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**STATISTICAL COMPENDIUM:
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2005
IDAHO**

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TABLE ND.2
CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a, b}
NONDUAL BENEFICIARIES, IDAHO, 2005

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown
All	201,907	461	19,674	34,237	147,535	0	1,853,031	4,905	205,762	245,842	1,396,522	0
Age												
5 and younger	64,328	0	1,573	0	62,755	0	589,999	0	16,141	0	573,858	0
6-14	65,665	0	3,992	0	61,673	0	655,928	0	44,368	0	611,560	0
15-20	28,723	0	2,549	3,124	23,050	0	260,231	0	27,310	21,979	210,942	0
21-44	35,333	1	5,961	29,317	54	0	272,308	11	62,413	209,729	155	0
45-64	7,538	183	5,582	1,771	2	0	71,576	2,059	55,426	14,086	5	0
65-74	209	179	17	13	0	0	2,049	1,913	104	32	0	0
75-84	83	72	0	11	0	0	741	726	0	15	0	0
85 and older	27	26	0	1	0	0	197	196	0	1	0	0
Unknown	1	0	0	0	1	0	2	0	0	0	2	0
Gender												
Female	112,491	301	10,024	29,335	72,831	0	1,010,203	3,254	105,173	211,027	690,749	0
Male	89,416	160	9,650	4,902	74,704	0	842,828	1,651	100,589	34,815	705,773	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	189,846	400	18,663	31,709	139,074	0	1,751,188	4,236	195,046	232,613	1,319,293	0
African American	2,387	5	189	377	1,816	0	22,367	51	1,845	3,011	17,460	0
Other/unknown	9,674	56	822	2,151	6,645	0	79,476	618	8,871	10,218	59,769	0
Use of Nursing Facilities^c												
Entire year	167	29	138	0	0	0	1,586	248	1,338	0	0	0
Part year	276	23	248	5	0	0	2,764	229	2,480	55	0	0
None	201,464	409	19,288	34,232	147,535	0	1,848,681	4,428	201,944	245,787	1,396,522	0
Maintenance Assistance Status												
Cash	44,887	164	17,962	9,750	17,011	0	430,946	1,852	187,310	78,521	163,263	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0
Poverty-related	126,622	1	3	12,488	114,130	0	1,142,152	2	23	68,690	1,073,437	0
Other/unknown	30,398	296	1,709	11,999	16,394	0	279,933	3,051	18,429	98,631	159,822	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	201,907	461	19,674	34,237	147,535	0	1,853,031	4,905	205,762	245,842	1,396,522	0
FFS part year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
FFS part year, no Rx claims	0	0	0	0	0	0	0	0	0	0	0	0

Source: Data for this table are from the MAX 2005 file for Idaho, released by CMS in 10/2008. This table was produced on 04/23/2009.

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^{a, b}
NONDUAL BENEFICIARIES, IDAHO, 2005

Beneficiary Characteristics	Percentage with at Least One Rx	Mean Number of Rx	Mean Rx \$	\$ per Rx	Mean \$, All Medicaid FFS \$ ^c	Rx \$ as a Percentage of All Medicaid FFS \$ ^d	Number of Beneficiaries
All	61.9	7.3	\$459	\$63	\$3,259	14.1	201,907
Age							
5 and younger	63.3	3.0	130	43	1,801	7.2	64,328
6-14	55.3	3.9	263	68	2,132	12.3	65,665
15-20	60.6	5.9	398	68	3,160	12.6	28,723
21-44	68.6	13.6	894	66	5,773	15.5	35,333
45-64	81.4	47.6	3,115	66	13,703	22.7	7,538
65-74	77.5	39.7	2,002	50	12,078	16.6	209
75-84	60.2	23.2	1,048	45	13,335	7.9	83
85 and older	81.5	31.5	1,110	35	18,880	5.9	27
Unknown	0.0	0.0	0	0	0	0.0	1
Basis of Eligibility^e							
Aged	83.5	49.9	2,687	54	14,491	18.5	461
Disabled	81.0	34.1	2,675	79	16,599	16.1	19,674
Adults	65.5	8.7	429	49	3,158	13.6	34,237
Children	58.5	3.2	163	51	1,468	11.1	147,535
Unknown	0.0	0.0	0	0	0	0.0	0
Gender							
Female	63.8	8.4	485	58	3,232	15.0	112,491
Male	59.5	5.9	426	72	3,293	12.9	89,416
Unknown	0.0	0.0	0	0	0	0.0	0
Race							
White	62.5	7.4	470	63	3,278	14.3	189,846
African American	57.3	5.3	359	68	2,416	14.9	2,387
Other/unknown	51.2	5.1	266	52	3,085	8.6	9,674
Use of Nursing Facilities^f							
Entire year	96.4	90.6	5,724	63	64,691	8.8	167
Part year	98.6	101.0	6,759	67	66,837	10.1	276
None	61.9	7.1	446	63	3,121	14.3	201,464
Maintenance Assistance Status							
Cash	71.5	19.1	1,378	72	8,233	16.7	44,887
Medically needy	0.0	0.0	0	0	0	0.0	0
Poverty related	57.5	3.0	141	46	1,553	9.1	126,622
Other/unknown	66.2	7.5	425	57	3,020	14.1	30,398

Source: Data for this table are from the MAX 2005 file for Idaho, released by CMS in 10/2008. This table was produced on 04/23/2009.

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 eight states (DE, IA, IL, 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 eight states (DE, IA, IL, 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^{a, b}
 NONDUAL BENEFICIARIES, IDAHO, 2005

Beneficiary Characteristics	Mean Number of Rx	Mean Rx \$	Rx \$ as a Percentage of All Medicaid FFS \$ ^c	Number of Rx, Percentage with:						Mean \$, All Medicaid FFS \$ ^d	Number	
				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		Beneficiaries	Benefit Months
All	0.8	\$50	14.1	38.1	50.3	4.7	4.3	1.9	0.7	\$355	201,907	1,853,031
Age												
5 and younger	0.3	14	7.2	36.7	60.5	2.1	0.6	0.1	0.0	196	64,328	589,999
6-14	0.4	26	12.3	44.7	49.1	3.4	2.5	0.3	0.0	213	65,665	655,928
15-20	0.7	44	12.6	39.4	49.2	6.1	4.3	0.8	0.1	349	28,723	260,231
21-44	1.8	116	15.5	31.4	42.1	9.8	10.3	4.9	1.5	749	35,333	272,308
45-64	5.0	328	22.7	18.6	17.5	9.8	22.6	19.9	11.5	1,443	7,538	71,576
65-74	4.1	204	16.6	22.5	18.7	13.4	18.7	19.1	7.7	1,232	209	2,049
75-84	2.6	117	7.9	39.8	20.5	6.0	20.5	8.4	4.8	1,494	83	741
85 and older	4.3	152	5.9	18.5	14.8	14.8	25.9	18.5	7.4	2,588	27	197
Unknown	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	0	1	2
Basis of Eligibility^e												
Aged	4.7	253	18.5	16.5	17.1	11.5	23.0	20.4	11.5	1,362	461	4,905
Disabled	3.3	256	16.1	19.0	30.2	11.2	20.3	13.1	6.1	1,587	19,674	205,762
Adults	1.2	60	13.6	34.5	45.1	9.3	7.8	2.8	0.6	440	34,237	245,842
Children	0.3	17	11.1	41.5	54.3	2.8	1.3	0.1	0.0	155	147,535	1,396,522
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Gender												
Female	0.9	54	15.0	36.2	50.5	5.3	4.8	2.3	1.0	360	112,491	1,010,203
Male	0.6	45	12.9	40.5	50.0	4.1	3.7	1.3	0.4	349	89,416	842,828
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	51	14.3	37.5	50.7	4.8	4.4	1.9	0.8	355	189,846	1,751,188
African American	0.6	38	14.9	42.7	47.9	4.5	3.8	0.9	0.2	258	2,387	22,367
Other/unknown	0.6	32	8.6	48.8	43.4	3.2	2.8	1.5	0.3	376	9,674	79,476
Use of Nursing Facilities^f												
Entire year	9.5	603	8.8	3.6	2.4	5.4	18.6	32.3	37.7	6,812	167	1,586
Part year	10.1	675	10.1	1.4	4.7	5.4	18.8	30.4	39.1	6,674	276	2,764
None	0.8	49	14.3	38.1	50.4	4.7	4.3	1.8	0.6	340	201,464	1,848,681
Maintenance Assistance Status												
Cash	2.0	144	16.7	28.5	41.5	8.1	11.8	7.0	3.0	858	44,887	430,946
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	16	9.1	42.5	53.2	3.0	1.3	0.1	0.0	172	126,622	1,142,152
Other/unknown	0.8	46	14.1	33.8	51.0	7.0	6.1	1.6	0.4	328	30,398	279,933

