	56	33	16	4,913	223,767	2,094	3.5	21,212
CNS Drugs	0.8	0.5	0.0	0.3	64	55	2	7	76	111	121	20	73,486	5,580,355	8,729	14.4	87,603
Stimulants/Anti-obesity/Anorexia	0.6	0.5	0.0	0.2	42	35	1	6	65	77	52	35	19,676	1,281,947	2,878	4.8	30,328
Miscellaneous Psychological/Neurological Agents	0.2	0.2	0.0	0.1	47	43	0	4	192	224	0	72	518	99,372	210	0.3	2,126
Analgesics and Anesthetics	0.4	0.1	0.0	0.3	17	13	0	4	42	112	56	14	43,166	1,798,139	10,520	17.4	104,734
Neuromuscular Agents	0.7	0.4	0.0	0.3	52	44	2	6	78	122	50	24	29,385	2,299,073	4,295	7.1	44,298
Nutritional Products	0.3	0.0	0.0	0.3	5	0	0	5	16	31	15	15	6,460	100,667	1,937	3.2	19,254
Hematological Agents	0.6	0.2	0.1	0.4	81	74	1	6	137	482	20	16	3,862	529,423	652	1.1	6,551
Topical Products	0.2	0.1	0.0	0.1	6	4	0	2	32	55	50	17	24,220	771,143	11,757	19.4	121,302
Miscellaneous Products	0.3	0.1	0.0	0.1	42	28	8	6	160	187	262	74	787	125,661	282	0.5	2,969
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	7	0	0	0	44	0	0	0	1,894	82,818	1,085	1.8	11,341
<b>TOTAL NO. OF RX AND RX \$</b>	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	421,874	22,000,527	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2003 file for North Dakota, released by CMS in 05/2007. This table was produced on 11/01/2007.

a. Table ND.6 includes the beneficiaries represented by Cell K of Table 1. 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.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

d. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In North Dakota, 1.5 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.

For information about this classification method, see Wolters Kluwer Health, <http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

e. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 2003.

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & 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<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, NORTH DAKOTA, 2003

Top 10 Drug Groups	Users			Among Users		
	Total Medicaid Rx \$	Number of Users	As a Percentage of All Beneficiaries	Number of Benefit Months	Number of Rx per Benefit Month	Rx \$ per Benefit Month
ANTIPSYCHOTICS	\$2,753,122	2,438	4.0 %	26,128	0.6	\$164
ANTIDEPRESSANTS	2,475,005	9,213	15.2	93,880	0.5	56
ANTICONVULSANT	2,053,925	2,806	4.6	30,003	0.7	95
ANTIASTHMATIC	1,335,671	8,470	14.0	87,595	0.3	53
STIMULANTS/ANTI-OBESITY/ANOREXIANTS	1,278,828	3,609	6.0	38,703	0.5	65
ULCER DRUGS	1,007,293	3,535	5.8	36,240	0.3	80
ANALGESICS - Narcotic	814,520	11,460	19.0	117,251	0.2	29
ANALGESICS - ANTI-INFLAMMATORY	651,851	5,596	9.3	57,510	0.2	54
ANTIDIABETIC	610,642	1,517	2.5	15,808	0.7	56
MACROLIDE ANTIBIOTICS	547,328	10,044	16.6	105,430	0.1	38
<b>Total</b>	<b>13,528,185</b>	<b>58,688</b>		<b>608,548</b>	<b>n.a.</b>	<b>n.a.</b>

Source: Data for this table are from the MAX 2003 file for North Dakota, released by CMS in 05/2007. This table was produced on 11/01/2007.

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 2003. 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 2003. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispn.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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

TABLE ND.7A  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS COMBINED  
 AND FIRST AND SECOND GROUPS SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, NORTH DAKOTA, 2003

Beneficiary Characteristics	All Top 10 Drug Groups					ANTIPSYCHOTICS					ANTIDEPRESSANTS				
	Number of Rx	Rx \$	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx \$ per Benefit Month	
<b>All</b>	<b>204,804</b>	<b>\$13,528,185</b>	<b>2,438</b>	<b>4.0 %</b>	<b>26,128</b>	<b>0.6</b>	<b>9,213</b>	<b>15.2 %</b>	<b>93,880</b>	<b>0.5</b>	<b>\$26</b>				
<b>Female</b>															
<b>Disabled</b>	126,278	7,814,173	1,267	3.6	13,472	0.6	6,555	18.7	66,642	0.5	26				
5 and younger	44,224	3,537,425	613	25.9	6,796	0.8	1,332	56.3	14,684	0.6	35				
6-14	335	29,172	2	2.5	20	0.5	2	2.5	20	0.3	15				
15-20	1,412	97,738	27	16.9	320	0.6	35	21.9	406	0.7	24				
21-44	1,943	159,497	32	18.0	353	0.6	58	32.6	642	0.4	22				
45-64	15,201	1,280,790	255	30.9	2,769	0.7	533	64.6	5,834	0.6	34				
65-74	25,005	1,940,601	290	26.0	3,252	1.0	701	62.9	7,746	0.7	37				
75-84	328	29,627	7	87.5	82	1.5	3	37.5	36	0.9	43				
85 and older	0	0	0	0.0	0	0.0	0	0.0	0	0.0	0				
<b>Other Eligibles</b>	0	0	0	0.0	0	0.0	0	0.0	0	0.0	0				
<b>Other Eligibles</b>	82,054	4,276,748	654	2.0	6,676	0.4	5,223	16.0	51,958	0.4	23				
5 and younger	5,604	231,757	6	0.1	62	0.5	25	0.3	282	0.3	18				
6-14	12,581	732,390	129	1.7	1,334	0.5	504	6.7	5,451	0.4	21				
15-20	10,581	592,761	163	3.8	1,674	0.5	803	18.8	8,045	0.4	23				
21-44	44,968	2,246,361	309	2.5	3,153	0.3	3,530	28.7	34,668	0.4	23				
45-64	5,517	299,580	26	2.9	235	0.4	291	32.7	2,783	0.5	29				
65-74	1,475	94,163	7	7.3	84	1.4	31	32.3	369	0.5	32				
75-84	812	48,873	8	12.7	83	0.9	23	36.5	210	0.8	32				
85 and older	516	30,863	6	14.6	51	0.5	16	39.0	150	0.6	29				
<b>Male</b>															
<b>Disabled</b>	78,526	5,714,012	1,171	4.6	12,656	0.7	2,658	10.4	27,238	0.5	28				
5 and younger	29,271	2,679,379	553	25.0	6,207	0.8	741	33.5	8,264	0.6	34				
6-14	672	47,440	3	2.8	22	0.4	1	0.9	12	0.4	28				
15-20	3,889	317,365	96	27.7	1,083	0.6	117	33.8	1,359	0.5	23				
21-44	3,196	292,340	78	31.8	869	0.7	95	38.8	1,079	0.6	37				
45-64	10,605	1,117,585	222	28.4	2,502	0.8	288	36.8	3,212	0.6	33				
65-74	10,877	903,761	152	20.9	1,725	0.9	240	32.9	2,602	0.7	41				
75-84	32	888	2	100.0	6	1.2	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				
<b>Other Eligibles</b>	0	0	0	0.0	0	0.0	0	0.0	0	0.0	0				
<b>Other Eligibles</b>	49,255	3,034,633	618	2.7	6,449	0.6	1,917	8.2	18,974	0.5	25				
5 and younger	7,632	336,641	11	0.1	104	0.2	28	0.4	303	0.3	10				
6-14	21,119	1,377,224	303	4.0	3,305	0.5	752	9.8	7,922	0.5	21				
15-20	9,749	675,912	223	6.8	2,254	0.6	555	16.9	5,501	0.5	31				
21-44	7,547	423,724	50	1.3	447	0.4	452	11.7	3,943	0.4	26				
45-64	1,613	100,769	10	1.9	95	0.3	85	16.5	801	0.4	24				
65-74	935	74,048	12	19.0	136	0.8	26	41.3	298	0.5	29				
75-84	415	33,316	6	21.4	72	0.7	9	32.1	108	0.8	39				
85 and older	245	12,999	3	25.0	36	1.0	10	83.3	98	0.8	38				
<b>Unknown</b>	0	0	0	0.0	0	0.0	0	0.0	0	0.0	0				

