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STATISTICAL COMPENDIUM:
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2005
MINNESOTA

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TABLE ND.2

CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY[a, b]
NONDUAL BENEFICIARIES, MINNESOTA, 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	**373,172**	**1,436**	**55,060**	**104,026**	**212,209**	**441**	**1,655,576**	**5,362**	**562,885**	**338,680**	**745,575**	**3,074**
Age												
5 and younger	84,203	0	3,212	3	80,988	0	302,985	0	30,354	10	272,621	0
6-14	93,663	0	9,119	18	84,526	0	400,551	0	97,861	73	302,617	0
15-20	59,351	0	6,627	8,212	44,481	31	265,587	0	70,490	29,919	165,013	165
21-44	105,634	0	16,753	86,410	2,212	259	455,079	0	169,742	278,334	5,320	1,683
45-64	28,702	2	19,182	9,368	0	150	225,126	11	193,588	30,305	0	1,222
65-74	1,205	1,027	163	14	0	1	4,617	3,732	843	38	0	4
75-84	293	289	3	1	0	0	1,103	1,099	3	1	0	0
85 and older	119	118	1	0	0	0	524	520	4	0	0	0
Unknown	2	0	0	0	2	0	4	0	0	0	4	0
Gender												
Female	211,690	833	26,760	79,399	104,257	441	908,662	3,181	277,731	262,013	362,663	3,074
Male	161,482	603	28,300	24,627	107,952	0	746,914	2,181	285,154	76,667	382,912	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	190,601	294	33,442	60,285	96,292	288	890,191	1,472	345,458	192,922	348,089	2,250
African American	80,971	598	11,049	21,857	47,446	21	307,988	1,724	108,223	61,624	136,288	129
Other/unknown	101,600	544	10,569	21,884	68,471	132	457,397	2,166	109,204	84,134	261,198	695
Use of Nursing Facilities[c]												
Entire year	667	56	541	19	51	0	5,991	302	5,522	40	127	0
Part year	2,724	64	1,655	438	563	4	21,274	365	16,013	1,929	2,923	44
None	369,781	1,316	52,864	103,569	211,595	437	1,628,311	4,695	541,350	336,711	742,525	3,030
Maintenance Assistance Status												
Cash	277,057	907	40,837	85,206	150,107	0	1,225,865	3,079	434,379	280,717	507,690	0
Medically needy	7,143	120	1,662	4,172	1,189	0	29,248	752	11,871	14,123	2,502	0
Poverty-related	35,322	54	2,108	4,183	28,536	441	143,714	217	15,193	15,248	109,982	3,074
Other/unknown	53,650	355	10,453	10,465	32,377	0	256,749	1,314	101,442	28,592	125,401	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	125,834	369	49,487	26,441	49,110	427	987,702	2,101	530,515	130,980	321,125	2,981
FFS part year, with Rx claims	73,655	634	4,424	31,642	36,943	12	245,021	2,185	27,176	95,440	120,131	89
FFS part year, no Rx claims	173,683	433	1,149	45,943	126,156	2	422,853	1,076	5,194	112,260	304,319	4

Source: Data for this table are from the MAX 2005 file for Minnesota, 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, MINNESOTA, 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	**38.1**	**5.5**	**$479**	**$87**	**$5,695**	**8.4**	**373,172**
Age							
5 and younger	26.9	1.1	80	74	3,338	2.4	84,203
6-14	28.9	2.6	243	92	4,070	6.0	93,663
15-20	36.1	3.7	362	98	5,451	6.6	59,351
21-44	46.4	6.0	601	100	6,824	8.8	105,634
45-64	74.0	29.7	2,216	75	13,962	15.9	28,702
65-74	56.3	7.9	442	56	10,622	4.2	1,205
75-84	55.3	8.5	361	43	9,939	3.6	293
85 and older	65.5	16.9	581	34	17,086	3.4	119
Unknown	0.0	0.0	0	0	0	0.0	2
Basis of Eligibility[e]							
Aged	56.3	8.0	384	48	10,515	3.7	1,436
Disabled	82.7	28.5	2,650	93	23,453	11.3	55,060
Adults	40.1	2.1	133	62	2,865	4.6	104,026
Children	25.4	1.2	86	72	2,440	3.5	212,209
Unknown	52.6	8.2	675	82	6,495	10.4	441
Gender							
Female	40.2	5.8	433	75	5,147	8.4	211,690
Male	35.4	5.2	540	104	6,412	8.4	161,482
Unknown	0.0	0.0	0	0	0	0.0	0
Race							
White	43.4	7.5	645	86	6,854	9.4	190,601
African American	31.2	3.4	288	86	4,635	6.2	80,971
Other/unknown	33.6	3.6	320	90	4,365	7.3	101,600
Use of Nursing Facilities[f]							
Entire year	93.0	77.9	5,692	73	60,733	9.4	667
Part year	85.1	40.8	3,161	77	40,125	7.9	2,724
None	37.7	5.1	450	88	5,342	8.4	369,781
Maintenance Assistance Status							
Cash	38.4	5.7	491	86	5,620	8.7	277,057
Medically needy	39.6	6.7	519	77	7,137	7.3	7,143
Poverty related	30.8	2.5	175	70	2,882	6.1	35,322
Other/unknown	41.3	6.2	614	99	7,740	7.9	53,650

Source: Data for this table are from the MAX 2005 file for Minnesota, 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 fost 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, MINNESOTA, 2005

				Number of Rx, Percentage with:							Number	
Beneficiary Characteristics	Mean Number of Rx	Mean Rx $	Rx $ as a Percentage of All Medicaid FFS $[c]	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	Mean $, All Medicaid FFS $[d]	Beneficiaries	Benefit Months
All	**1.2**	**$108**	**8.4**	**61.9**	**24.2**	**5.4**	**5.7**	**2.2**	**0.6**	**$1,284**	**373,172**	**1,655,576**
Age												
5 and younger	0.3	22	2.4	73.1	23.2	2.3	1.1	0.2	0.0	928	84,203	302,985
6-14	0.6	57	6.0	71.1	21.1	4.0	3.3	0.4	0.0	952	93,663	400,551
15-20	0.8	81	6.6	63.9	25.1	5.4	4.6	0.9	0.1	1,218	59,351	265,587
21-44	1.4	140	8.8	53.6	27.7	7.5	7.8	2.7	0.7	1,584	105,634	455,079
45-64	3.8	283	15.9	26.0	22.3	10.8	20.6	14.7	5.4	1,780	28,702	225,126
65-74	2.1	115	4.2	43.7	23.0	10.5	14.4	5.7	2.6	2,772	1,205	4,617
75-84	2.3	96	3.6	44.7	22.9	8.9	14.3	6.8	2.4	2,640	293	1,103
85 and older	3.8	132	3.4	34.5	10.1	9.2	21.8	21.0	3.4	3,880	119	524
Unknown	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	0	2	4
Basis of Eligibility[e]												
Aged	2.1	103	3.7	43.7	22.8	9.7	14.8	6.8	2.2	2,816	1,436	5,362
Disabled	2.8	259	11.3	17.3	32.8	12.8	21.3	11.9	3.8	2,294	55,060	562,885
Adults	0.7	41	4.6	59.9	27.0	6.5	5.2	1.2	0.2	880	104,026	338,680
Children	0.3	25	3.5	74.6	20.6	2.9	1.8	0.2	0.0	694	212,209	745,575
Unknown	1.2	97	10.4	47.4	32.2	7.9	8.8	3.4	0.2	932	441	3,074
Gender												
Female	1.3	101	8.4	59.8	25.4	5.6	5.9	2.4	0.8	1,199	211,690	908,662
Male	1.1	117	8.4	64.6	22.6	5.1	5.4	2.0	0.4	1,386	161,482	746,914
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	1.6	138	9.4	56.6	25.3	6.5	7.5	3.1	1.0	1,467	190,601	890,191
African American	0.9	76	6.2	68.8	21.2	4.5	4.0	1.2	0.3	1,218	80,971	307,988
Other/unknown	0.8	71	7.3	66.4	24.4	4.0	3.7	1.2	0.3	970	101,600	457,397
Use of Nursing Facilities[f]												
Entire year	8.7	634	9.4	7.0	4.2	5.5	21.7	33.3	28.2	6,762	667	5,991
Part year	5.2	405	7.9	14.9	23.6	11.0	19.7	18.4	12.4	5,138	2,724	21,274
None	1.2	102	8.4	62.3	24.2	5.3	5.5	2.0	0.5	1,213	369,781	1,628,311
Maintenance Assistance Status												
Cash	1.3	111	8.7	61.6	24.4	5.4	5.6	2.3	0.7	1,270	277,057	1,225,865
Medically needy	1.6	127	7.3	60.4	20.9	5.7	7.6	4.0	1.4	1,743	7,143	29,248
Poverty related	0.6	43	6.1	69.2	23.5	3.1	2.7	1.1	0.3	708	35,322	143,714
Other/unknown	1.3	128	7.9	58.7	24.1	6.9	7.5	2.3	0.5	1,617	53,650	256,749