Source: Data for this table are from the MAX 2005 file for Idaho, released by CMS in 10/2008. This table was produced on 04/23/2009.

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 eight states (DE, IA, IL, 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 eight states (DE, IA, IL, 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^{a, b, c}
NONDUAL BENEFICIARIES, IDAHO, 2005

Beneficiary Characteristics	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
All	0.8	\$50	\$63	0.3	\$39	\$129	0.0	\$2	\$71	0.5	\$9	\$20
Age												
5 and younger	0.3	14	43	0.1	10	102	0.0	1	51	0.2	4	17
6-14	0.4	26	68	0.2	22	114	0.0	1	79	0.2	4	20
15-20	0.7	44	68	0.3	35	133	0.0	2	63	0.4	7	20
21-44	1.8	116	66	0.6	91	145	0.0	3	70	1.1	22	20
45-64	5.0	328	66	1.9	250	131	0.1	10	81	3.0	68	23
65-74	4.1	204	50	1.5	158	109	0.1	4	69	2.5	42	17
75-84	2.6	117	45	0.8	81	105	0.1	4	55	1.7	32	18
85 and older	4.3	152	35	1.4	109	77	0.3	10	32	2.6	33	13
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility^d												
Aged	4.7	253	54	1.7	193	112	0.1	6	58	2.9	53	19
Disabled	3.3	256	79	1.4	208	150	0.1	7	84	1.8	40	23
Adults	1.2	60	49	0.4	43	118	0.0	2	59	0.8	15	18
Children	0.3	17	51	0.1	13	102	0.0	1	63	0.2	4	18
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Gender												
Female	0.9	54	58	0.3	41	124	0.0	2	64	0.6	11	20
Male	0.6	45	72	0.3	36	137	0.0	2	83	0.3	7	21
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Race												
White	0.8	51	63	0.3	40	129	0.0	2	71	0.5	10	20
African American	0.6	38	68	0.2	31	131	0.0	1	73	0.3	6	20
Other/unknown	0.6	32	52	0.2	23	120	0.0	1	67	0.4	8	19
Use of Nursing Facilities^e												
Entire year	9.5	603	63	3.2	452	139	0.3	18	54	5.9	131	22
Part year	10.1	675	67	3.4	490	143	0.3	31	106	6.3	153	24
None	0.8	49	63	0.3	38	129	0.0	2	70	0.5	9	20
Maintenance Assistance Status												
Cash	2.0	144	72	0.8	115	143	0.1	4	80	1.1	25	22
Medically needy	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Poverty related	0.3	16	46	0.1	11	98	0.0	1	61	0.2	4	18
Other/unknown	0.8	46	57	0.3	36	117	0.0	1	60	0.5	9	19

Source: Data for this table are from the MAX 2005 file for Idaho, released by CMS in 10/2008. This table was produced on 04/23/2009.

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, 0.9 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, <http://www.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^{a, b, c, d}
NONDUAL BENEFICIARIES, IDAHO, 2005

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per Rx				Users ^e				
	Total	Off-Brand-Name		Generic	Total	Off-Brand-Name		Generic	Total	Off-Brand-Name		Generic	Total Number of Rx	Total Rx \$	Number of Users	As a Percentage of All Benes	Number of Benefit Months
		Patented	Patent			Patented	Patent			Patented	Patent						
Anti-infective Agents	0.2	0.0	0.0	0.2	\$10	\$5	\$1	\$4	\$42	\$98	\$63	\$23	206,625	\$8,758,276	85,341	42.3	903,180
Biologicals	0.2	0.2	0.0	0.0	162	158	4	0	806	824	1,146	37	1,527	1,230,758	735	0.4	7,593
Antineoplastic Agents	0.6	0.2	0.0	0.4	145	128	1	17	242	597	235	43	2,935	711,398	463	0.2	4,893
Endocrine/Metabolic Drugs	0.5	0.2	0.0	0.3	27	19	2	6	54	101	69	21	125,861	6,788,780	23,867	11.8	247,167
Cardiovascular Agents	1.1	0.4	0.0	0.7	40	32	0	9	38	78	19	13	109,132	4,134,777	9,674	4.8	102,515
Respiratory Agents	0.3	0.2	0.0	0.2	18	14	0	3	52	95	48	15	183,586	9,530,200	50,541	25.0	540,862
Gastrointestinal Agents	0.4	0.2	0.0	0.2	35	31	0	3	77	133	39	16	67,180	5,170,390	14,265	7.1	149,597
Genitourinary Agents	0.2	0.1	0.0	0.1	13	9	1	3	51	85	64	23	16,014	811,938	6,354	3.1	64,493
CNS Drugs	1.1	0.6	0.0	0.5	103	92	0	11	98	156	87	24	274,569	26,815,469	25,060	12.4	260,607
Stimulants/Anti-obesity/Anorexia	0.7	0.6	0.0	0.1	63	60	0	4	89	99	110	33	60,919	5,397,777	7,735	3.8	85,283
Miscellaneous Psychological/Neurological Agents	0.6	0.5	0.0	0.1	203	201	0	2	361	398	0	35	3,660	1,319,972	588	0.3	6,505
Analgesics and Anesthetics	0.5	0.1	0.0	0.4	17	9	1	7	38	177	187	18	178,864	6,774,929	38,072	18.9	388,791
Neuromuscular Agents	0.8	0.3	0.0	0.4	64	49	2	13	85	148	95	32	104,646	8,925,824	13,048	6.5	139,221
Nutritional Products	0.2	0.0	0.0	0.2	3	0	0	3	12	22	11	12	31,752	393,233	14,105	7.0	141,025
Hematological Agents	0.7	0.2	0.1	0.5	136	128	2	6	202	743	44	13	11,894	2,398,527	1,709	0.8	17,655
Topical Products	0.2	0.1	0.0	0.1	6	4	0	2	35	75	42	18	86,256	2,986,097	44,217	21.9	473,681
Miscellaneous Products	0.6	0.3	0.0	0.3	130	102	4	25	229	361	494	88	1,988	454,370	329	0.2	3,488
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	8	0	0	0	40	0	0	0	1,457	57,574	647	0.3	7,047
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.	1,468,865	92,660,289	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for Idaho, released by CMS in 10/2008. This table was produced on 04/23/2009.