Source: Data for this table are from the MAX 2003 file for North Dakota, released by CMS in 05/2007. This table was produced on 11/01/2007.

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 2003. 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 2003. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispain.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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

TABLE ND.7B  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY,  
 BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a,b,c</sup>  
 NONDUAL BENEFICIARIES, NORTH DAKOTA, 2003

Beneficiary Characteristics	ANTICONVULSANT					ANTIASTHMATIC					STIMULANTS/ANTI-OBESITY/ANOREXICANTS				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx \$ per Benefit Month	Mean Number of Rx per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx \$ per Benefit Month	Mean Number of Rx per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx \$ per Benefit Month	Mean Number of Rx per Benefit Month
<b>All</b>	<b>2,806</b>	<b>4.6 %</b>	<b>30,003</b>	<b>0.7</b>	<b>\$69</b>	<b>8,470</b>	<b>14.0 %</b>	<b>87,995</b>	<b>0.3</b>	<b>\$15</b>	<b>3,609</b>	<b>6.0 %</b>	<b>38,703</b>	<b>0.5</b>	<b>\$33</b>
<b>Female</b>	1,643	4.7	17,513	0.7	63	4,881	14.0	50,408	0.3	15	1,244	3.6	13,588	0.5	30
<b>Disabled</b>	754	31.9	8,435	0.8	81	922	39.0	10,193	0.4	26	120	5.1	1,376	0.5	38
5 and younger	15	19.0	172	0.8	107	39	49.4	435	0.2	11	1	1.3	8	0.1	2
6-14	42	26.3	490	0.8	65	42	26.3	478	0.2	18	43	26.9	491	0.6	35
15-20	64	36.0	730	0.9	94	51	28.7	577	0.4	22	12	6.7	135	0.7	24
21-44	324	39.3	3,608	0.9	96	298	36.1	3,261	0.4	21	35	4.2	405	0.5	48
45-64	307	27.6	3,411	0.7	63	488	43.8	5,394	0.5	31	29	2.6	337	0.5	36
65-74	2	25.0	24	1.6	116	4	50.0	48	1.2	50	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
<b>Other Eligibles</b>	889	2.7	9,078	0.5	47	3,959	12.1	40,215	0.3	12	1,124	3.4	12,212	0.5	29
5 and younger	41	0.6	438	0.5	40	1,041	14.0	10,658	0.2	9	33	0.4	369	0.4	24
6-14	150	2.0	1,670	0.7	55	745	9.9	7,986	0.3	15	732	9.8	8,084	0.5	28
15-20	115	2.7	1,144	0.6	66	476	11.1	4,750	0.2	11	166	3.9	1,775	0.5	33
21-44	502	4.1	5,080	0.4	41	1,494	12.2	14,798	0.3	12	175	1.4	1,799	0.4	31
45-64	63	7.1	551	0.6	41	136	15.3	1,331	0.4	20	17	1.9	173	0.5	45
65-74	7	7.3	84	0.8	40	28	29.2	321	0.7	43	0	0.0	0	0.0	0
75-84	6	9.5	60	0.9	72	22	34.9	220	0.5	28	0	0.0	0	0.0	0
85 and older	5	12.2	51	0.9	35	17	41.5	151	0.4	18	1	2.4	12	0.1	1
<b>Male</b>	1,163	4.6	12,490	0.8	76	3,589	14.1	37,187	0.3	16	2,365	9.3	25,115	0.5	35
<b>Disabled</b>	611	27.6	6,849	0.9	91	542	24.5	5,891	0.5	29	262	11.8	2,947	0.6	44
5 and younger	12	11.2	129	1.2	115	68	63.6	730	0.4	29	5	4.7	59	0.2	12
6-14	87	25.1	986	0.8	83	79	22.8	907	0.3	23	160	46.2	1,778	0.6	41
15-20	82	33.5	939	0.9	87	50	20.4	543	0.4	26	62	25.3	717	0.7	54
21-44	277	35.4	3,113	1.0	107	113	14.5	1,275	0.4	23	25	3.2	292	0.5	47
45-64	152	20.9	1,676	0.9	69	229	31.4	2,418	0.6	36	10	1.4	101	0.5	30
65-74	1	50.0	6	0.2	11	3	150.0	18	1.1	19	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
<b>Other Eligibles</b>	552	2.4	5,641	0.6	57	3,047	13.1	31,296	0.2	13	2,103	9.0	22,168	0.5	33
5 and younger	43	0.5	443	0.6	47	1,450	18.5	14,982	0.2	11	112	1.4	1,247	0.4	22
6-14	249	3.3	2,715	0.6	58	965	12.6	10,299	0.3	13	1,573	20.5	16,685	0.5	33
15-20	136	4.1	1,354	0.7	60	304	9.3	3,029	0.3	15	376	11.5	3,847	0.5	38
21-44	92	2.4	808	0.5	49	249	6.4	2,243	0.3	13	33	0.9	303	0.4	28
45-64	19	3.7	172	0.4	38	39	7.6	319	0.4	15	7	1.4	62	0.3	24
65-74	10	15.9	113	1.1	163	21	33.3	228	0.5	21	1	1.6	12	0.1	1
75-84	2	7.1	24	1.1	19	11	39.3	132	0.7	98	0	0.0	0	0.0	0
85 and older	1	8.3	12	0.3	25	8	66.7	64	0.4	41	1	8.3	12	0.8	16
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Table ND7B