Source: Data for this table are from the MAX 2005 file for Minnesota, 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, MINNESOTA, 2005

	All Rx			Patented Brand-Name Drugs			Off-Patent Brand-Name Drugs			Generic Drugs		
Beneficiary Characteristics	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	**1.2**	**$108**	**$87**	**0.5**	**$85**	**$170**	**0.0**	**$4**	**$101**	**0.7**	**$19**	**$27**
Age												
5 and younger	0.3	22	74	0.1	17	156	0.0	1	66	0.2	4	25
6-14	0.6	57	92	0.3	48	145	0.0	2	93	0.3	7	27
15-20	0.8	81	98	0.4	67	170	0.0	3	81	0.4	11	27
21-44	1.4	140	100	0.5	110	209	0.1	6	105	0.8	24	29
45-64	3.8	283	75	1.4	213	154	0.1	11	115	2.3	58	25
65-74	2.1	115	56	0.7	87	118	0.1	4	58	1.3	25	20
75-84	2.3	96	43	0.8	76	93	0.1	3	42	1.4	17	13
85 and older	3.8	132	34	1.3	100	75	0.1	3	29	2.4	29	12
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility[d]												
Aged	2.1	103	48	0.7	79	106	0.1	3	47	1.3	21	16
Disabled	2.8	259	93	1.1	210	184	0.1	10	106	1.6	40	26
Adults	0.7	41	62	0.2	24	131	0.0	3	90	0.4	14	32
Children	0.3	25	72	0.2	19	119	0.0	1	85	0.2	5	28
Unknown	1.2	97	82	0.5	78	173	0.0	2	93	0.7	17	24
Gender												
Female	1.3	101	75	0.5	76	150	0.0	4	95	0.8	21	26
Male	1.1	117	104	0.5	96	195	0.0	4	110	0.6	16	27
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Race												
White	1.6	138	86	0.7	111	168	0.1	5	97	0.9	21	24
African American	0.9	76	86	0.3	62	193	0.0	3	96	0.5	11	21
Other/unknown	0.8	71	90	0.3	49	165	0.0	3	118	0.5	19	40
Use of Nursing Facilities[e]												
Entire year	8.7	634	73	3.0	484	161	0.3	22	74	5.4	127	24
Part year	5.2	405	77	1.8	304	169	0.2	15	94	3.3	86	26
None	1.2	102	88	0.5	81	171	0.0	4	102	0.7	17	27
Maintenance Assistance Status												
Cash	1.3	111	86	0.5	86	171	0.0	5	105	0.7	20	27
Medically needy	1.6	127	77	0.6	97	159	0.1	5	97	1.0	25	25
Poverty related	0.6	43	70	0.2	31	132	0.0	2	87	0.4	10	27
Other/unknown	1.3	128	99	0.6	108	179	0.0	4	86	0.6	15	24

Source: Data for this table are from the MAX 2005 file for Minnesota, 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 Minnesota, 0.4 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, MINNESOTA, 2005

	Number of Rx per Benefit Month Among Users				$ per Benefit Month Among Users				$ per Rx						Users[e]		
Therapeutic Category	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 Benes	Number of Benefit Months
Anti-infective Agents	0.3	0.1	0.0	0.2	$24	$15	$3	$6	$76	$225	$76	$28	174,937	$13,267,868	72,887	19.5	552,611
Biologicals	0.2	0.2	0.0	0.1	219	128	22	69	948	849	1,540	1,043	2,374	2,249,390	1,052	0.3	10,284
Antineoplastic Agents	0.6	0.2	0.0	0.4	126	100	1	25	216	666	179	59	5,409	1,167,785	1,002	0.3	9,273
Endocrine/Metabolic Drugs	0.7	0.2	0.0	0.4	43	30	4	9	63	125	82	23	174,448	11,026,642	32,868	8.8	259,416
Cardiovascular Agents	1.2	0.4	0.0	0.8	48	37	0	10	40	89	38	14	256,268	10,297,065	23,739	6.4	216,427
Respiratory Agents	0.6	0.3	0.0	0.2	40	34	1	5	70	108	63	22	149,528	10,430,795	32,029	8.6	258,273
Gastrointestinal Agents	0.6	0.4	0.0	0.2	63	57	1	5	105	162	65	21	121,497	12,815,919	22,750	6.1	204,803
Genitourinary Agents	0.4	0.2	0.0	0.2	22	16	2	5	57	88	62	26	25,625	1,471,733	7,725	2.1	65,485
CNS Drugs	1.2	0.6	0.0	0.6	130	114	1	14	111	189	104	26	462,147	51,261,456	46,766	12.5	395,126
Stimulants/Anti-obesity/Anorexia	0.8	0.6	0.0	0.2	67	60	1	6	88	101	85	38	86,183	7,562,007	13,756	3.7	112,985
Miscellaneous Psychological/ Neurological Agents	0.3	0.2	0.0	0.1	105	98	0	7	342	466	87	73	6,681	2,288,194	2,375	0.6	21,761
Analgesics and Anesthetics	0.6	0.1	0.0	0.5	34	13	5	16	55	178	212	30	227,235	12,520,372	45,632	12.2	365,721
Neuromuscular Agents	0.9	0.4	0.0	0.5	91	69	4	18	101	165	113	41	194,836	19,653,065	22,962	6.2	216,010
Nutritional Products	0.5	0.0	0.0	0.4	13	3	0	9	26	108	19	20	39,405	1,005,846	10,753	2.9	79,646
Hematological Agents	0.7	0.2	0.0	0.5	362	355	1	6	529	1,871	55	13	29,013	15,347,559	4,573	1.2	42,371
Topical Products	0.3	0.1	0.0	0.2	13	7	0	5	45	85	57	27	91,445	4,144,746	38,483	10.3	320,774
Miscellaneous Products	0.8	0.2	0.1	0.5	149	103	14	32	195	443	249	67	10,185	1,983,288	1,368	0.4	13,283
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	27	0	0	0	113	0	0	0	2,899	327,253	1,175	0.3	12,248
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.	2,060,115	178,820,983	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for Minnesota, 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 Minnesota, 0.4 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.