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 Idaho, 0.9 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, <http://www.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 2005.

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.

Nondual Beneficiaries

TABLE ND.7
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP^{a, b, c}
 NONDUAL BENEFICIARIES, IDAHO, 2005

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	\$ per Rx	Rx \$ per Benefit Month
ANTIPSYCHOTICS	\$16,699,362	11,602	5.7	127,602	0.6	\$202	\$131
ANTIDEPRESSANTS	8,611,785	26,529	13.1	280,175	0.5	60	31
ANTICONVULSANT	8,057,141	9,316	4.6	102,185	0.7	112	79
ANTIASTHMATIC	6,184,068	31,985	15.8	346,215	0.3	66	18
STIMULANTS/ANTI-OBESITY/ANOREXIANTS	5,397,777	9,138	4.5	101,366	0.6	89	53
ULCER DRUGS	4,019,677	12,903	6.4	135,921	0.4	77	30
ANALGESICS - Narcotic	3,349,980	43,412	21.5	448,268	0.3	27	7
ANTIDIABETIC	2,891,099	5,993	3.0	63,837	0.7	68	45
PENICILLINS	2,155,104	64,860	32.1	700,178	0.1	24	3
ANALGESICS - ANTI-INFLAMMATORY	2,110,172	15,647	7.7	159,824	0.3	52	13
Total	59,476,165	231,385		2,465,571	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for Idaho, released by CMS in 10/2008. This table was produced on 04/23/2009.

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 2005. 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 2005. 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.

Nondual Beneficiaries

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^{a, b, c}
 NONDUAL BENEFICIARIES, IDAHO, 2005

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 Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	803,586	\$59,476,165	11,602	5.7	127,602	0.6	\$131	26,529	13.1	280,175	0.5	\$31
Female												
All Females	492,935	34,043,712	6,042	5.4	66,130	0.6	121	19,101	17.0	200,094	0.5	32
Female, Disabled												
All Ages	235,243	20,616,579	3,457	34.5	38,963	0.7	154	6,954	69.4	78,159	0.7	41
5 and younger	2,582	177,978	7	1.1	82	0.5	66	12	1.8	142	0.4	8
6-14	12,871	1,207,076	306	21.5	3,611	0.6	111	350	24.6	4,097	0.6	23
15-20	11,982	1,171,002	303	29.6	3,487	0.6	118	438	42.8	5,008	0.5	30
21-44	92,162	8,367,248	1,704	50.1	19,199	0.7	151	3,008	88.4	33,870	0.6	41
45-64	115,597	9,689,876	1,136	32.3	12,575	0.8	181	3,144	89.3	35,026	0.7	44
65-74	49	3,399	1	14.3	9	0.1	1	2	28.6	16	0.3	20
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
Female, Other Eligibles												
All Ages	257,692	13,427,133	2,585	2.5	27,167	0.4	74	12,147	11.9	121,935	0.4	26
5 and younger	31,405	996,092	20	0.1	240	0.3	43	31	0.1	365	0.3	7
6-14	46,206	2,848,354	595	2.0	6,739	0.5	85	1,278	4.2	14,304	0.4	17
15-20	37,628	1,914,807	593	4.0	6,379	0.4	62	2,435	16.4	25,471	0.4	20
21-44	122,112	6,404,329	1,231	4.9	12,331	0.4	70	7,517	29.8	72,909	0.4	29
45-64	17,258	1,079,269	118	8.9	1,184	0.6	114	809	60.9	8,056	0.6	37
65-74	2,478	152,402	24	18.9	265	1.1	141	60	47.2	667	0.6	29
75-84	424	26,639	1	2.3	7	0.1	13	6	13.6	72	0.7	41
85 and older	181	5,241	3	20.0	22	1.3	94	11	73.3	91	0.8	9
Male												
All Males	310,651	25,432,453	5,560	6.2	61,472	0.7	142	7,428	8.3	80,081	0.5	28
Male, Disabled												
All Ages	148,905	15,190,389	3,331	34.5	37,522	0.8	172	3,664	38.0	40,890	0.6	34
5 and younger	4,058	293,549	34	3.7	403	0.4	75	22	2.4	258	0.5	12
6-14	31,495	3,218,404	951	37.0	11,009	0.7	130	767	29.8	8,834	0.6	22
15-20	21,628	2,502,563	691	45.3	7,930	0.8	157	612	40.1	6,956	0.6	33
21-44	46,609	5,362,617	1,160	45.3	12,840	0.9	208	1,221	47.7	13,407	0.7	39
45-64	44,974	3,799,435	493	23.9	5,316	0.9	198	1,040	50.4	11,421	0.7	38
65-74	141	13,821	2	20.0	24	1.5	217	2	20.0	14	1.0	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

Nondual Beneficiaries

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^{a, b, c}
 NONDUAL BENEFICIARIES, IDAHO, 2005

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	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month
Male, Other Eligibles												
All Ages	161,746	10,242,064	2,229	2.8	23,950	0.5	95	3,764	4.7	39,191	0.4	21
5 and younger	40,564	1,527,211	65	0.2	728	0.4	57	41	0.1	467	0.2	5
6-14	70,252	5,233,353	1,214	3.9	13,594	0.5	98	1,695	5.4	18,710	0.4	18
15-20	27,098	2,007,414	674	5.9	7,099	0.5	89	1,076	9.5	11,283	0.4	21
21-44	17,426	1,023,231	215	5.2	1,922	0.4	96	757	18.2	6,870	0.4	29
45-64	5,198	372,499	42	6.7	415	0.6	137	171	27.3	1,607	0.5	37
65-74	853	52,233	14	21.5	152	1.3	107	16	24.6	176	0.6	29
75-84	262	19,243	3	7.7	26	1.0	102	5	12.8	50	0.5	14
85 and older	93	6,880	2	16.7	14	0.9	150	3	25.0	28	0.5	29
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 2005 file for Idaho, released by CMS in 10/2008. This table was produced on 04/23/2009.

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 2005. 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 2005. 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); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription (s) or pharmacy benefit; \$ = Medicaid reimbursement.

Nondual Beneficiaries

TABLE ND.7B
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY,
 BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, IDAHO, 2005