Nondual Beneficiaries

Source: Data for this table are from the MAX 2003 file for North Dakota, released by CMS in 05/2007. This table was produced on 11/01/2007.

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 2003. 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 2003. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispain.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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



TABLE ND.7C

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY,  
 BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a,b,c</sup>  
 NONDUAL BENEFICIARIES, NORTH DAKOTA, 2003

Beneficiary Characteristics	ULCER DRUGS				ANALGESICS - Narcotic				ANALGESICS - ANTI-INFLAMMATORY						
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx \$ per Benefit Month			
<b>All</b>	<b>3,535</b>	<b>5.8 %</b>	<b>36,240</b>	<b>0.3</b>	<b>\$28</b>	<b>11,460</b>	<b>19.0 %</b>	<b>117,251</b>	<b>0.2</b>	<b>\$7</b>	<b>5,596</b>	<b>9.3 %</b>	<b>57,510</b>	<b>0.2</b>	<b>\$11</b>
<b>Female</b>	2,482	7.1	25,796	0.3	27	8,670	24.8	89,305	0.2	6	4,154	11.9	42,804	0.2	12
<b>Disabled</b>	718	30.4	7,969	0.5	42	1,352	57.2	14,878	0.4	18	740	31.3	8,249	0.4	28
5 and younger	16	20.3	168	0.2	15	7	8.9	75	0.1	1	4	5.1	44	0.1	1
6-14	18	11.3	212	0.3	12	19	11.9	224	0.1	1	11	6.9	112	0.2	3
15-20	31	17.4	343	0.4	18	55	30.9	594	0.2	6	28	15.7	321	0.3	20
21-44	222	26.9	2,449	0.5	39	547	66.3	6,026	0.4	20	277	33.6	3,073	0.3	17
45-64	428	38.4	4,761	0.5	47	723	64.9	7,947	0.4	18	420	37.7	4,699	0.4	38
65-74	3	37.5	36	0.7	66	1	12.5	12	0.8	14	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
<b>Other Eligibles</b>	1,764	5.4	17,827	0.3	20	7,318	22.4	74,427	0.2	4	3,414	10.5	34,555	0.2	8
5 and younger	159	2.1	1,412	0.2	7	199	2.7	2,170	0.1	1	160	2.2	1,716	0.1	1
6-14	106	1.4	1,142	0.1	10	378	5.0	4,154	0.1	1	211	2.8	2,282	0.1	8
15-20	212	5.0	2,184	0.2	12	1,053	24.6	10,637	0.2	2	525	12.3	5,237	0.1	4
21-44	1,069	8.7	10,856	0.3	22	5,265	42.9	53,251	0.2	4	2,246	18.3	22,624	0.2	7
45-64	148	16.6	1,478	0.4	36	346	38.8	3,405	0.4	11	218	24.5	2,103	0.3	15
65-74	33	34.4	392	0.4	27	36	37.5	416	0.2	4	30	31.3	337	0.4	37
75-84	21	33.3	227	0.7	52	21	33.3	213	0.3	5	12	19.0	136	0.4	30
85 and older	16	39.0	136	0.5	29	20	48.8	181	0.6	31	12	29.3	120	0.5	38
<b>Male</b>	1,053	4.1	10,444	0.4	30	2,790	10.9	27,946	0.2	9	1,442	5.7	14,706	0.2	11
<b>Disabled</b>	401	18.1	4,377	0.6	43	633	28.6	6,845	0.3	19	313	14.2	3,423	0.3	24
5 and younger	18	16.8	185	0.6	32	8	7.5	91	0.1	1	10	9.3	106	0.1	1
6-14	19	5.5	227	0.5	31	40	11.6	461	0.1	1	12	3.5	144	0.2	2
15-20	18	7.3	212	0.5	34	39	15.9	436	0.2	5	18	7.3	206	0.3	18
21-44	142	18.2	1,575	0.5	42	239	30.6	2,606	0.4	19	120	15.3	1,307	0.3	23
45-64	203	27.8	2,175	0.6	46	306	42.0	3,245	0.4	23	152	20.9	1,654	0.4	29
65-74	1	50.0	3	0.7	12	1	50.0	6	0.2	1	1	50.0	6	0.3	3
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
<b>Other Eligibles</b>	652	2.8	6,067	0.3	21	2,157	9.3	21,101	0.2	6	1,129	4.8	11,283	0.2	7
5 and younger	158	2.0	1,338	0.2	8	301	3.8	3,219	0.1	1	194	2.5	2,049	0.1	1
6-14	93	1.2	1,043	0.2	12	359	4.7	3,856	0.1	1	171	2.2	1,919	0.1	3
15-20	72	2.2	720	0.2	16	388	11.8	3,863	0.1	2	264	8.1	2,668	0.1	4
21-44	252	6.5	2,204	0.3	31	922	23.8	8,435	0.3	8	403	10.4	3,673	0.2	12
45-64	43	8.3	397	0.4	32	157	30.4	1,393	0.3	21	67	13.0	642	0.3	14
65-74	24	38.1	260	0.5	30	21	33.3	244	0.4	39	19	30.2	216	0.3	14
75-84	6	21.4	67	0.5	52	6	21.4	58	0.5	18	6	21.4	69	0.6	45
85 and older	4	33.3	38	0.8	15	3	25.0	33	0.3	14	5	41.7	47	0.5	58
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Table ND7C

Nondual Beneficiaries

Source: Data for this table are from the MAX 2003 file for North Dakota, released by CMS in 05/2007. This table was produced on 11/01/2007.