TABLE ND.7

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP[a, b, c]
NONDUAL BENEFICIARIES, MINNESOTA, 2005

		Users		Among Users			
Top 10 Drug Groups	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	$35,755,203	23,513	6.3	235,935	0.7	$221	$152
ANTICONVULSANT	18,038,830	19,954	5.3	198,988	0.8	120	91
MISC. HEMATOLOGICAL	13,012,640	1,149	0.3	10,794	0.6	2,051	1,206
ANTIDEPRESSANTS	12,696,539	47,440	12.7	411,662	0.5	57	31
ULCER DRUGS	9,275,941	21,933	5.9	200,867	0.5	94	46
ANTIASTHMATIC	7,610,348	36,874	9.9	306,024	0.4	69	25
STIMULANTS/ANTI-OBESITY/ANOREXIANTS	7,549,485	15,628	4.2	132,052	0.7	88	57
ANALGESICS - Narcotic	6,531,838	46,828	12.5	397,240	0.4	44	16
ANTIDIABETIC	5,257,252	12,017	3.2	110,071	0.7	72	48
ANTIHYPERLIPIDEMIC	5,130,259	8,695	2.3	86,954	0.6	99	59
Total	120,858,335	234,031		2,090,587	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for Minnesota, 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.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); 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[a, b, c]
NONDUAL BENEFICIARIES, MINNESOTA, 2005

	All Top 10 Drug Groups		ANTIPSYCHOTICS					ANTICONVULSANT				
Beneficiary Characteristics	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 $ 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	**1,109,193**	**$120,858,335**	**23,513**	**6.3**	**235,935**	**0.7**	**$152**	**19,954**	**5.3**	**198,988**	**0.8**	**$91**
Female												
All Females	625,682	57,288,595	11,719	5.5	115,617	0.6	139	11,418	5.4	111,143	0.7	85
Female, Disabled												
All Ages	486,226	47,365,252	8,649	32.3	94,088	0.7	151	8,335	31.1	91,764	0.8	90
5 and younger	5,387	447,112	19	1.6	177	0.5	90	224	18.5	2,442	0.6	61
6-14	23,474	2,239,109	477	16.3	5,305	0.5	100	771	26.4	8,818	0.8	96
15-20	27,055	2,795,283	724	28.8	8,006	0.6	118	746	29.6	8,515	0.8	105
21-44	151,175	16,322,105	3,654	42.1	39,015	0.7	154	3,124	36.0	34,051	0.8	107
45-64	278,228	25,478,048	3,758	33.2	41,464	0.7	162	3,457	30.5	37,846	0.7	71
65-74	907	83,595	17	16.2	121	1.1	207	13	12.4	92	0.4	39
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	139,456	9,923,343	3,070	1.7	21,529	0.5	83	3,083	1.7	19,379	0.6	62
5 and younger	4,751	294,117	23	0.1	157	0.5	89	95	0.2	637	0.5	57
6-14	23,594	1,897,772	557	1.3	5,345	0.6	100	363	0.9	3,132	0.7	72
15-20	26,858	2,022,555	792	2.7	6,578	0.5	81	526	1.8	4,350	0.6	70
21-44	65,886	4,269,895	1,413	2.1	7,622	0.4	71	1,735	2.6	9,071	0.5	56
45-64	15,488	1,250,665	232	4.0	1,539	0.5	81	317	5.4	1,901	0.6	64
65-74	1,812	124,920	27	4.5	131	0.8	106	32	5.3	177	0.6	38
75-84	573	40,289	16	10.7	95	0.8	127	9	6.0	75	0.9	50
85 and older	494	23,130	10	11.5	62	0.9	99	6	6.9	36	0.6	9
Male												
All Males	483,511	63,569,740	11,794	7.3	120,318	0.7	164	8,536	5.3	87,845	0.8	98
Male, Disabled												
All Ages	380,715	54,271,818	9,055	32.0	97,627	0.7	175	6,930	24.5	76,003	0.8	102
5 and younger	8,327	990,339	88	4.4	947	0.5	66	258	12.9	2,832	0.6	73
6-14	60,513	8,025,408	1,600	25.8	18,167	0.6	116	1,215	19.6	13,989	0.7	84
15-20	46,163	8,208,216	1,430	34.8	16,162	0.7	145	1,050	25.6	12,072	0.8	100
21-44	118,092	22,734,240	3,653	45.3	38,231	0.8	210	2,584	32.0	27,945	0.9	137
45-64	147,252	14,288,703	2,280	29.0	24,109	0.7	189	1,815	23.1	19,130	0.7	71
65-74	367	24,780	4	6.9	11	0.9	84	8	13.8	35	0.9	111
75-84	1	132	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

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, MINNESOTA, 2005

	All Top 10 Drug Groups		ANTIPSYCHOTICS					ANTICONVULSANT				
Beneficiary Characteristics	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
Male, Other Eligibles												
All Ages	102,796	9,297,922	2,739	2.1	22,691	0.6	117	1,606	1.2	11,842	0.6	71
5 and younger	7,527	803,964	42	0.1	322	0.5	49	121	0.3	815	0.6	74
6-14	44,135	4,047,454	1,186	2.8	10,637	0.6	119	528	1.2	4,647	0.6	75
15-20	28,845	2,868,234	1,079	4.6	9,432	0.7	123	464	2.0	3,880	0.7	81
21-44	14,208	992,768	337	1.6	1,729	0.5	89	350	1.6	1,688	0.5	46
45-64	6,154	458,714	67	1.8	394	0.5	92	123	3.3	688	0.5	45
65-74	1,243	87,703	19	4.3	124	0.7	148	14	3.2	95	0.8	50
75-84	477	28,371	5	3.6	34	0.8	212	1	0.7	6	0.7	55
85 and older	207	10,714	4	12.9	19	0.9	52	5	16.1	23	0.7	48
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 Minnesota, 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.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 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[a, b, c]
NONDUAL BENEFICIARIES, MINNESOTA, 2005