Beneficiary Characteristics	ANTICONVULSANT					ANTIASTHMATIC					STIMULANTS/ANTI-OBESITY/ANOREXIANTS				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	9,316	4.6	102,185	0.7	\$79	31,985	15.8	346,215	0.3	\$18	9,138	4.5	101,366	0.6	\$53
Female															
All Females	5,760	5.1	62,865	0.7	74	17,234	15.3	186,043	0.3	18	2,941	2.6	32,743	0.6	51
Female, Disabled															
All Ages	3,453	34.4	38,982	0.8	91	4,433	44.2	49,996	0.4	31	790	7.9	9,138	0.6	59
5 and younger	68	10.4	782	0.6	88	216	33.1	2,414	0.3	20	10	1.5	114	0.3	33
6-14	269	18.9	3,143	0.8	100	318	22.4	3,728	0.3	22	344	24.2	3,993	0.7	59
15-20	276	27.0	3,195	0.9	117	212	20.7	2,409	0.3	18	121	11.8	1,383	0.7	52
21-44	1,557	45.8	17,482	0.8	95	1,552	45.6	17,501	0.4	27	213	6.3	2,497	0.6	62
45-64	1,283	36.4	14,380	0.8	78	2,132	60.6	23,927	0.5	38	102	2.9	1,151	0.6	62
65-74	0	0.0	0	0.0	0	3	42.9	17	0.7	56	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
Female, Other Eligibles															
All Ages	2,307	2.3	23,883	0.5	48	12,801	12.5	136,047	0.2	14	2,151	2.1	23,605	0.5	47
5 and younger	73	0.2	810	0.4	49	3,660	11.9	39,774	0.2	10	57	0.2	623	0.4	28
6-14	313	1.0	3,517	0.5	61	3,412	11.3	37,950	0.2	15	1,351	4.5	15,057	0.6	48
15-20	359	2.4	3,894	0.4	42	1,871	12.6	19,934	0.2	12	349	2.4	3,871	0.5	45
21-44	1,371	5.4	13,728	0.5	45	3,409	13.5	33,690	0.3	16	361	1.4	3,730	0.5	48
45-64	165	12.4	1,635	0.6	53	394	29.6	4,075	0.4	31	33	2.5	324	0.5	56
65-74	20	15.7	237	0.9	33	43	33.9	497	0.5	47	0	0.0	0	0.0	0
75-84	4	9.1	48	0.9	121	9	20.5	100	0.8	34	0	0.0	0	0.0	0
85 and older	2	13.3	14	0.9	9	3	20.0	27	0.1	9	0	0.0	0	0.0	0
Male															
All Males	3,556	4.0	39,320	0.7	86	14,751	16.5	160,172	0.3	17	6,197	6.9	68,623	0.6	55
Male, Disabled															
All Ages	2,480	25.7	28,028	0.8	98	2,528	26.2	28,568	0.4	28	1,734	18.0	19,788	0.7	63
5 and younger	104	11.3	1,207	0.6	90	332	36.1	3,856	0.3	19	43	4.7	490	0.4	30
6-14	581	22.6	6,762	0.7	85	579	22.5	6,695	0.3	21	1,085	42.2	12,402	0.7	61
15-20	400	26.2	4,593	0.9	107	288	18.9	3,296	0.3	19	423	27.7	4,815	0.7	72
21-44	911	35.6	10,207	0.9	119	529	20.7	6,013	0.4	23	146	5.7	1,648	0.7	62
45-64	481	23.3	5,253	0.8	70	797	38.7	8,672	0.6	43	37	1.8	433	0.8	84
65-74	3	30.0	6	0.8	40	3	30.0	36	0.8	51	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

Nondual Beneficiaries

TABLE ND.7B
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY,
 BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, IDAHO, 2005

Beneficiary Characteristics	ANTICONVULSANT					ANTIASTHMATIC					STIMULANTS/ANTI-OBESITY/ANOREXIANTS				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
Male, Other Eligibles															
All Ages	1,076	1.3	11,292	0.5	56	12,223	15.3	131,604	0.2	15	4,463	5.6	48,835	0.6	51
5 and younger	95	0.3	1,020	0.4	29	5,657	17.6	60,744	0.2	12	158	0.5	1,788	0.4	29
6-14	416	1.3	4,732	0.5	52	4,790	15.3	52,426	0.3	17	3,465	11.0	38,128	0.6	51
15-20	276	2.4	2,870	0.6	80	1,245	11.0	13,122	0.2	14	760	6.7	8,151	0.6	55
21-44	228	5.5	2,086	0.5	44	402	9.7	3,982	0.3	17	74	1.8	719	0.5	45
45-64	54	8.6	503	0.6	60	106	16.9	1,078	0.5	44	6	1.0	49	0.4	62
65-74	7	10.8	81	0.9	22	12	18.5	135	0.4	55	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	8	20.5	81	0.4	32	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	3	25.0	36	1.3	96	0	0.0	0	0.0	0
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2005 file for Idaho, released by CMS in 10/2008. This table was produced on 04/23/2009.

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 2005. 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 2005. 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); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription (s) or pharmacy benefit; \$ = Medicaid reimbursement.

Nondual Beneficiaries

TABLE ND.7C
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY,
 BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, IDAHO, 2005

Beneficiary Characteristics	ULCER DRUGS					ANALGESICS - Narcotic					ANTIDIABETIC				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	12,903	6.4	135,921	0.4	\$30	43,412	21.5	448,268	0.3	\$8	5,993	3.0	63,837	0.7	\$45
Female															
All Females	8,705	7.7	92,056	0.4	30	31,021	27.6	316,653	0.3	7	4,385	3.9	46,879	0.6	43
Female, Disabled															
All Ages	3,464	34.6	38,963	0.5	43	7,128	71.1	79,802	0.5	18	2,356	23.5	26,516	0.7	49
5 and younger	124	19.0	1,325	0.4	27	68	10.4	785	0.1	1	4	0.6	48	0.3	15
6-14	106	7.5	1,217	0.4	27	200	14.1	2,341	0.1	1	21	1.5	250	0.7	28
15-20	147	14.4	1,689	0.4	25	348	34.0	4,008	0.2	2	73	7.1	823	0.7	52
21-44	1,267	37.3	14,275	0.5	39	3,132	92.1	34,991	0.4	14	747	22.0	8,494	0.7	43
45-64	1,817	51.6	20,421	0.6	49	3,377	95.9	37,660	0.5	25	1,507	42.8	16,877	0.8	52
65-74	3	42.9	36	0.1	12	3	42.9	17	0.9	49	4	57.1	24	0.4	10
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
Female, Other Eligibles															
All Ages	5,241	5.1	53,093	0.3	20	23,893	23.3	236,851	0.2	4	2,029	2.0	20,363	0.5	34
5 and younger	855	2.8	8,078	0.2	11	1,480	4.8	16,489	0.1	1	14	0.0	145	0.6	44
6-14	708	2.3	7,996	0.2	12	2,602	8.6	29,392	0.1	1	207	0.7	2,306	0.6	48
15-20	946	6.4	9,964	0.2	14	4,788	32.3	49,412	0.2	1	255	1.7	2,659	0.4	31
21-44	2,363	9.4	23,221	0.3	24	14,035	55.6	131,563	0.3	5	1,226	4.9	11,796	0.5	29
45-64	311	23.4	3,181	0.5	45	900	67.7	9,021	0.4	9	268	20.2	2,781	0.7	42
65-74	42	33.1	469	0.7	52	61	48.0	703	0.5	7	48	37.8	554	0.8	49
75-84	14	31.8	160	0.6	53	14	31.8	163	0.2	2	10	22.7	120	0.6	26
85 and older	2	13.3	24	0.7	16	13	86.7	108	0.3	6	1	6.7	2	0.5	44
Male															
All Males	4,198	4.7	43,865	0.4	29	12,391	13.9	131,615	0.2	8	1,608	1.8	16,958	0.7	53
Male, Disabled															
All Ages	1,779	18.4	19,853	0.5	42	3,520	36.5	38,406	0.4	20	956	9.9	10,500	0.8	53
5 and younger	159	17.3	1,786	0.4	20	142	15.4	1,622	0.1	1	7	0.8	76	0.5	30
6-14	170	6.6	1,961	0.4	31	307	11.9	3,575	0.1	2	31	1.2	340	0.5	32
15-20	172	11.3	1,990	0.5	34	338	22.1	3,894	0.2	4	53	3.5	594	0.6	37
21-44	586	22.9	6,579	0.5	43	1,231	48.1	13,403	0.4	15	247	9.6	2,744	0.8	53
45-64	689	33.4	7,511	0.6	51	1,500	72.7	15,898	0.6	35	613	29.7	6,716	0.8	56
65-74	3	30.0	26	0.6	85	2	20.0	14	0.4	60	5	50.0	30	1.0	86
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