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 2003. 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 2003. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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

TABLE ND.7D  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR NINTH AND TENTH TOP DRUG GROUPS  
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, NORTH DAKOTA, 2003

Beneficiary Characteristics	ANTIDIABETIC				MACROLIDE ANTIBIOTICS						
	Number of Users	Users as % of All Beneficiaries	Number of Benefit Months Among Users	Mean of Rx Benefit per Month	Number of Users	Users as % of All Beneficiaries	Number of Benefit Months Among Users	Mean of Rx Benefit per Month	Number of Beneficiaries	Number of Benefit Months	
<b>All</b>	<b>1,517</b>	<b>2.5 %</b>	<b>15,808</b>	<b>\$39</b>	<b>10,044</b>	<b>16.6 %</b>	<b>105,430</b>	<b>0.1</b>	<b>\$5</b>	<b>60,458</b>	<b>506,810</b>
<b>Female</b>	1,077	3.1	11,310	39	6,234	17.8	65,238	0.1	5	34,961	292,788
<b>Disabled</b>	531	22.5	5,852	41	522	22.1	5,962	0.1	6	2,364	24,137
5 and younger	2	2.5	24	13	28	35.4	321	0.2	5	79	824
6-14	0	0.0	0	0	30	18.8	330	0.1	5	160	1,635
15-20	14	7.9	145	44	38	21.3	436	0.1	6	178	1,799
21-44	114	13.8	1,250	40	201	24.4	2,286	0.1	6	825	8,648
45-64	397	35.6	4,385	42	224	20.1	2,579	0.1	6	1,114	11,154
65-74	4	50.0	48	30	1	12.5	10	0.2	9	8	77
75-84	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
<b>Other Eligibles</b>	546	1.7	5,458	36	5,712	17.5	59,276	0.1	5	32,597	268,651
5 and younger	6	0.1	46	32	1,598	21.5	16,644	0.1	5	7,441	61,568
6-14	16	0.2	183	47	1,086	14.5	11,741	0.1	5	7,500	67,733
15-20	34	0.8	349	42	710	16.6	7,200	0.1	5	4,281	34,535
21-44	329	2.7	3,252	36	2,156	17.6	22,056	0.1	6	12,284	96,245
45-64	93	10.4	861	27	137	15.4	1,359	0.1	6	891	6,638
65-74	43	44.8	496	51	12	12.5	144	0.1	9	96	999
75-84	14	22.2	147	30	9	14.3	89	0.1	5	63	579
85 and older	11	26.8	124	26	4	9.8	43	0.1	4	41	354
<b>Male</b>	440	1.7	4,498	39	3,810	14.9	40,192	0.1	5	25,495	214,020
<b>Disabled</b>	242	10.9	2,575	41	317	14.3	3,572	0.1	7	2,211	22,072
5 and younger	1	0.9	12	98	43	40.2	478	0.2	5	107	1,071
6-14	1	0.3	10	183	78	22.5	891	0.1	5	346	3,699
15-20	3	1.2	31	46	34	13.9	376	0.1	6	245	2,549
21-44	53	6.8	573	39	75	9.6	872	0.1	8	782	8,045
45-64	184	25.2	1,949	41	87	11.9	955	0.1	8	729	6,699
65-74	0	0.0	0	0	0	0.0	0	0.0	0	2	9
75-84	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
<b>Other Eligibles</b>	198	0.9	1,923	35	3,493	15.0	36,620	0.1	5	23,284	191,948
5 and younger	3	0.0	28	19	1,832	23.3	19,270	0.1	5	7,852	66,130
6-14	28	0.4	316	33	974	12.7	10,445	0.1	5	7,659	69,236
15-20	16	0.5	147	43	342	10.4	3,583	0.1	5	3,278	26,373
21-44	81	2.1	776	30	293	7.6	2,781	0.1	6	3,876	25,486
45-64	39	7.6	332	41	42	8.1	421	0.1	4	516	3,656
65-74	21	33.3	223	48	6	9.5	72	0.1	4	63	666
75-84	6	21.4	69	14	3	10.7	36	0.1	3	28	296
85 and older	4	33.3	32	30	1	8.3	12	0.2	8	12	105
<b>Unknown</b>	0	0.0	0	0	0	0.0	0	0.0	0	2	2

Table ND7D

Nondual Beneficiaries

Source: Data for this table are from the MAX 2003 file for North Dakota, released by CMS in 05/2007. This table was produced on 11/01/2007.

- 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 2003. 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 2003. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & 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<sup>a, b</sup>  
 NONDUAL BENEFICIARIES, NORTH DAKOTA, 2003

Beneficiary Characteristics	Rx \$ per Benefit Month	Number of Rx per Benefit Month	Benefit Month	Number of All-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents
<b>All</b>	<b>\$395</b>	<b>7.0</b>	<b>136</b>	<b>1,366</b>	
<b>Age</b>					
0-64	454	7.4	78	795	
65-74	355	6.5	12	133	
75-84	313	6.3	21	224	
85 and older	287	6.4	25	214	
Unknown	0	0.0	0	0	
<b>Gender</b>					
Female	368	7.1	78	764	
Male	429	6.9	58	602	
Unknown	0	0.0	0	0	
<b>Race</b>					
White	390	6.9	113	1,132	
African American	533	9.9	3	25	
Other/unknown	406	7	20	209	
<b>Basis of Eligibility<sup>c</sup></b>					
Aged	316	6.4	56	547	
Disabled	450	7.4	79	814	
Adults	70	9.8	1	5	
Children	0	0.0	0	0	
Unknown	0	0.0	0	0	

Source: Data for this table are from the MAX 2003 file for North Dakota, released by CMS in 05/2007. This table was produced on 11/01/2007.

a. Table ND.8 includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their 2003 Medicaid enrollment. A total of 117 beneficiaries who were in nursing facilities for part of their enrollment and their 1,115 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 = Centers for Medicare & 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<sup>a, b, c, d, e</sup>  
 NONDUAL BENEFICIARIES, NORTH DAKOTA, 2003