	MISC. HEMATOLOGICAL					ANTIDEPRESSANTS					ULCER DRUGS				
Beneficiary Characteristics	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean $ 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 $ 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 $ per Benefit Month
All	**1,149**	**0.3**	**10,794**	**0.6**	**$1,206**	**47,440**	**12.7**	**411,662**	**0.5**	**$31**	**21,933**	**5.9**	**200,867**	**0.5**	**$46**
Female															
All Females	564	0.3	5,442	0.6	60	31,761	15.0	264,357	0.5	32	14,015	6.6	127,490	0.5	46
Female, Disabled															
All Ages	472	1.8	4,949	0.6	60	17,045	63.7	184,287	0.6	34	9,113	34.1	100,229	0.5	50
5 and younger	2	0.2	23	0.7	29	32	2.6	339	0.5	6	278	23.0	2,878	0.4	28
6-14	6	0.2	59	0.5	26	516	17.7	5,768	0.5	17	306	10.5	3,537	0.5	35
15-20	5	0.2	59	0.6	62	919	36.5	10,173	0.6	26	412	16.4	4,703	0.4	40
21-44	50	0.6	536	0.4	44	6,358	73.2	67,954	0.5	35	2,680	30.9	29,630	0.5	47
45-64	404	3.6	4,238	0.6	63	9,190	81.2	99,879	0.6	36	5,407	47.8	59,273	0.5	55
65-74	5	4.8	34	0.5	61	30	28.6	174	0.6	32	30	28.6	208	0.5	51
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	92	0.0	493	0.5	52	14,716	8.0	80,070	0.4	26	4,902	2.7	27,261	0.4	28
5 and younger	1	0.0	3	1.7	18	19	0.0	169	0.4	6	475	1.2	2,669	0.3	16
6-14	0	0.0	0	0.0	0	999	2.4	8,413	0.5	19	296	0.7	2,100	0.3	25
15-20	1	0.0	3	0.3	32	2,748	9.4	19,168	0.4	23	706	2.4	4,599	0.3	20
21-44	48	0.1	260	0.5	46	9,392	13.9	44,117	0.4	27	2,649	3.9	13,461	0.3	29
45-64	36	0.6	199	0.4	55	1,422	24.3	7,498	0.5	34	612	10.5	3,657	0.4	42
65-74	4	0.7	19	0.9	119	81	13.5	393	0.6	22	117	19.5	527	0.5	45
75-84	2	1.3	9	0.9	30	29	19.3	143	0.6	20	26	17.3	118	0.6	54
85 and older	0	0.0	0	0.0	0	26	29.9	169	0.8	17	21	24.1	130	0.8	33
Male															
All Males	585	0.4	5,352	0.6	2,371	15,679	9.7	147,305	0.6	29	7,918	4.9	73,377	0.5	47
Male, Disabled															
All Ages	482	1.7	4,834	0.6	2,526	10,635	37.6	113,022	0.6	31	5,668	20.0	61,158	0.5	51
5 and younger	3	0.1	32	0.8	8,123	53	2.6	596	0.4	10	350	17.5	3,750	0.5	34
6-14	24	0.4	276	0.9	7,604	1,429	23.1	16,234	0.6	19	518	8.4	6,022	0.5	44
15-20	14	0.3	153	0.7	19,166	1,338	32.6	14,935	0.6	29	475	11.6	5,445	0.5	43
21-44	50	0.6	479	0.5	13,862	3,641	45.1	37,769	0.6	37	1,605	19.9	17,192	0.6	53
45-64	389	4.9	3,889	0.6	72	4,160	52.9	43,402	0.6	31	2,704	34.4	28,646	0.6	55
65-74	2	3.4	5	0.8	102	14	24.1	86	0.5	15	15	25.9	102	0.5	64
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	33.3	1	1.0	132
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

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, MINNESOTA, 2005

	MISC. HEMATOLOGICAL					ANTIDEPRESSANTS					ULCER DRUGS				
Beneficiary Characteristics	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean $ 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 $ 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 $ per Benefit Month
Male, Other Eligibles															
All Ages	103	0.1	518	0.6	920	5,044	3.8	34,283	0.5	25	2,250	1.7	12,219	0.4	29
5 and younger	4	0.0	23	1.2	14,149	31	0.1	219	0.5	8	618	1.5	3,329	0.4	18
6-14	7	0.0	53	0.4	1,788	1,518	3.6	12,556	0.6	22	255	0.6	1,842	0.4	33
15-20	3	0.0	17	0.8	1,707	1,655	7.1	12,885	0.5	27	340	1.5	2,295	0.4	25
21-44	29	0.1	107	0.6	66	1,360	6.3	6,070	0.4	27	660	3.1	2,883	0.4	35
45-64	42	1.1	227	0.5	62	407	11.1	2,198	0.5	28	260	7.1	1,289	0.5	38
65-74	14	3.2	74	0.6	65	41	9.3	171	0.5	15	83	18.7	385	0.5	37
75-84	2	1.4	9	0.7	56	20	14.3	125	0.6	21	28	20.0	158	0.6	37
85 and older	2	6.5	8	0.9	98	12	38.7	59	0.7	20	6	19.4	38	0.9	63
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 Minnesota, 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.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 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[a, b, c]
NONDUAL BENEFICIARIES, MINNESOTA, 2005

	ANTIASTHMATIC					STIMULANTS/ANTI-OBESITY/ANOREXIANTS					ANALGESICS - Narcotic				
Beneficiary Characteristics	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean $ 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 $ 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 $ per Benefit Month
All	**36,874**	**9.9**	**306,024**	**0.4**	**$25**	**15,628**	**4.2**	**132,052**	**0.7**	**$57**	**46,828**	**12.5**	**397,240**	**0.4**	**$16**
Female															
All Females	20,922	9.9	173,030	0.4	25	5,145	2.4	42,928	0.6	57	31,765	15.0	265,678	0.4	15
Female, Disabled															
All Ages	10,424	39.0	114,450	0.4	29	1,854	6.9	20,538	0.6	61	15,266	57.0	167,743	0.4	17
5 and younger	587	48.6	5,977	0.3	31	32	2.6	327	0.4	33	75	6.2	812	0.2	2
6-14	890	30.5	10,106	0.3	22	690	23.6	7,623	0.6	50	280	9.6	3,215	0.1	2
15-20	653	25.9	7,404	0.3	23	396	15.7	4,484	0.7	60	602	23.9	6,728	0.2	4
21-44	2,928	33.7	32,164	0.3	22	421	4.8	4,635	0.6	67	5,588	64.3	61,077	0.4	14
45-64	5,336	47.1	58,571	0.4	34	315	2.8	3,469	0.6	79	8,681	76.7	95,625	0.5	21
65-74	30	28.6	228	0.6	48	0	0.0	0	0.0	0	40	38.1	286	0.3	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	10,498	5.7	58,580	0.3	18	3,291	1.8	22,390	0.6	53	16,499	8.9	97,935	0.3	12
5 and younger	1,880	4.8	10,724	0.3	17	59	0.1	406	0.5	27	220	0.6	1,434	0.2	3
6-14	2,255	5.4	12,649	0.3	19	1,709	4.1	12,422	0.7	51	527	1.3	3,748	0.2	4
15-20	1,748	6.0	11,436	0.3	15	817	2.8	6,529	0.6	55	2,447	8.3	16,704	0.2	4
21-44	3,851	5.7	19,170	0.3	17	621	0.9	2,602	0.6	59	11,810	17.5	66,847	0.3	12
45-64	661	11.3	3,939	0.4	25	84	1.4	428	0.6	68	1,360	23.3	8,417	0.5	28
65-74	73	12.2	453	0.4	37	1	0.2	3	1.0	249	91	15.2	511	0.5	10
75-84	17	11.3	113	0.4	35	0	0.0	0	0.0	0	21	14.0	125	0.7	10
85 and older	13	14.9	96	0.7	40	0	0.0	0	0.0	0	23	26.4	149	0.6	15
Male															
All Males	15,952	9.9	132,994	0.4	25	10,483	6.5	89,124	0.7	58	15,063	9.3	131,562	0.4	19
Male, Disabled															
All Ages	7,783	27.5	85,313	0.4	28	4,149	14.7	45,696	0.7	58	9,274	32.8	98,130	0.4	21
5 and younger	965	48.2	10,418	0.3	27	128	6.4	1,361	0.4	28	162	8.1	1,794	0.1	1
6-14	2,064	33.3	23,613	0.3	23	2,452	39.6	27,085	0.7	55	515	8.3	5,931	0.1	2
15-20	985	24.0	11,274	0.3	22	1,036	25.2	11,706	0.7	64	720	17.5	8,191	0.2	2
21-44	1,296	16.1	14,126	0.4	29	399	4.9	4,229	0.7	71	3,012	37.3	31,203	0.4	18
45-64	2,453	31.2	25,742	0.5	36	134	1.7	1,315	0.7	65	4,851	61.7	50,922	0.5	29
65-74	20	34.5	140	0.3	18	0	0.0	0	0.0	0	14	24.1	89	0.9	25
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