Nondual Beneficiaries

TABLE ND.7C
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY,
 BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, IDAHO, 2005

Beneficiary Characteristics	ULCER DRUGS					ANALGESICS - Narcotic					ANTIDIABETIC				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month
Male, Other Eligibles															
All Ages	2,419	3.0	24,012	0.3	19	8,871	11.1	93,209	0.2	3	652	0.8	6,458	0.7	53
5 and younger	1,038	3.2	9,624	0.2	13	1,846	5.7	20,450	0.1	1	20	0.1	217	0.7	46
6-14	542	1.7	6,074	0.2	14	2,486	7.9	27,758	0.1	1	163	0.5	1,771	0.7	53
15-20	351	3.1	3,669	0.3	18	2,340	20.6	24,732	0.1	1	110	1.0	1,135	0.6	61
21-44	346	8.3	3,217	0.4	38	1,853	44.7	16,945	0.4	9	212	5.1	1,909	0.7	53
45-64	115	18.3	1,161	0.5	48	306	48.8	2,904	0.5	14	120	19.1	1,155	0.7	46
65-74	18	27.7	186	0.6	50	30	46.2	316	0.4	11	15	23.1	152	0.7	32
75-84	9	23.1	81	0.4	50	7	17.9	84	0.7	12	11	28.2	115	0.6	53
85 and older	0	0.0	0	0.0	0	3	25.0	20	0.3	3	1	8.3	4	1.0	9
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 2005 file for Idaho, released by CMS in 10/2008. This table was produced on 04/23/2009.

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 2005. 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 2005. 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); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

Nondual Beneficiaries

TABLE ND.7D
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR NINTH AND TENTH TOP DRUG GROUPS
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, IDAHO, 2005

Beneficiary Characteristics	PENICILLINS					ANALGESICS - ANTI-INFLAMMATORY					Number of Beneficiaries	Number of Benefit Months
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month		
All	64,860	32.1	700,178	0.1	\$3	15,647	7.7	159,824	0.3	\$13	201,907	1,853,031
Female												
All Females	35,977	32.0	386,227	0.1	3	11,974	10.6	121,058	0.3	14	112,490	1,010,201
Female, Disabled												
All Ages	3,453	34.4	39,665	0.1	4	2,991	29.8	33,854	0.4	38	10,024	105,173
5 and younger	384	58.8	4,413	0.1	3	0	0.0	0	0.0	0	653	6,548
6-14	509	35.8	6,001	0.1	4	29	2.0	322	0.3	52	1,420	15,867
15-20	324	31.7	3,768	0.1	3	140	13.7	1,644	0.2	11	1,023	10,950
21-44	1,248	36.7	14,223	0.1	4	1,349	39.7	15,145	0.3	23	3,401	35,921
45-64	988	28.1	11,260	0.1	4	1,471	41.8	16,727	0.5	54	3,520	35,843
65-74	0	0.0	0	0.0	0	2	28.6	16	0.3	39	7	44
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
Female, Other Eligibles												
All Ages	32,524	31.7	346,562	0.1	3	8,983	8.8	87,204	0.2	5	102,466	905,028
5 and younger	13,919	45.4	149,910	0.1	3	11	0.0	114	0.1	4	30,630	280,609
6-14	8,493	28.0	94,856	0.1	3	588	1.9	6,639	0.1	3	30,282	301,212
15-20	3,688	24.9	38,985	0.1	3	2,183	14.7	22,526	0.1	2	14,815	129,490
21-44	6,051	24.0	59,051	0.1	4	5,755	22.8	53,334	0.2	6	25,224	180,631
45-64	351	26.4	3,509	0.1	4	398	29.9	4,044	0.4	15	1,329	11,266
65-74	19	15.0	218	0.1	3	38	29.9	427	0.5	17	127	1,302
75-84	3	6.8	33	0.1	4	8	18.2	96	0.6	26	44	404
85 and older	0	0.0	0	0.0	0	2	13.3	24	0.5	35	15	114
Male												
All Males	28,883	32.3	313,951	0.1	3	3,673	4.1	38,766	0.2	10	89,416	842,828
Male, Disabled												
All Ages	2,802	29.0	32,210	0.1	4	1,289	13.4	14,450	0.3	19	9,650	100,589
5 and younger	547	59.5	6,331	0.2	4	1	0.1	12	1.5	79	920	9,593
6-14	882	34.3	10,284	0.1	4	56	2.2	644	0.2	14	2,572	28,501
15-20	378	24.8	4,406	0.1	3	160	10.5	1,859	0.2	7	1,526	16,360
21-44	596	23.3	6,766	0.1	4	516	20.2	5,761	0.3	9	2,560	26,492
45-64	398	19.3	4,421	0.1	6	553	26.8	6,148	0.4	32	2,062	19,583
65-74	1	10.0	2	0.5	4	3	30.0	26	0.2	6	10	60
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

Nondual Beneficiaries

TABLE ND.7D
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR NINTH AND TENTH TOP DRUG GROUPS
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE^a, b, c
 NONDUAL BENEFICIARIES, IDAHO, 2005

Beneficiary Characteristics	PENICILLINS					ANALGESICS - ANTI-INFLAMMATORY					Number of Beneficiaries	Number of Benefit Months
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month		
Male, Other Eligibles												
All Ages	26,081	32.7	281,741	0.1	3	2,384	3.0	24,316	0.2	5	79,766	742,239
5 and younger	15,262	47.5	163,515	0.1	3	13	0.0	154	0.1	3	32,125	293,249
6-14	7,890	25.1	87,935	0.1	3	414	1.3	4,628	0.1	1	31,391	310,348
15-20	1,977	17.4	21,226	0.1	3	1,046	9.2	11,098	0.1	4	11,359	103,431
21-44	818	19.7	7,753	0.1	3	749	18.1	6,867	0.2	8	4,148	29,264
45-64	119	19.0	1,154	0.1	8	141	22.5	1,326	0.3	12	627	4,884
65-74	10	15.4	106	0.1	5	16	24.6	189	0.5	19	65	643
75-84	2	5.1	16	0.3	16	4	10.3	42	0.6	45	39	337
85 and older	3	25.0	36	0.2	11	1	8.3	12	0.1	1	12	83
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	2

Source: Data for this table are from the MAX 2005 file for Idaho, released by CMS in 10/2008. This table was produced on 04/23/2009.

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 2005. 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 2005. 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); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription (s) or pharmacy; \$ = Medicaid reimbursement.

Nondual Beneficiaries

TABLE ND.8
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BENEFICIARY CHARACTERISTIC^{a, b}
 NONDUAL BENEFICIARIES, IDAHO, 2005

Beneficiary Characteristics	Rx \$ per Benefit Month	Number of Rx per Benefit Month	Number of All-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents
All	\$603	9.5	167	1,586
Age				
0-64	630	9.8	143	1,398
65-74	683	11.0	10	87
75-84	183	3.0	3	26
85 and older	150	4.6	11	75
Unknown	0	0.0	0	0
Gender				
Female	644	10.0	107	1,043
Male	524	8.6	60	543
Unknown	0	0.0	0	0
Race				
White	622	9.8	161	1,521
African American	239	5.3	1	12
Other/unknown	118	3.9	5	53
Basis of Eligibility^c				
Aged	413	7.7	29	248
Disabled	638	9.9	138	1,338
Adults	0	0.0	0	0
Children	0	0.0	0	0
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 2005 file for Idaho, released by CMS in 10/2008. This table was produced on 04/23/2009.

a. Table ND.8 includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their 2005 Medicaid enrollment. A total of 276 beneficiaries who were in nursing facilities for part of their enrollment and their 2,764 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.