Therapeutic Category	Number of Rx per Benefit Month Among Users			\$ per Benefit Month Among Users			\$ per Rx			Users						
	Total	Patented Brand-Name	Off-Patent Brand-Name	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total Number of Rx	Total Rx \$	Number of Users	As a Percentage of All-Year Nursing Facility Residents	
															Residents	Months
Anti-infective Agents	0.4	0.2	0.0	0.1	\$28	\$23	\$1	\$4	\$73	\$103	\$69	\$26	\$28,266	99	72.8	%
Biologicals	0.1	0.0	0.0	0.1	2	0	0	2	25	0	0	25	25	1	0.7	
Antineoplastic Agents	1.0	0.4	0.0	0.6	462	278	0	184	470	668	0	324	27,727	5	3.7	
Endocrine/Metabolic Drugs	1.1	0.5	0.1	0.5	41	31	2	7	38	65	21	15	22,851	57	41.9	
Cardiovascular Agents	1.9	0.6	0.0	1.3	48	31	0	17	25	54	5	13	41,467	86	63.2	
Respiratory Agents	1.1	0.7	0.0	0.4	65	55	0	10	58	81	36	23	40,133	60	44.1	
Gastrointestinal Agents	1.3	0.4	0.0	0.8	70	45	2	22	56	102	105	29	45,546	64	47.1	
Genitourinary Agents	1.0	0.7	0.0	0.2	65	57	2	6	68	80	36	30	16,006	27	19.9	
CNS Drugs	1.9	1.0	0.1	0.8	139	119	4	15	74	123	63	18	138,747	97	71.3	
Stimulants/Anti-obesity/Anorexia	0.9	0.1	0.0	0.8	24	8	0	16	26	74	0	19	1,493	6	4.4	
Miscellaneous Psychological/Neurological Agents	0.8	0.8	0.0	0.0	97	97	0	0	115	115	0	0	3,107	3	2.2	
Analgesics and Anesthetics	0.9	0.5	0.0	0.4	49	42	0	6	52	82	23	16	27,855	57	41.9	
Neuromuscular Agents	1.7	0.8	0.2	0.8	137	105	5	27	79	132	30	34	115,076	77	56.6	
Nutritional Products	0.8	0.0	0.0	0.8	12	0	0	12	14	5	0	14	4,488	37	27.2	
Hematological Agents	1.3	0.2	0.2	0.9	38	24	4	9	29	119	19	11	11,857	32	23.5	
Topical Products	0.5	0.2	0.0	0.3	17	9	2	6	35	56	43	22	14,485	80	58.8	
Miscellaneous Products	0.1	0.0	0.0	0.1	2	1	0	1	14	46	0	7	83	5	3.7	
Unknown Therapeutic Category	0.5	0.0	0.0	0.0	7	0	0	0	16	0	0	0	97	2	1.5	
<b>TOTAL NO. OF RX AND RX \$</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>539,309</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>

Source: Data for this table are from the MAX 2003 file for North Dakota, released by CMS in 05/2007. This table was produced on 11/01/2007.

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 2003. A total of 117 beneficiaries who were in nursing facilities for part of their enrollment and their 1,115 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 2003. 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.medispan.com/marketing/ContentPage.aspx?contentid=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

In North Dakota, 1.5 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.

Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & 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<sup>a, b, c, d</sup>  
 NONDUAL BENEFICIARIES, NORTH DAKOTA, 2003

Top 10 Drug Groups in Nursing Facilities	Users				Among Users		
	Number of Users	As a Percentage of All-Year Nursing Facility Residents	Number of Benefit Months	Number of Rx per Benefit Month	\$ per Rx	Rx \$ per Benefit Month	
ANTICONVULSANT	90	66.2 %	1,000	1.1	\$88	\$96	
ANTIPSYCHOTICS	53	39.0	548	1.1	139	148	
ANTIDEPRESSANTS	99	72.8	995	0.9	57	54	
ULCER DRUGS	62	45.6	635	0.8	71	56	
ANTIASTHMATIC	72	52.9	741	0.7	66	45	
ANTINEOPLASTICS	6	4.4	72	0.8	470	385	
MUSCULOSKELETAL THERAPY AGENTS	18	13.2	190	1.1	75	85	
ANTIHYPERTENSIVE	20	14.7	215	0.9	82	75	
ANALGESICS - ANTI-INFLAMMATORY	31	22.8	308	0.7	68	47	
ANALGESICS - Narcotic	51	37.5	507	0.5	44	24	
Total	502		5,211	n.a.	n.a.	n.a.	

Source: Data for this table are from the MAX 2003 file for North Dakota, released by CMS in 05/2007. This table was produced on 11/01/2007.

- 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 2003. A total of 117 beneficiaries who were in nursing facilities for part of their enrollment and their 1,115 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 2003. 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 2003 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medspan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).
- Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & 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, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c, d</sup> NONDUAL BENEFICIARIES, NORTH DAKOTA, 2003

Beneficiary Characteristics	All Top 10 Drug Groups					ANTICONVULSANT					ANTIPSYCHOTICS				
	Number of Rx	Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$			
<b>All</b>	<b>4,576</b>	<b>\$385,492</b>	<b>90</b>	<b>66.2 %</b>	<b>1,000</b>	<b>1.1</b>	<b>\$96</b>	<b>53</b>	<b>39.0 %</b>	<b>548</b>	<b>1.1</b>	<b>\$148</b>			
<b>Female</b>	2,424	191,977	49	62.8	546	1.0	83	27	34.6	273	1.2	106			
<b>Disabled</b>	1,790	143,997	38	86.4	437	1.0	90	17	38.6	184	1.4	106			
64 or younger	1,710	138,963	36	85.7	413	0.9	89	16	38.1	172	1.3	109			
65-74	80	5,034	2	100.0	24	1.6	116	1	50.0	12	2.2	57			
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0			
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0			
<b>Other Eligibles</b>	634	47,980	11	32.4	109	1.0	55	10	29.4	89	0.8	107			
64 or younger	5	95	1	100.0	5	0.2	1	1	100.0	5	0.8	18			
65-74	57	7,244	1	50.0	12	1.0	11	0	0.0	0	0.0	0			
75-84	274	22,316	5	41.7	48	1.0	86	5	41.7	57	1.0	144			
85 and older	298	18,325	4	21.1	44	1.0	38	4	21.1	27	0.4	44			
<b>Male</b>	2,152	193,515	41	70.7	454	1.2	111	26	44.8	275	0.9	189			
<b>Disabled</b>	1,525	141,212	35	100.0	382	1.3	126	15	42.9	151	1.1	255			
64 or younger	1,525	141,212	35	100.0	382	1.3	126	15	42.9	151	1.1	255			
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			
<b>Other Eligibles</b>	627	52,303	6	26.1	72	1.0	28	11	47.8	124	0.8	109			
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0			
65-74	266	22,466	4	50.0	48	1.0	33	6	75.0	64	0.7	127			
75-84	255	23,526	2	22.2	24	1.1	19	4	44.4	48	0.8	109			
85 and older	106	6,311	0	0.0	0	0.0	0	1	16.7	12	1.0	9			
<b>Unknown</b>	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0			

Source: Data for this table are from the MAX 2003 file for North Dakota, released by CMS in 05/2007. This table was produced on 11/01/2007.