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, MINNESOTA, 2005

	ANTIASTHMATIC					STIMULANTS/ANTI-OBESITY/ANOREXIANTS					ANALGESICS - Narcotic				
Beneficiary Characteristics	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	8,169	6.1	47,681	0.3	19	6,334	4.8	43,428	0.7	57	5,789	4.3	33,432	0.3	12
5 and younger	2,992	7.2	17,283	0.3	17	186	0.4	1,134	0.5	34	310	0.7	2,042	0.2	5
6-14	3,104	7.3	18,644	0.3	19	4,386	10.3	29,002	0.7	55	620	1.5	4,574	0.2	4
15-20	1,114	4.8	7,222	0.3	18	1,552	6.6	12,496	0.6	62	1,357	5.8	8,755	0.2	4
21-44	697	3.3	3,008	0.4	21	178	0.8	639	0.6	59	2,808	13.1	14,082	0.4	18
45-64	195	5.3	1,133	0.5	26	29	0.8	149	0.6	46	591	16.1	3,390	0.5	29
65-74	40	9.0	264	0.6	39	2	0.5	3	0.7	95	74	16.7	449	0.3	6
75-84	21	15.0	101	0.5	37	1	0.7	5	0.8	6	20	14.3	111	0.5	4
85 and older	6	19.4	26	0.4	49	0	0.0	0	0.0	0	9	29.0	29	0.6	8
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 Minnesota, 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.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 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[a, b, c]
NONDUAL BENEFICIARIES, MINNESOTA, 2005

	ANTIDIABETIC					ANTIHYPERLIPIDEMIC						
Beneficiary Characteristics	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean $ 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 $ per Benefit Month	Number of Beneficiaries	Number of Benefit Months
All	**12,017**	**3.2**	**110,071**	**0.7**	**$48**	**8,695**	**2.3**	**86,954**	**0.6**	**$59**	**373,172**	**1,655,576**
Female												
All Females	7,765	3.7	72,164	0.7	48	5,116	2.4	52,342	0.6	59	211,688	908,658
Female, Disabled												
All Ages	5,537	20.7	60,624	0.7	49	4,323	16.2	47,877	0.6	60	26,760	277,731
5 and younger	6	0.5	58	0.7	67	0	0.0	0	0.0	0	1,209	11,368
6-14	42	1.4	460	0.8	52	1	0.0	4	0.8	39	2,921	31,323
15-20	73	2.9	846	0.6	43	14	0.6	151	0.4	19	2,518	26,903
21-44	1,132	13.0	12,429	0.6	45	686	7.9	7,548	0.5	53	8,685	90,077
45-64	4,251	37.5	46,581	0.7	50	3,593	31.7	39,976	0.6	62	11,322	117,491
65-74	33	31.4	250	0.7	58	29	27.6	198	0.5	43	105	569
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	2,228	1.2	11,540	0.6	44	793	0.4	4,465	0.5	45	184,928	630,927
5 and younger	11	0.0	55	1.1	103	1	0.0	4	0.3	5	39,577	133,020
6-14	103	0.2	548	0.8	73	4	0.0	27	0.6	45	41,855	147,098
15-20	156	0.5	934	0.6	55	11	0.0	72	0.6	62	29,376	107,872
21-44	1,253	1.9	6,266	0.5	39	360	0.5	1,977	0.4	40	67,442	219,848
45-64	563	9.6	2,978	0.6	48	328	5.6	1,798	0.5	46	5,842	19,905
65-74	114	19.0	590	0.6	36	73	12.2	466	0.6	56	599	2,197
75-84	23	15.3	149	0.6	34	13	8.7	94	0.5	50	150	581
85 and older	5	5.7	20	1.0	16	3	3.4	27	0.9	120	87	406
Male												
All Males	4,252	2.6	37,907	0.7	47	3,579	2.2	34,612	0.6	59	161,482	746,914
Male, Disabled												
All Ages	3,084	10.9	32,581	0.7	48	2,934	10.4	31,451	0.6	60	28,300	285,154
5 and younger	6	0.3	72	1.2	45	2	0.1	24	0.1	2	2,003	18,986
6-14	41	0.7	475	0.7	49	1	0.0	7	0.1	1	6,198	66,538
15-20	89	2.2	966	0.6	45	31	0.8	362	0.5	35	4,109	43,587
21-44	647	8.0	6,808	0.7	46	647	8.0	6,964	0.6	54	8,068	79,665
45-64	2,287	29.1	24,146	0.7	48	2,245	28.6	24,032	0.6	63	7,860	76,097
65-74	14	24.1	114	0.7	37	8	13.8	62	0.5	44	58	274
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	3
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	4

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, MINNESOTA, 2005

	ANTIDIABETIC					ANTIHYPERLIPIDEMIC						
Beneficiary Characteristics	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean $ 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 $ per Benefit Month	Number of Beneficiaries	Number of Benefit Months
Male, Other Eligibles												
All Ages	1,168	0.9	5,326	0.6	43	645	0.5	3,161	0.5	45	133,182	461,760
5 and younger	12	0.0	44	0.5	51	1	0.0	11	0.1	0	41,414	139,611
6-14	90	0.2	490	0.7	51	1	0.0	9	1.1	36	42,689	155,592
15-20	89	0.4	461	0.7	61	12	0.1	93	0.3	10	23,348	87,225
21-44	464	2.2	1,941	0.6	47	275	1.3	1,250	0.5	39	21,439	65,489
45-64	409	11.1	1,827	0.6	36	275	7.5	1,292	0.5	51	3,678	11,633
65-74	79	17.8	406	0.6	28	64	14.4	390	0.6	47	443	1,577
75-84	19	13.6	106	0.8	14	15	10.7	100	0.7	61	140	519
85 and older	6	19.4	51	0.9	19	2	6.5	16	0.8	114	31	114
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	4

Source: Data for this table are from the MAX 2005 file for Minnesota, 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.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[a, b]
NONDUAL BENEFICIARIES, MINNESOTA, 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	**$634**	**8.7**	**667**	**5,991**
Age				
0-64	653	8.8	602	5,657
65-74	583	8.7	25	114
75-84	202	5.7	18	102
85 and older	134	5.8	22	118
Unknown	0	0.0	0	0
Gender				
Female	631	9.1	327	3,153
Male	637	8.2	340	2,838
Unknown	0	0.0	0	0
Race				
White	631	8.7	494	4,384
African American	651	9.2	75	703
Other/unknown	634	8.1	98	904
Basis of Eligibility[c]				
Aged	226	6.2	56	302
Disabled	672	9.0	541	5,522
Adults	90	1.6	19	40
Children	94	1.3	51	127
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 2005 file for Minnesota, 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 2,724 beneficiaries who were in nursing facilities for part of their enrollment and their 21,274 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[a, b, c, d, e]
NONDUAL BENEFICIARIES, MINNESOTA, 2005