Nondual Beneficiaries

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, 2005

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	Generic	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	Number of Benefit Months
Anti-infective Agents	0.6	0.2	0.1	0.4	\$40	\$26	\$6	\$8	\$65	\$153	\$86	\$20	730	\$47,521	120	71.9	1,193
Biologicals	0.1	0.0	0.0	0.1	3	0	0	3	33	0	0	33	12	392	12	7.2	132
Antineoplastic Agents	1.3	0.2	0.0	1.1	234	97	0	137	184	643	0	122	93	17,098	8	4.8	73
Endocrine/Metabolic Drugs	1.7	0.7	0.2	0.7	69	54	6	9	40	74	24	13	1,384	55,983	83	49.7	817
Cardiovascular Agents	2.0	0.6	0.0	1.4	61	43	0	18	30	71	14	13	2,136	64,504	109	65.3	1,054
Respiratory Agents	0.8	0.5	0.0	0.3	48	43	0	5	62	96	13	14	523	32,483	68	40.7	679
Gastrointestinal Agents	1.2	0.4	0.0	0.7	61	48	1	11	52	110	43	16	1,177	61,124	102	61.1	1,005
Genitourinary Agents	1.0	0.7	0.0	0.3	62	53	0	9	61	77	0	28	461	28,187	43	25.7	451
CNS Drugs	2.2	1.1	0.0	1.0	216	191	0	25	98	166	42	24	2,926	287,458	134	80.2	1,331
Stimulants/Anti-obesity/Anorexia	0.6	0.2	0.0	0.4	54	48	0	6	94	217	0	18	26	2,452	6	3.6	45
Miscellaneous Psychological/Neurological Agents	1.1	1.1	0.0	0.0	859	859	0	0	803	803	0	0	122	97,949	10	6.0	114
Analgesics and Anesthetics	1.5	0.2	0.0	1.3	58	27	3	28	37	113	129	22	1,694	63,512	114	68.3	1,098
Neuromuscular Agents	1.7	0.4	0.1	1.1	121	61	9	51	73	139	70	47	1,841	134,531	105	62.9	1,115
Nutritional Products	0.9	0.0	0.0	0.9	17	0	0	16	18	21	6	18	490	8,814	54	32.3	528
Hematological Agents	1.9	0.2	0.0	1.7	71	57	2	12	37	256	103	7	943	35,317	50	29.9	497
Topical Products	0.6	0.1	0.0	0.4	17	7	1	9	30	64	40	21	539	16,426	89	53.3	963
Miscellaneous Products	0.2	0.1	0.0	0.2	6	4	0	2	25	72	0	11	13	325	5	3.0	55
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	13	0	0	0	62	0	0	0	28	1,749	14	8.4	132
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.	15,138	955,825	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for Idaho, released by CMS in 10/2008. This table was produced on 04/23/2009.

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 2005. A total of 276 beneficiaries who were in nursing facilities for part of their enrollment and their 2,764 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 2005. 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.medispain.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.medispain.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

In Idaho, 0.9 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.

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.

Nondual Beneficiaries

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, 2005

Top 10 Drug Groups in Nursing Facilities	Total Medicaid Rx \$	Users			Among Users		
		Number of Users	As a Percentage of All-Year Nursing Facility Residents	Number of Benefit Months per	Number of Rx per Benefit Month	\$ per Rx	Rx \$ per Benefit Month
ANTIPSYCHOTICS	\$203,153	94	56.3	986	1.0	\$208	\$206
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	97,949	12	7.2	138	0.9	803	710
ANTICONVULSANT	97,667	99	59.3	1,041	1.2	82	94
ANTIDEPRESSANTS	75,962	157	94.0	1,633	0.9	51	47
ULCER DRUGS	48,111	89	53.3	878	0.9	64	55
ANALGESICS - Narcotic	45,039	134	80.2	1,287	1.0	35	35
ANTIDIABETIC	38,778	70	41.9	711	1.1	48	55
ANTIASTHMATIC	26,510	78	46.7	795	0.5	72	33
ANTIHYPERTENSIVE	26,056	30	18.0	331	0.9	89	79
ANTICOAGULANTS	23,091	36	21.6	373	2.0	31	62
Total	682,316	799		8,173	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for Idaho, released by CMS in 10/2008. This table was produced on 04/23/2009.

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 2005. A total of 276 beneficiaries who were in nursing facilities for part of their enrollment and their 2,764 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 2005. 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 2005 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); CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

Nondual Beneficiaries

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^{a, b, c, d}
 NONDUAL BENEFICIARIES, IDAHO, 2005

Beneficiary Characteristics	All Top 10 Drug Groups			ANTIPSYCHOTICS				MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL				
	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 \$
All	8,046	\$682,316	94	56.3	986	1.0	\$206	12	7.2	138	0.9	\$710
Female												
All Females	5,446	496,147	70	65.4	749	1.0	207	11	10.3	126	0.9	770
Female, Disabled												
All Ages	4,908	466,087	62	69.7	670	1.0	219	10	11.2	114	0.9	839
64 or younger	4,908	466,087	62	69.7	670	1.0	219	10	11.2	114	0.9	839
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
Female, Other Eligibles												
All Ages	538	30,060	8	44.4	79	0.9	109	1	5.6	12	0.1	116
64 or younger	63	4,324	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	367	19,986	6	85.7	69	0.8	96	1	14.3	12	0.1	116
75-84	17	2,405	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	91	3,345	2	25.0	10	1.6	197	0	0.0	0	0.0	0
Male												
All Males	2,600	186,169	24	40.0	237	1.0	203	1	1.7	12	1.1	73
Male, Disabled												
All Ages	2,257	156,570	18	36.7	165	0.9	196	1	2.0	12	1.1	73
64 or younger	2,257	156,570	18	36.7	165	0.9	196	1	2.0	12	1.1	73
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
Male, Other Eligibles												
All Ages	343	29,599	6	54.5	72	1.1	217	0	0.0	0	0.0	0
64 or younger	221	16,303	3	75.0	36	1.1	171	0	0.0	0	0.0	0
65-74	86	9,865	2	66.7	24	1.1	307	0	0.0	0	0.0	0
75-84	7	1,102	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	29	2,329	1	33.3	12	1.0	173	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 2005 file for Idaho, released by CMS in 10/2008. This table was produced on 04/23/2009.