- 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 2003. A total of 117 beneficiaries who were in nursing facilities for part of their enrollment and their 1,115 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 2003. 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 2003 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispans.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).
- Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & 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, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c, d</sup>  
 NONDUAL BENEFICIARIES, NORTH DAKOTA, 2003

Beneficiary Characteristics	ANTIDEPRESSANTS					ULCER DRUGS					ANTI-ASTHMATIC				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
<b>All</b>	<b>99</b>	<b>72.8 %</b>	<b>995</b>	<b>0.9</b>	<b>\$54</b>	<b>62</b>	<b>45.6 %</b>	<b>635</b>	<b>0.8</b>	<b>\$56</b>	<b>72</b>	<b>52.9 %</b>	<b>741</b>	<b>0.7</b>	<b>\$45</b>
<b>Female</b>	51	65.4	519	1.0	44	30	38.5	300	0.9	69	35	44.9	335	0.5	29
<b>Disabled</b>	35	79.5	398	0.9	44	14	31.8	159	0.9	83	18	40.9	191	0.7	35
64 or younger	34	81.0	386	1.0	45	13	31.0	147	0.9	79	18	42.9	191	0.7	35
65-74	1	50.0	12	0.2	10	1	50.0	12	1.1	122	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
<b>Other Eligibles</b>	16	47.1	121	1.0	44	16	47.1	141	0.7	54	17	50.0	144	0.4	21
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	0	0.0	0	0.0	0	1	50.0	12	1.0	104	0	0.0	0	0.0	0
75-84	8	66.7	62	1.1	52	4	33.3	37	1.0	82	7	58.3	66	0.5	27
85 and older	8	42.1	59	0.8	35	11	57.9	92	0.6	37	10	52.6	78	0.3	16
<b>Male</b>	48	82.8	476	0.9	64	32	55.2	335	0.7	45	37	63.8	406	0.8	58
<b>Disabled</b>	29	82.9	271	0.9	68	19	54.3	197	0.9	58	24	68.6	270	0.9	46
64 or younger	29	82.9	271	0.9	68	19	54.3	197	0.9	58	24	68.6	270	0.9	46
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
<b>Other Eligibles</b>	19	82.6	205	0.9	59	13	56.5	138	0.5	25	13	56.5	136	0.6	81
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	9	112.5	100	0.9	65	6	75.0	64	0.4	15	2	25.0	24	0.1	2
75-84	6	66.7	72	1.0	56	4	44.4	48	0.4	45	5	55.6	60	0.9	140
85 and older	4	66.7	33	0.9	43	3	50.0	26	0.7	13	6	100.0	52	0.5	48
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2003 file for North Dakota, released by CMS in 05/2007. This table was produced on 11/01/2007.

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 2003. A total of 117 beneficiaries who were in nursing facilities for part of their enrollment and their 1,115 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 2003. 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 2003 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0ffed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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

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, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c, d</sup>  
 NONDUAL BENEFICIARIES, NORTH DAKOTA, 2003

Beneficiary Characteristics	ANTINEOPLASTICS					MUSCULOSKELETAL THERAPY AGENTS					ANTHYPERLIPIDEMIC				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
<b>All</b>	<b>6</b>	<b>4.4 %</b>	<b>72</b>	<b>0.8</b>	<b>\$385</b>	<b>18</b>	<b>13.2 %</b>	<b>190</b>	<b>1.1</b>	<b>\$85</b>	<b>20</b>	<b>14.7 %</b>	<b>215</b>	<b>0.9</b>	<b>\$75</b>
<b>Female</b>	4	5.1	48	0.9	541	13	16.7	130	1.3	99	12	15.4	127	0.8	67
<b>Disabled</b>	2	4.5	24	0.7	861	13	29.5	130	1.3	99	9	20.5	108	0.8	69
64 or younger	2	4.8	24	0.7	861	13	31.0	130	1.3	99	9	21.4	108	0.8	69
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
<b>Other Eligibles</b>	2	5.9	24	1.1	221	0	0.0	0	0.0	0	3	8.8	19	0.8	54
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	2	100.0	24	1.1	221	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	2	16.7	16	0.8	59
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	5.3	3	0.7	28
<b>Male</b>	2	3.4	24	0.7	74	5	8.6	60	0.9	54	8	13.8	88	1.0	86
<b>Disabled</b>	2	5.7	24	0.7	74	5	14.3	60	0.9	54	4	11.4	48	1.1	84
64 or younger	2	5.7	24	0.7	74	5	14.3	60	0.9	54	4	11.4	48	1.1	84
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
<b>Other Eligibles</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	4	17.4	40	1.0	89
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	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	37.5	28	1.0	77
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	11.1	12	1.0	119
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2003 file for North Dakota, released by CMS in 05/2007. This table was produced on 11/01/2007.

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 2003. A total of 117 beneficiaries who were in nursing facilities for part of their enrollment and their 1,115 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 2003. 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 2003 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & 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, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c, d</sup> NONDUAL BENEFICIARIES, NORTH DAKOTA, 2003

Beneficiary Characteristics	ANALGESICS - ANTI-INFLAMMATORY				ANALGESICS - Narcotic				Benefit Months Among All-Nursing Facility Residents		
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users		Mean Number of Rx	Mean Rx \$
<b>All</b>	<b>31</b>	<b>22.8 %</b>	<b>308</b>	<b>0.7</b>	<b>\$47</b>	<b>51</b>	<b>37.5 %</b>	<b>507</b>	<b>0.5</b>	<b>\$24</b>	<b>1,366</b>
<b>Female</b>	22	28.2	208	0.6	44	35	44.9	340	0.5	23	764
<b>Disabled</b>	14	31.8	134	0.6	30	18	40.9	194	0.6	14	455
64 or younger	14	33.3	134	0.6	30	18	42.9	194	0.6	14	431
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	24
75-84	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
<b>Other Eligibles</b>	8	23.5	74	0.8	69	17	50.0	146	0.5	35	309
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	5
65-74	1	50.0	9	0.8	63	0	0.0	0	0.0	0	21
75-84	1	8.3	12	1.0	84	3	25.0	18	0.2	3	116
85 and older	6	31.6	53	0.7	67	14	73.7	128	0.6	40	167
<b>Male</b>	9	15.5	100	0.8	55	16	27.6	167	0.5	25	602
<b>Disabled</b>	4	11.4	45	0.8	31	9	25.7	91	0.6	17	359
64 or younger	4	11.4	45	0.8	31	9	25.7	91	0.6	17	359
65-74	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
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0
<b>Other Eligibles</b>	5	21.7	55	0.8	75	7	30.4	76	0.4	36	243
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0
65-74	1	12.5	12	1.0	85	4	50.0	40	0.4	51	88
75-84	2	22.2	24	0.6	47	3	33.3	36	0.5	19	108
85 and older	2	33.3	19	0.9	103	0	0.0	0	0.0	0	47
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0

Source: Data for this table are from the MAX 2003 file for North Dakota, released by CMS in 05/2007. This table was produced on 11/01/2007.