	Number of Rx per Benefit Month Among Users				$ per Benefit Month Among Users				$ per Rx						Users		
Therapeutic Category	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	0.0	0.4	$61	$50	$4	$8	$102	$236	$91	$22	2,557	$260,628	418	62.7	4,238
Biologicals	0.1	0.0	0.0	0.1	3	1	0	2	28	23	0	30	125	3,490	115	17.2	1,273
Antineoplastic Agents	0.9	0.3	0.0	0.6	98	65	0	33	113	227	15	57	131	14,746	15	2.2	151
Endocrine/Metabolic Drugs	1.5	0.6	0.1	0.8	75	53	6	16	49	92	47	19	4,050	198,404	261	39.1	2,654
Cardiovascular Agents	2.1	0.6	0.0	1.5	77	59	0	17	37	93	33	12	8,386	306,113	398	59.7	3,978
Respiratory Agents	1.0	0.6	0.0	0.4	74	64	1	9	74	105	41	24	2,274	167,804	222	33.3	2,267
Gastrointestinal Agents	1.1	0.5	0.0	0.6	89	78	1	10	79	142	86	18	3,730	295,134	331	49.6	3,331
Genitourinary Agents	0.8	0.4	0.0	0.5	45	32	1	12	54	90	49	25	1,186	63,452	131	19.6	1,413
CNS Drugs	2.3	1.1	0.0	1.1	287	254	3	30	126	221	245	27	11,396	1,437,236	516	77.4	5,009
Stimulants/Anti-obesity/Anorexia	1.0	0.2	0.0	0.8	38	23	0	16	39	116	0	20	208	8,015	22	3.3	209
Miscellaneous Psychological/ Neurological Agents	0.7	0.7	0.0	0.0	211	207	1	3	302	318	130	77	270	81,527	43	6.4	387
Analgesics and Anesthetics	1.6	0.2	0.1	1.2	68	23	14	31	44	120	114	25	5,148	224,192	344	51.6	3,309
Neuromuscular Agents	1.6	0.4	0.0	1.1	121	63	4	54	75	151	86	47	6,105	458,981	365	54.7	3,802
Nutritional Products	0.9	0.0	0.1	0.8	15	0	2	13	17	20	19	16	1,794	30,037	191	28.6	1,945
Hematological Agents	1.4	0.3	0.1	0.9	96	86	2	8	69	267	18	8	2,068	143,514	158	23.7	1,502
Topical Products	0.6	0.1	0.0	0.4	24	11	3	10	40	93	96	22	2,271	90,162	367	55.0	3,807
Miscellaneous Products	0.5	0.1	0.0	0.4	27	18	0	8	58	287	99	21	174	10,080	36	5.4	379
Unknown Therapeutic Category	0.4	0.0	0.0	0.0	11	0	0	0	30	0	0	0	103	3,114	25	3.7	287
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.	51,976	3,796,629	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for Minnesota, 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 2,724 beneficiaries who were in nursing facilities for part of their enrollment and their 21,274 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.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 Minnesota, 0.4 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[a, b, c, d]
NONDUAL BENEFICIARIES, MINNESOTA, 2005

		Users				Among Users	
Top 10 Drug Groups in Nursing Facilities	Total Medicaid Rx $	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
ANTIPSYCHOTICS	$1,157,575	465	69.7	4,776	1.0	$235	$242
ANTICONVULSANT	376,983	371	55.6	3,885	1.1	89	97
ANTIDEPRESSANTS	237,154	529	79.3	5,248	0.9	52	45
ULCER DRUGS	203,908	345	51.7	3,504	0.8	71	58
ANTIHYPERLIPIDEMIC	171,875	183	27.4	1,961	0.9	101	88
ANTIDIABETIC	149,236	266	39.9	2,864	1.0	54	52
ANTIVIRAL	145,455	197	29.5	2,097	0.2	322	69
ANTIASTHMATIC	143,917	298	44.7	3,092	0.6	79	47
ANALGESICS - Narcotic	137,051	380	57.0	3,721	1.1	34	37
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	86,087	75	11.2	745	0.5	218	116
Total	2,809,241	3,109		31,893	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for Minnesota, 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 2,724 beneficiaries who were in nursing facilities for part of their enrollment and their 21,274 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.

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, MINNESOTA, 2005

	All Top 10 Drug Groups		ANTIPSYCHOTICS					ANTICONVULSANT				
Beneficiary Characteristics	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	**27,815**	**$2,809,241**	**465**	**69.7**	**4,776**	**1.0**	**$242**	**371**	**55.6**	**3,885**	**1.1**	**$97**
Female												
All Females	14,901	1,446,650	241	73.7	2,565	1.1	242	195	59.6	2,091	1.1	97
Female, Disabled												
All Ages	14,297	1,410,084	223	82.6	2,441	1.1	248	185	68.5	2,041	1.1	98
64 or younger	14,114	1,384,218	218	82.3	2,402	1.1	245	184	69.4	2,029	1.1	97
65-74	183	25,866	5	100.0	39	1.9	457	1	20.0	12	1.3	181
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	604	36,566	18	31.6	124	0.9	118	10	17.5	50	0.9	66
64 or younger	29	1,635	1	4.8	6	0.3	19	0	0.0	0	0.0	0
65-74	233	18,356	7	70.0	49	0.9	138	5	50.0	22	0.9	94
75-84	140	11,897	8	80.0	45	1.1	168	3	30.0	22	1.0	54
85 and older	202	4,678	2	12.5	24	0.8	10	2	12.5	6	0.8	8
Male												
All Males	12,914	1,362,591	224	65.9	2,211	0.9	243	176	51.8	1,794	1.1	97
Male, Disabled												
All Ages	12,539	1,345,113	210	77.5	2,150	0.9	248	168	62.0	1,743	1.1	99
64 or younger	12,521	1,344,504	207	77.5	2,145	0.9	249	166	62.2	1,741	1.1	99
65-74	18	609	3	75.0	5	0.6	8	2	50.0	2	1.0	14
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	375	17,478	14	20.3	61	0.8	71	8	11.6	51	0.8	41
64 or younger	78	5,547	7	14.3	28	0.6	42	3	6.1	26	0.5	36
65-74	89	4,032	2	33.3	9	0.6	52	3	50.0	17	1.3	57
75-84	133	4,145	3	37.5	10	0.9	174	0	0.0	0	0.0	0
85 and older	75	3,754	2	33.3	14	1.0	66	2	33.3	8	0.4	21
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 Minnesota, 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 2,724 beneficiaries who were in nursing facilities for part of their enrollment and their 21,274 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, MINNESOTA, 2005

	ANTIDEPRESSANTS					ULCER DRUGS					ANTIHYPERLIPIDEMIC				
Beneficiary Characteristics	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	**529**	**79.3**	**5,248**	**0.9**	**$45**	**345**	**51.7**	**3,504**	**0.8**	**$58**	**183**	**27.4**	**1,961**	**0.9**	**$88**
Female															
All Females	274	83.8	2,763	0.9	46	183	56.0	1,885	0.8	56	91	27.8	992	0.9	94
Female, Disabled															
All Ages	235	87.0	2,584	0.9	47	172	63.7	1,823	0.8	58	86	31.9	953	0.9	95
64 or younger	232	87.5	2,557	0.9	47	168	63.4	1,801	0.8	57	86	32.5	953	0.9	95
65-74	3	60.0	27	0.7	57	4	80.0	22	1.0	81	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	39	68.4	179	0.9	24	11	19.3	62	0.8	21	5	8.8	39	0.8	74
64 or younger	9	42.9	26	0.5	18	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	7	70.0	29	1.0	40	3	30.0	18	0.8	42	3	30.0	26	1.0	100
75-84	7	70.0	29	1.0	39	2	20.0	2	1.0	8	2	20.0	13	0.4	20
85 and older	16	100.0	95	0.9	16	6	37.5	42	0.8	13	0	0.0	0	0.0	0
Male															
All Males	255	75.0	2,485	0.9	44	162	47.6	1,619	0.8	60	92	27.1	969	0.8	81
Male, Disabled															
All Ages	231	85.2	2,377	0.9	45	149	55.0	1,546	0.8	61	88	32.5	941	0.9	83
64 or younger	229	85.8	2,375	0.9	45	148	55.4	1,545	0.8	61	87	32.6	937	0.9	83
65-74	2	50.0	2	1.0	7	1	25.0	1	1.0	12	1	25.0	4	1.0	105
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	24	34.8	108	0.7	26	13	18.8	73	0.9	48	4	5.8	28	0.6	15
64 or younger	12	24.5	39	0.7	38	3	6.1	13	0.8	112	0	0.0	0	0.0	0
65-74	5	83.3	30	0.6	15	5	83.3	19	0.9	57	1	16.7	6	0.2	13
75-84	3	37.5	20	1.0	27	4	50.0	31	0.8	15	2	25.0	18	0.8	11
85 and older	4	66.7	19	0.7	20	1	16.7	10	1.1	46	1	16.7	4	0.3	35
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 Minnesota, 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 2,724 beneficiaries who were in nursing facilities for part of their enrollment and their 21,274 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, MINNESOTA, 2005