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 2005. A total of 276 beneficiaries who were in nursing facilities for part of their enrollment and their 2,764 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 2005. 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 2005 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.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^{a, b, c, d}
 NONDUAL BENEFICIARIES, IDAHO, 2005

Beneficiary Characteristics	ANTICONVULSANT					ANTIDEPRESSANTS					ULCER DRUGS				
	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 \$
All	99	59.3	1,041	1.2	\$94	157	94.0	1,633	0.9	\$47	89	53.3	878	0.9	\$55
Female															
All Females	66	61.7	704	1.1	98	101	94.4	1,056	0.9	47	53	49.5	551	0.9	46
Female, Disabled															
All Ages	65	73.0	692	1.1	96	86	96.6	923	0.9	48	49	55.1	523	0.8	45
64 or younger	65	73.0	692	1.1	96	86	96.6	923	0.9	48	49	55.1	523	0.8	45
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
Female, Other Eligibles															
All Ages	1	5.6	12	1.2	199	15	83.3	133	0.9	37	4	22.2	28	1.1	68
64 or younger	0	0.0	0	0.0	0	2	200.0	24	1.0	79	0	0.0	0	0.0	0
65-74	0	0.0	0	0.0	0	7	100.0	61	1.0	42	4	57.1	28	1.1	68
75-84	1	50.0	12	1.2	199	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	6	75.0	48	0.9	11	0	0.0	0	0.0	0
Male															
All Males	33	55.0	337	1.2	85	56	93.3	577	0.9	46	36	60.0	327	0.9	70
Male, Disabled															
All Ages	29	59.2	289	1.2	90	49	100.0	511	0.9	44	28	57.1	281	0.8	64
64 or younger	29	59.2	289	1.2	90	49	100.0	511	0.9	44	28	57.1	281	0.8	64
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
Male, Other Eligibles															
All Ages	4	36.4	48	1.2	56	7	63.6	66	0.8	62	8	72.7	46	0.9	104
64 or younger	2	50.0	24	1.4	94	3	75.0	36	0.9	57	3	75.0	36	0.9	110
65-74	2	66.7	24	1.0	18	1	33.3	12	1.1	136	3	100.0	6	1.0	38
75-84	0	0.0	0	0.0	0	1	100.0	2	1.0	111	2	200.0	4	0.8	154
85 and older	0	0.0	0	0.0	0	2	66.7	16	0.5	11	0	0.0	0	0.0	0
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2005 file for Idaho, released by CMS in 10/2008. This table was produced on 04/23/2009.

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 2005. A total of 276 beneficiaries who were in nursing facilities for part of their enrollment and their 2,764 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 2005. 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 2005 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.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, BASIS OF ELIGIBILITY, AND AGE^{a, b, c, d}
 NONDUAL BENEFICIARIES, IDAHO, 2005

Beneficiary Characteristics	ANALGESICS - Narcotic					ANTIDIABETIC					ANTIASTHMATIC				
	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 \$
All	134	80.2	1,287	1.0	\$35	70	41.9	711	1.1	\$55	78	46.7	795	0.5	\$33
Female															
All Females	89	83.2	873	0.9	34	47	43.9	492	1.2	58	55	51.4	567	0.4	38
Female, Disabled															
All Ages	71	79.8	701	1.0	39	40	44.9	420	1.2	60	45	50.6	467	0.5	41
64 or younger	71	79.8	701	1.0	39	40	44.9	420	1.2	60	45	50.6	467	0.5	41
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
Female, Other Eligibles															
All Ages	18	100.0	172	0.8	15	7	38.9	72	0.9	40	10	55.6	100	0.3	23
64 or younger	1	100.0	12	1.3	11	0	0.0	0	0.0	0	3	300.0	36	0.3	27
65-74	7	100.0	78	1.2	23	7	100.0	72	0.9	40	4	57.1	37	0.4	29
75-84	1	50.0	12	0.3	2	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	9	112.5	70	0.4	9	0	0.0	0	0.0	0	3	37.5	27	0.1	9
Male															
All Males	45	75.0	414	1.2	37	23	38.3	219	1.0	48	23	38.3	228	0.5	23
Male, Disabled															
All Ages	35	71.4	320	1.3	45	20	40.8	191	1.1	51	22	44.9	216	0.6	23
64 or younger	35	71.4	320	1.3	45	20	40.8	191	1.1	51	22	44.9	216	0.6	23
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
Male, Other Eligibles															
All Ages	10	90.9	94	0.5	7	3	27.3	28	0.8	24	1	9.1	12	0.2	19
64 or younger	5	125.0	60	0.5	6	2	50.0	24	0.8	27	1	25.0	12	0.2	19
65-74	3	100.0	26	0.6	8	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	2	66.7	8	0.6	5	1	33.3	4	1.0	9	0	0.0	0	0.0	0
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2005 file for Idaho, released by CMS in 10/2008. This table was produced on 04/23/2009.

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 2005. A total of 276 beneficiaries who were in nursing facilities for part of their enrollment and their 2,764 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 2005. 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 2005 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); 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^{a, b, c, d}
 NONDUAL BENEFICIARIES, IDAHO, 2005

Beneficiary Characteristics	ANTIHYPERTENSIVE						ANTICOAGULANTS					
	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 \$	All-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents
All	30	18.0	331	0.9	\$79	36	21.6	373	2.0	\$62	167	1,586
Female												
All Females	20	18.7	224	0.9	75	16	15.0	156	3.1	26	107	1,043
Female, Disabled												
All Ages	16	18.0	185	0.8	76	14	15.7	144	3.2	27	89	889
64 or younger	16	18.0	185	0.8	76	14	15.7	144	3.2	27	89	889
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
Female, Other Eligibles												
All Ages	4	22.2	39	1.0	72	2	11.1	12	1.8	21	18	154
64 or younger	1	100.0	12	1.0	110	0	0.0	0	0.0	0	1	12
65-74	3	42.9	27	1.0	55	2	28.6	12	1.8	21	7	61
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	24
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	8	57
Male												
All Males	10	16.7	107	1.0	86	20	33.3	217	1.2	88	60	543
Male, Disabled												
All Ages	9	18.4	105	1.0	85	17	34.7	181	1.2	102	49	449
64 or younger	9	18.4	105	1.0	85	17	34.7	181	1.2	102	49	449
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
Male, Other Eligibles												
All Ages	1	9.1	2	1.0	132	3	27.3	36	1.0	17	11	94
64 or younger	0	0.0	0	0.0	0	3	75.0	36	1.0	17	4	48
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	26
75-84	1	100.0	2	1.0	132	0	0.0	0	0.0	0	1	2
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	18
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 2005 file for Idaho, released by CMS in 10/2008. This table was produced on 04/23/2009.

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 2005. A total of 276 beneficiaries who were in nursing facilities for part of their enrollment and their 2,764 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 2005. 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 2005 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^{a,b}
IDAHO, 2005

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	Part D Excluded Rx \$ per Beneficiary	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
All	39,301	19.5	0.6	111,441	\$10	\$1,933,332	\$17	2.1	201,907
Age									
5 and younger	13,165	20.5	0.4	23,830	7	445,188	19	5.3	64,328
6-14	10,157	15.5	0.3	18,631	6	392,349	21	2.3	65,665
15-20	4,521	15.7	0.3	9,279	8	223,054	24	2.0	28,723
21-44	8,135	23.0	0.9	33,060	14	502,253	15	1.6	35,333
45-64	3,237	42.9	3.4	25,883	48	361,829	14	1.5	7,538
65-74	56	26.8	2.6	538	27	5,678	11	1.4	209
75-84	21	25.3	1.8	146	23	1,875	13	2.2	83
85 and older	9	33.3	2.7	74	41	1,106	15	3.7	27
Unknown	0	0.0	0.0	0	0	0	0	0.0	1
Basis of Eligibility^c									
Aged	171	37.1	3.3	1,531	43	19,990	13	1.6	461
Disabled	7,025	35.7	2.3	46,117	43	852,695	18	1.6	19,674
Adults	6,623	19.3	0.6	19,584	8	264,773	14	1.8	34,237
Children	25,482	17.3	0.3	44,209	5	795,874	18	3.3	147,535
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Gender									
Female	23,342	20.8	0.6	73,036	10	1,179,269	16	2.2	112,491
Male	15,959	17.8	0.4	38,405	8	754,063	20	2.0	89,416
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Race									
White	37,359	19.7	0.6	106,770	10	1,847,792	17	2.1	189,846
African American	391	16.4	0.4	899	7	15,936	18	1.9	2,387
Other/unknown	1,551	16.0	0.4	3,772	7	69,604	18	2.7	9,674
Use of Nursing Facilities^d									
Entire year	97	58.1	6.9	1,157	104	17,326	15	1.8	167
Part year	223	80.8	8.8	2,422	128	35,450	15	1.9	276
None	38,981	19.3	0.5	107,862	9	1,880,556	17	2.1	201,464
Maintenance Assistance Status									
Cash	12,537	27.9	1.4	60,612	23	1,027,235	17	1.7	44,887
Medically needy	0	0.0	0.0	0	0	0	0	0.0	0
Poverty related	20,549	16.2	0.3	35,343	5	632,054	18	3.5	126,622
Other/unknown	6,215	20.4	0.5	15,486	9	274,043	18	2.1	30,398