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 2003. A total of 117 beneficiaries who were in nursing facilities for part of their enrollment and their 1,115 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 2003. 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 2003 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & 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<sup>a,b</sup>  
 NORTH DAKOTA, 2003

Beneficiary Characteristics	Number of Beneficiaries with at Least One Part D Excluded Rx		Percentage of Beneficiaries with at Least One Part D Excluded Rx		Number of Part D Excluded Rx per Beneficiary	Total Number Part D Excluded Rx		Total Part D Excluded Rx \$	\$ per Part D Excluded Rx	Part D Excluded Rx as a Percentage of All Nondual Rx \$		Total Number of Beneficiaries
	D Excluded Rx	at Least One Part D Excluded Rx	Excluded Rx	at Least One Part D Excluded Rx		Excluded Rx	Beneficiary			Excluded Rx \$	Excluded Rx	
All	11,636	19.2 %	35,887	0.6	\$12	\$754,202	\$21	3.4 %	60,458			
<b>Age</b>												
5 and younger	3,043	19.7	6,604	0.4	8	125,591	19	7.8	15,481			
6-14	2,243	14.3	4,432	0.3	8	129,947	29	3.6	15,665			
15-20	1,257	15.7	2,845	0.4	13	107,115	38	3.9	7,982			
21-44	3,874	21.8	12,941	0.7	14	240,959	19	2.9	17,767			
45-64	1,086	33.4	7,940	2.4	42	137,940	17	2.7	3,250			
65-74	69	40.8	604	3.6	43	7,333	12	2.2	169			
75-84	43	47.3	323	3.5	40	3,653	11	2.5	91			
85 and older	21	39.6	198	3.7	31	1,664	8	1.8	53			
Unknown	0	0.0	0	0.0	0	0	0	0.0	0			
<b>Basis of Eligibility<sup>c</sup></b>												
Aged	129	42.6	1,080	3.6	40	12,111	11	2.2	303			
Disabled	1,725	37.7	12,512	2.7	72	328,347	26	3.5	4,575			
Adults	3,779	20.2	10,441	0.6	9	173,408	17	3.0	18,666			
Children	6,003	16.3	11,854	0.3	7	240,336	20	3.8	36,914			
Unknown	0	0.0	0	0.0	0	0	0	0.0	0			
<b>Gender</b>												
Female	7,518	21.5	23,896	0.7	14	500,335	21	3.7	34,961			
Male	4,118	16.2	11,991	0.5	10	253,867	21	2.9	25,495			
Unknown	0	0.0	0	0.0	0	0	0	0.0	2			
<b>Race</b>												
White	7,814	18.6	24,677	0.6	13	550,878	22	3.1	42,122			
African American	363	25.3	790	0.6	7	9,584	12	2.6	1,435			
Other/unknown	3,459	20.5	10,420	0.6	11	193,740	19	4.7	16,901			
<b>Use of Nursing Facilities<sup>d</sup></b>												
Entire year	74	54.4	804	5.9	124	16,850	21	3.1	136			
Part year	80	68.4	522	4.5	66	7,704	15	2.3	117			
None	11,482	19.1	34,561	0.6	12	729,648	21	3.5	60,205			
<b>Maintenance Assistance Status</b>												
Cash	5,909	22.3	22,662	0.9	18	478,181	21	3.5	26,479			
Medically needy	742	16.5	3,144	0.7	18	79,030	25	4.2	4,510			
Poverty related	1,241	14.4	2,175	0.3	4	33,845	16	3.1	8,604			
Other/unknown	3,744	17.9	7,906	0.4	8	163,146	21	3.0	20,865			

Table ND11

Nondual Beneficiaries

Source: Data for this table are from the MAX 2003 file for North Dakota, released by CMS in 05/2007. This table was produced on 11/01/2007.

- 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 2003.
- 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 = Centers for Medicare & 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<sup>a,b</sup>  
 NORTH DAKOTA, 2003

Beneficiary Characteristics	Number Rx per Benefit Month	Rx \$ per Benefit Month	\$ per Rx	Barbiturate \$ per Benefit Month	Benzodiazepine \$ per Benefit Month	Number of Benefit Months
All	0.1	\$1	\$21	\$0	\$0	506,810
<b>Age</b>						
5 and younger	0.1	1	19	0	0	129,595
6-14	0.0	1	29	0	0	142,303
15-20	0.0	2	38	0	0	65,256
21-44	0.1	2	19	0	0	138,424
45-64	0.3	5	17	0	2	28,147
65-74	0.3	4	12	0	1	1,751
75-84	0.4	4	11	0	1	875
85 and older	0.4	4	8	0	0	459
Unknown	0.0	0	0	0	0	0
<b>Basis of Eligibility<sup>c</sup></b>						
Aged	0.4	4	11	0	1	2,999
Disabled	0.3	7	26	0	2	46,209
Adults	0.1	1	17	0	0	141,242
Children	0.0	1	20	0	0	316,360
Unknown	0.0	0	0	0	0	0
<b>Gender</b>						
Female	0.1	2	21	0	0	292,788
Male	0.1	1	21	0	0	214,020
Unknown	0.0	0	0	0	0	2
<b>Race</b>						
White	0.1	2	22	0	0	347,932
African American	0.1	1	12	0	0	11,721
Other/unknown	0.1	1	19	0	0	147,157
<b>Use of Nursing Facilities<sup>d</sup></b>						
Entire year	0.6	12	21	1	7	1,366
Part year	0.5	7	15	0	2	1,115
None	0.1	1	21	0	0	504,329
<b>Maintenance Assistance Status</b>						
Cash	0.1	2	21	0	0	223,652
Medically needy	0.1	3	25	0	1	28,675
Poverty related	0.0	1	16	0	0	67,458
Other/unknown	0.0	1	21	0	0	187,025

Source: Data for this table are from the MAX 2003 file for North Dakota, released by CMS in 05/2007. This table was produced on 11/01/2007.