	ANTIDIABETIC					ANTIVIRAL					ANTIASTHMATIC				
Beneficiary Characteristics	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	**266**	**39.9**	**2,864**	**1.0**	**$52**	**197**	**29.5**	**2,097**	**0.2**	**$69**	**298**	**44.7**	**3,092**	**0.6**	**$47**
Female															
All Females	157	48.0	1,750	1.0	50	102	31.2	1,072	0.1	4	166	50.8	1,792	0.6	49
Female, Disabled															
All Ages	147	54.4	1,678	1.0	51	91	33.7	1,015	0.1	4	154	57.0	1,710	0.6	50
64 or younger	144	54.3	1,642	1.0	51	89	33.6	997	0.1	4	151	57.0	1,692	0.6	50
65-74	3	60.0	36	0.8	29	2	40.0	18	0.2	6	3	60.0	18	0.7	66
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	10	17.5	72	0.6	37	11	19.3	57	0.2	8	12	21.1	82	0.6	34
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	4.8	1	1.0	19
65-74	5	50.0	46	0.6	39	4	40.0	16	0.3	8	6	60.0	32	0.6	62
75-84	2	20.0	20	0.6	36	2	20.0	11	0.2	2	0	0.0	0	0.0	0
85 and older	3	18.8	6	1.0	27	5	31.3	30	0.2	9	5	31.3	49	0.6	16
Male															
All Males	109	32.1	1,114	1.0	55	95	27.9	1,025	0.3	137	132	38.8	1,300	0.6	43
Male, Disabled															
All Ages	103	38.0	1,070	1.0	57	91	33.6	990	0.3	142	125	46.1	1,254	0.6	44
64 or younger	102	38.2	1,066	1.0	57	90	33.7	986	0.3	143	125	46.8	1,254	0.6	44
65-74	1	25.0	4	0.5	16	1	25.0	4	0.3	4	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	6	8.7	44	1.3	22	4	5.8	35	0.1	2	7	10.1	46	0.2	5
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	6.1	14	0.2	4
65-74	2	33.3	8	0.9	17	1	16.7	6	0.2	4	1	16.7	6	0.7	14
75-84	1	12.5	12	2.7	40	3	37.5	29	0.1	2	1	12.5	12	0.1	0
85 and older	3	50.0	24	0.8	14	0	0.0	0	0.0	0	2	33.3	14	0.1	6
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2005 file for Minnesota, 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 2,724 beneficiaries who were in nursing facilities for part of their enrollment and their 21,274 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.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, MINNESOTA, 2005

	ANALGESICS - Narcotic					MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL						
Beneficiary Characteristics	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	**380**	**57.0**	**3,721**	**1.1**	**$37**	**75**	**11.2**	**745**	**0.5**	**$116**	**667**	**5,991**
Female												
All Females	199	60.9	2,033	0.9	25	36	11.0	373	0.5	176	327	3,153
Female, Disabled												
All Ages	179	66.3	1,933	0.9	26	31	11.5	354	0.5	179	270	2,899
64 or younger	178	67.2	1,930	0.9	26	29	10.9	339	0.5	186	265	2,876
65-74	1	20.0	3	1.3	13	2	40.0	15	0.3	13	5	23
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	20	35.1	100	0.8	16	5	8.8	19	1.2	137	57	254
64 or younger	6	28.6	25	0.5	37	1	4.8	2	0.5	61	21	50
65-74	5	50.0	33	1.3	15	0	0.0	0	0.0	0	10	58
75-84	4	40.0	20	0.5	4	1	10.0	10	1.0	92	10	52
85 and older	5	31.3	22	0.6	5	3	18.8	7	1.0	138	16	94
Male												
All Males	181	53.2	1,688	1.4	51	39	11.5	372	0.5	55	340	2,838
Male, Disabled												
All Ages	169	62.4	1,634	1.4	52	32	11.8	353	0.5	52	271	2,623
64 or younger	168	62.9	1,630	1.4	52	32	12.0	353	0.5	52	267	2,614
65-74	1	25.0	4	0.8	5	0	0.0	0	0.0	0	4	9
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	12	17.4	54	0.8	19	7	10.1	19	0.9	111	69	215
64 or younger	4	8.2	9	0.4	7	3	6.1	9	0.3	40	49	117
65-74	3	50.0	12	1.1	62	0	0.0	0	0.0	0	6	24
75-84	4	50.0	29	0.7	5	3	37.5	6	1.2	86	8	50
85 and older	1	16.7	4	0.8	12	1	16.7	4	2.0	308	6	24
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 Minnesota, 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 2,724 beneficiaries who were in nursing facilities for part of their enrollment and their 21,274 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]
MINNESOTA, 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	**52,310**	**14.0**	**0.9**	**319,487**	**$17**	**$6,494,160**	**$20**	**3.6**	**373,172**
Age									
5 and younger	7,729	9.2	0.2	19,501	8	648,852	33	9.6	84,203
6-14	7,343	7.8	0.3	27,110	11	1,054,315	39	4.6	93,663
15-20	5,905	9.9	0.4	24,870	10	597,135	24	2.8	59,351
21-44	17,100	16.2	0.9	99,888	19	1,959,484	20	3.1	105,634
45-64	13,636	47.5	5.0	144,855	77	2,203,825	15	3.5	28,702
65-74	429	35.6	1.6	1,903	14	17,468	9	3.3	1,205
75-84	105	35.8	2.5	743	28	8,072	11	7.6	293
85 and older	63	52.9	5.2	617	42	5,009	8	7.2	119
Unknown	0	0.0	0.0	0	0	0	0	0.0	2
Basis of Eligibility[c]									
Aged	518	36.1	1.9	2,719	18	26,066	10	4.7	1,436
Disabled	26,382	47.9	4.8	264,284	87	4,783,835	18	3.3	55,060
Adults	11,024	10.6	0.2	24,070	7	735,502	31	5.3	104,026
Children	14,294	6.7	0.1	28,062	4	941,904	34	5.2	212,209
Unknown	92	20.9	0.8	352	16	6,853	19	2.3	441
Gender									
Female	32,258	15.2	0.9	197,685	19	4,097,304	21	4.5	211,690
Male	20,052	12.4	0.8	121,802	15	2,396,856	20	2.7	161,482
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Race									
White	27,391	14.4	1.1	208,960	20	3,843,294	18	3.1	190,601
African American	10,291	12.7	0.6	47,038	7	586,001	12	2.5	80,971
Other/unknown	14,628	14.4	0.6	63,489	20	2,064,865	33	6.4	101,600
Use of Nursing Facilities[d]									
Entire year	558	83.7	21.1	14,062	231	153,979	11	4.1	667
Part year	1,628	59.8	8.1	22,076	122	332,913	15	3.9	2,724
None	50,124	13.6	0.8	283,349	16	6,007,268	21	3.6	369,781
Maintenance Assistance Status									
Cash	41,036	14.8	0.9	259,717	18	5,121,019	20	3.8	277,057
Medically needy	1,129	15.8	1.1	8,118	15	109,596	14	3.0	7,143
Poverty related	3,033	8.6	0.3	11,012	9	317,980	29	5.1	35,322
Other/unknown	7,112	13.3	0.8	40,640	18	945,565	23	2.9	53,650