Source: Data for this table are from the MAX 2005 file for Idaho, released by CMS in 10/2008. This table was produced on 04/23/2009.

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 2005.

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^{a,b}
IDAHO, 2005

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	\$17	\$0	\$0	1,853,031
Age						
5 and younger	0.0	1	19	0	0	589,999
6-14	0.0	1	21	0	0	655,928
15-20	0.0	1	24	0	0	260,231
21-44	0.1	2	15	0	1	272,308
45-64	0.4	5	14	0	2	71,576
65-74	0.3	3	11	0	1	2,049
75-84	0.2	3	13	0	1	741
85 and older	0.4	6	15	0	1	197
Unknown	0.0	0	0	0	0	2
Basis of Eligibility^c						
Aged	0.3	4	13	0	1	4,905
Disabled	0.2	4	18	0	2	205,762
Adults	0.1	1	14	0	0	245,842
Children	0.0	1	18	0	0	1,396,522
Unknown	0.0	0	0	0	0	0
Gender						
Female	0.1	1	16	0	0	1,010,203
Male	0.0	1	20	0	0	842,828
Unknown	0.0	0	0	0	0	0
Race						
White	0.1	1	17	0	0	1,751,188
African American	0.0	1	18	0	0	22,367
Other/unknown	0.0	1	18	0	0	79,476
Use of Nursing Facilities^d						
Entire year	0.7	11	15	0	4	1,586
Part year	0.9	13	15	0	5	2,764
None	0.1	1	17	0	0	1,848,681
Maintenance Assistance Status						
Cash	0.1	2	17	0	1	430,946
Medically needy	0.0	0	0	0	0	0
Poverty related	0.0	1	18	0	0	1,142,152
Other/unknown	0.1	1	18	0	0	279,933

Source: Data for this table are from the MAX 2005 file for Idaho, released by CMS in 10/2008. This table was produced on 04/23/2009.

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 2005.

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.

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, 2005

Drug Category	Number of Users	Rx \$ per User	Total Rx \$	Rx \$ as a Percentage of All Part D		\$ per Rx	Number Rx as a Percentage of All Part D	
				Excluded Rx \$	Total Number Rx.		Excluded Rx	
All	45,757	\$42	\$1,933,332	100.0	111,441	\$17	100.0	
Anorexia or weight loss/gain	1	34	34	0.0	2	17	0.0	
Fertility drugs	6	28	170	0.0	10	17	0.0	
Drugs for cosmetic purposes	135	19	2,594	0.1	186	14	0.2	
Cough and cold medications	26,248	34	891,544	46.1	43,685	20	39.2	
Vitamins and minerals	4,946	45	221,210	11.4	14,503	15	13.0	
Non-prescription drugs	7,090	27	191,612	9.9	13,458	14	12.1	
Barbiturates	203	66	13,454	0.7	1,634	8	1.5	
Benzodiazepines	6,462	79	511,172	26.4	35,791	14	32.1	
Other Part D Excl Rx Drugs	666	152	101,542	5.3	2,172	47	1.9	

Source: Data for this table are from the MAX 2005 file for Idaho, released by CMS in 10/2008. This table was produced on 04/23/2009.

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 2005. A user is a beneficiary who had at least one prescription filled for a Part D excluded drug in 2005. 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.

Nondual Beneficiaries

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, 2005

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Blind/ Disabled	Adults	Children	Other/ Unknown	All	Aged	Blind/ Disabled	Adults	Children	Other/ Unknown
All	201,907	461	19,674	34,237	147,535	0	1,853,031	4,905	205,762	245,842	1,396,522	0
Age												
5 and younger	64,328	0	1,573	0	62,755	0	589,999	0	16,141	0	573,858	0
6-14	65,665	0	3,992	0	61,673	0	655,928	0	44,368	0	611,560	0
15-20	28,723	0	2,549	3,124	23,050	0	260,231	0	27,310	21,979	210,942	0
21-44	35,333	1	5,961	29,317	54	0	272,308	11	62,413	209,729	155	0
45-64	7,538	183	5,582	1,771	2	0	71,576	2,059	55,426	14,086	5	0
65-74	209	179	17	13	0	0	2,049	1,913	104	32	0	0
75-84	83	72	0	11	0	0	741	726	0	15	0	0
85 and older	27	26	0	1	0	0	197	196	0	1	0	0
Unknown	1	0	0	0	1	0	2	0	0	0	2	0
Gender												
Female	112,491	301	10,024	29,335	72,831	0	1,010,203	3,254	105,173	211,027	690,749	0
Male	89,416	160	9,650	4,902	74,704	0	842,828	1,651	100,589	34,815	705,773	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	189,846	400	18,663	31,709	139,074	0	1,751,188	4,236	195,046	232,613	1,319,293	0
African American	2,387	5	189	377	1,816	0	22,367	51	1,845	3,011	17,460	0
Other/unknown	9,674	56	822	2,151	6,645	0	79,476	618	8,871	10,218	59,769	0
Use of Nursing Facilities^c												
Entire year	167	29	138	0	0	0	1,586	248	1,338	0	0	0
Part year	276	23	248	5	0	0	2,764	229	2,480	55	0	0
None	201,464	409	19,288	34,232	147,535	0	1,848,681	4,428	201,944	245,787	1,396,522	0
Maintenance Assistance Status												
Cash	44,887	164	17,962	9,750	17,011	0	430,946	1,852	187,310	78,521	163,263	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0
Poverty related	126,622	1	3	12,488	114,130	0	1,142,152	2	23	68,690	1,073,437	0
Other/unknown	30,398	296	1,709	11,999	16,394	0	279,933	3,051	18,429	98,631	159,822	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	201,907	461	19,674	34,237	147,535	0	1,853,031	4,905	205,762	245,842	1,396,522	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 2005 file for Idaho, released by CMS in 10/2008. This table was produced on 04/23/2009.

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(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^a
 NONDUAL BENEFICIARIES, IDAHO, 2005

	Beneficiaries and Benefit Months in Cell J of Table 1		Included in Cell K of Table 1		Excluded from Cell K of Table 1	
	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months
All	201,907	1,853,031	201,907	1,853,031	0	0
Fee-for-service (FFS) all year	201,907	1,853,031	201,907	1,853,031	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
Managed care (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 2005 file for Idaho, released by CMS in 10/2008. This table was produced on 04/23/2009.

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.

Nondual Beneficiaries