- 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 2003.
- 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 = Centers for Medicare & 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<sup>a,b,c</sup>  
NORTH DAKOTA, 2003

Drug Category	Number of Users	Rx \$ per User	Rx \$ as a Percentage of All Part D		Total Number Rx.	\$ per Rx	Number Rx as a Percentage of All Part D Excluded Rx
			Total Rx \$	Excluded Rx \$			
<b>All</b>	<b>14,373</b>	<b>\$52</b>	<b>\$754,202</b>	<b>100.0 %</b>	<b>35,887</b>	<b>\$21</b>	<b>100.0 %</b>
Anorexia or weight loss/gain	0	0	0	0.0	0	0	0.0
Fertility drugs	1	47	47	0.0	1	47	0.0
Drugs for cosmetic purposes	46	15	671	0.1	64	10	0.2
Cough and cold medications	7,357	39	285,926	37.9	12,847	22	35.8
Vitamins and minerals	571	107	61,172	8.1	2,626	23	7.3
Non-prescription drugs	4,197	48	199,935	26.5	9,503	21	26.5
Barbiturates	114	101	11,564	1.5	1,099	11	3.1
Benzodiazepines	1,843	77	142,119	18.8	9,069	16	25.3
Other Part D Excl Rx Drugs	244	216	52,768	7.0	678	78	1.9

Source: Data for this table are from the MAX 2003 file for North Dakota, released by CMS in 05/2007. This table was produced on 11/01/2007.

- 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 2003. A user is a beneficiary who had at least one prescription filled for a Part D excluded drug in 2003. 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 = Centers for Medicare & 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<sup>a, b</sup>  
 NONDUAL BENEFICIARIES, NORTH DAKOTA, 2003

Beneficiary Characteristics	Number of Beneficiaries					Number of Benefit Months					
	All	Aged	Disabled	Adults	Unknown	All	Aged	Disabled	Adults	Unknown	
<b>All</b>	<b>61,080</b>	<b>303</b>	<b>4,575</b>	<b>18,911</b>	<b>0</b>	<b>516,476</b>	<b>2,999</b>	<b>46,213</b>	<b>144,990</b>	<b>322,274</b>	<b>0</b>
<b>Age</b>											
5 and younger	15,635	0	186	0	15,449	132,029	0	1,895	0	130,134	0
6-14	15,837	0	506	0	15,331	144,982	0	5,335	0	139,647	0
15-20	8,039	0	423	1,391	6,225	66,259	0	4,348	10,741	51,170	0
21-44	17,999	0	1,607	16,106	286	141,871	0	16,695	123,853	1,323	0
45-64	3,257	1	1,843	1,413	0	28,250	12	17,854	10,384	0	0
65-74	169	158	10	1	0	1,751	1,653	86	12	0	0
75-84	91	91	0	0	0	875	875	0	0	0	0
85 and older	53	53	0	0	0	459	459	0	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0
<b>Gender</b>											
Female	35,333	200	2,364	14,461	18,308	298,583	1,932	24,141	114,830	157,680	0
Male	25,745	103	2,211	4,450	18,981	217,891	1,067	22,072	30,160	164,592	0
Unknown	2	0	0	0	2	0	0	0	0	2	0
<b>Race</b>											
White	42,599	225	3,431	13,533	25,410	354,936	2,209	34,761	102,188	215,778	0
African American	1,448	12	92	370	974	11,915	86	861	2,726	8,242	0
Other/unknown	17,033	66	1,052	5,008	10,907	149,625	704	10,591	40,076	98,254	0
<b>Use of Nursing Facilities<sup>c</sup></b>											
Entire year	136	56	79	1	0	1,366	547	814	5	0	0
Part year	117	22	88	3	4	1,115	224	834	26	31	0
None	60,827	225	4,408	18,907	37,287	513,995	2,228	44,565	144,959	322,243	0
<b>Maintenance Assistance Status</b>											
Cash	26,767	163	3,953	8,493	14,158	228,283	1,809	41,902	62,503	122,069	0
Medically needy	4,528	113	621	1,575	2,219	29,035	987	4,308	8,103	15,637	0
Poverty related	8,654	27	1	832	7,794	68,414	203	3	4,797	63,411	0
Other/unknown	21,131	0	0	8,011	13,120	190,744	0	0	69,587	121,157	0
<b>Managed Care (MC) Status</b>											
Fee-for-service (FFS) all year	59,630	303	4,572	18,330	36,425	504,039	2,999	46,195	140,207	314,638	0
FFS part year, with Rx claims	439	0	2	207	230	4,023	0	16	1,839	2,168	0
FFS part year, no Rx claims	389	0	1	129	259	2,665	0	2	808	1,855	0
MC all year, with Rx claims	398	0	0	172	226	4,054	0	0	1,698	2,356	0
MC all year, no Rx claims	224	0	0	73	151	1,695	0	0	438	1,257	0

Source: Data for this table are from the MAX 2003 file for North Dakota, released by CMS in 05/2007. This table was produced on 11/01/2007.

- 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 = Centers for Medicare & 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<sup>a</sup>  
 NONDUAL BENEFICIARIES, NORTH DAKOTA, 2003

	Beneficiaries and		
	Benefit Months in Cell J of Table 1 Number of Beneficiaries	Included in Cell K of Table 1 Number of Beneficiaries	Excluded from Cell K of Table 1 Number of Beneficiaries
<b>All</b>	<b>61,080</b>	<b>60,458</b>	<b>0</b>
Fee-for-service (FFS) all year	59,630	59,630	0
FFS part year, with Rx claims	439	439	0
FFS part year, with no Rx claims	389	389	0
Managed care (MC) all year, with Rx claims	398	0	0
MC all year, with no Rx claims	224	0	0
	<b>516,476</b>	<b>506,810</b>	<b>9,666</b>
	504,039	504,039	0
	4,023	1,651	2,372
	2,665	1,120	1,545
	4,054	0	4,054
	1,695	0	1,695

Source: Data for this table are from the MAX 2003 file for North Dakota, released by CMS in 05/2007. This table was produced on 11/01/2007.

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

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