Source: Data for this table are from the MAX 2005 file for Minnesota, 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]
MINNESOTA, 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	**0.2**	**$4**	**$20**	**$0**	**$1**	**1,655,576**
Age						
5 and younger	0.1	2	33	0	0	302,985
6-14	0.1	3	39	0	1	400,551
15-20	0.1	2	24	0	0	265,587
21-44	0.2	4	20	0	1	455,079
45-64	0.6	10	15	0	2	225,126
65-74	0.4	4	9	0	0	4,617
75-84	0.7	7	11	0	0	1,103
85 and older	1.2	10	8	0	1	524
Unknown	0.0	0	0	0	0	4
Basis of Eligibility[c]						
Aged	0.5	5	10	0	0	5,362
Disabled	0.5	8	18	0	2	562,885
Adults	0.1	2	31	0	1	338,680
Children	0.0	1	34	0	0	745,575
Unknown	0.1	2	19	0	1	3,074
Gender						
Female	0.2	5	21	0	1	908,662
Male	0.2	3	20	0	1	746,914
Unknown	0.0	0	0	0	0	0
Race						
White	0.2	4	18	0	1	890,191
African American	0.2	2	12	0	0	307,988
Other/unknown	0.1	5	33	0	1	457,397
Use of Nursing Facilities[d]						
Entire year	2.3	26	11	0	5	5,991
Part year	1.0	16	15	0	3	21,274
None	0.2	4	21	0	1	1,628,311
Maintenance Assistance Status						
Cash	0.2	4	20	0	1	1,225,865
Medically needy	0.3	4	14	0	1	29,248
Poverty related	0.1	2	29	0	0	143,714
Other/unknown	0.2	4	23	0	1	256,749

Source: Data for this table are from the MAX 2005 file for Minnesota, released by CMS in 10/2008. This table was produced on 04/23/2009.
a. Table ND.12 includes the beneficaries 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 beneficaries 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]
MINNESOTA, 2005

Drug Category	Number of Users	Rx $ per User	Total Rx $	Rx $ as a Percentage of All Part D Excluded Rx $	Total Number Rx.	$ per Rx	Number Rx as a Percentage of All Part D Excluded Rx
All	**65,199**	**$100**	**$6,494,160**	**100.0**	**319,487**	**$20**	**100.0**
Anorexia or weight loss/gain	0	0	0	0.0	0	0	0.0
Fertility drugs	0	0	0	0.0	0	0	0.0
Drugs for cosmetic purposes	138	17	2,396	0.0	187	13	0.1
Cough and cold medications	3,382	76	257,244	4.0	6,420	40	2.0
Vitamins and minerals	4,283	109	466,167	7.2	24,578	19	7.7
Non-prescription drugs	44,032	72	3,165,654	48.7	217,170	15	68.0
Barbiturates	525	82	43,307	0.7	4,855	9	1.5
Benzodiazepines	11,519	115	1,319,008	20.3	60,581	22	19.0
Other Part D Excl Rx Drugs	1,320	940	1,240,384	19.1	5,696	218	1.8

Source: Data for this table are from the MAX 2005 file for Minnesota, released by CMS in 10/2008. This table was produced on 04/23/2009.
a. Table ND.13 includes the beneficaries 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.

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, MINNESOTA, 2005

	Number of Beneficiaries						Number of Benefit Months					
Beneficiary Characteristics	All	Aged	Blind/ Disabled	Adults	Children	Other/ Unknown	All	Aged	Blind/ Disabled	Adults	Children	Other/ Unknown
All	**613,240**	**2,669**	**56,233**	**167,901**	**385,995**	**442**	**5,660,566**	**26,024**	**596,018**	**1,406,412**	**3,628,992**	**3,120**
Age												
5 and younger	151,896	0	3,232	5	148,659	0	1,371,612	0	33,815	49	1,337,748	0
6-14	159,160	0	9,133	25	150,002	0	1,593,631	0	101,340	197	1,492,094	0
15-20	97,937	0	6,644	10,012	81,250	31	924,250	0	72,401	84,794	766,879	176
21-44	160,765	0	17,112	137,313	6,081	259	1,360,251	0	179,932	1,146,361	32,266	1,692
45-64	40,549	2	19,890	20,506	0	151	382,454	15	206,473	174,718	0	1,248
65-74	2,067	1,814	214	38	0	1	20,210	17,961	1,968	277	0	4
75-84	601	592	7	2	0	0	5,869	5,769	84	16	0	0
85 and older	262	261	1	0	0	0	2,284	2,279	5	0	0	0
Unknown	3	0	0	0	3	0	5	0	0	0	5	0
Gender												
Female	345,537	1,549	27,332	126,146	190,068	442	3,190,156	15,174	294,226	1,086,006	1,791,630	3,120
Male	267,703	1,120	28,901	41,755	195,927	0	2,470,410	10,850	301,792	320,406	1,837,362	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	330,939	707	34,202	104,101	191,641	288	3,051,231	6,803	363,851	864,947	1,813,348	2,282
African American	117,702	1,065	11,321	31,208	74,087	21	1,106,552	10,654	117,486	273,369	704,907	136
Other/unknown	164,599	897	10,710	32,592	120,267	133	1,502,783	8,567	114,681	268,096	1,110,737	702
Use of Nursing Facilities[c]												
Entire year	793	142	568	27	56	0	7,351	1,379	5,747	75	150	0
Part year	2,962	86	1,711	528	633	4	28,152	765	17,442	4,612	5,289	44
None	609,485	2,441	53,954	167,346	385,306	438	5,625,063	23,880	572,829	1,401,725	3,623,553	3,076
Maintenance Assistance Status												
Cash	390,636	1,789	41,445	118,176	229,226	0	3,635,239	18,760	456,376	998,263	2,161,840	0
Medically needy	8,165	176	1,766	5,034	1,189	0	54,172	1,395	13,701	35,614	3,462	0
Poverty related	49,276	89	2,228	4,421	42,096	442	447,823	712	17,561	27,468	398,962	3,120
Other/unknown	165,163	615	10,794	40,270	113,484	0	1,523,332	5,157	108,380	345,067	1,064,728	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	125,834	369	49,487	26,441	49,110	427	987,702	2,101	530,515	130,980	321,125	2,981
FFS part year, with Rx claims	73,655	634	4,424	31,642	36,943	12	736,301	6,621	46,243	306,025	377,287	125
FFS part year, no Rx claims	173,683	433	1,149	45,943	126,156	2	1,672,260	4,010	11,136	415,958	1,241,143	13
MC all year, with Rx claims	650	6	32	216	396	0	6,054	57	137	1,817	4,043	0
MC all year, no Rx claims	239,418	1,227	1,141	63,659	173,390	1	2,258,249	13,235	7,987	551,632	1,685,394	1

Source: Data for this table are from the MAX 2005 file for Minnesota, 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, MINNESOTA, 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	**613,240**	**5,660,566**	**373,172**	**1,655,576**	**0**	**4,004,990**
Fee-for-service (FFS) all year	125,834	987,702	125,834	987,702	0	0
FFS part year, with Rx claims	73,655	736,301	73,655	245,021	0	491,280
FFS part year, with no Rx claims	173,683	1,672,260	173,683	422,853	0	1,249,407
Managed care (MC) all year, with Rx claims	650	6,054	0	0	0	6,054
MC all year, with no Rx claims	239,418	2,258,249	0	0	0	2,258,249

Source: Data for this table are from the MAX 2005 file for Minnesota, 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.