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

LIST OF TABLES

OVERVIEW OF STUDY POPULATION

TABLE 1. OVERVIEW OF BENEFICIARY SELECTION CRITERIA FOR STUDY POPULATION

FOR ALL MEDICAID BENEFICIARIES

TABLE 2. CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY

TABLE 3. ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC

TABLE 4. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC

TABLE 5. AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC

TABLE 6. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY

TABLE 7. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP

FOR ALL NONDUAL BENEFICIARIES

TABLE ND.2. CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY

TABLE ND.3. ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC

TABLE ND.4. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC

TABLE ND.5. AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND

BENEFICIARY CHARACTERISTIC

TABLE ND.6. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY

TABLE ND.7-7D. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP

TABLE ND.8. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS, BY BENEFICIARY CHARACTERISTIC

TABLE ND.9. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS, BY BRAND STATUS AND

THERAPEUTIC CATEGORY

TABLE ND.10-10D. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS,
BY TOP 10 DRUG GROUP

TABLE ND.11. USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D AMONG NONDUALS, BY
BENEFICIARY CHARACTERISTIC

TABLE ND.12. USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D AMONG NONDUALS PER BENEFIT MONTH,
BY BENEFICIARY CHARACTERISTIC

TABLE ND.13. USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D FOR SELECTED DRUG CATEGORIES
AMONG NONDUALS

FOR DUAL ELIGIBLE BENEFICIARIES

TABLE D.2. CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY

TABLE D.3. ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC

TABLE D.4. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC

TABLE D.5. AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND

BENEFICIARY CHARACTERISTIC

TABLE D.6. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY

TABLE D.7-7D. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP

TABLE D.8. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS, BY BENEFICIARY CHARACTERISTIC

TABLE D.9. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS, BY BRAND STATUS AND

THERAPEUTIC CATEGORY

TABLE D.10-10D. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS,
BY TOP 10 DRUG GROUP

TABLE D.11. USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D AMONG DUALS, BY BENEFICIARY CHARACTERISTIC

TABLE D.12. USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D AMONG DUALS PER BENEFIT MONTH, BY

BENEFICIARY CHARACTERISTIC

TABLE D.13. USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D FOR SELECTED DRUG CATEGORIES AMONG DUALS

SUPPLEMENTAL TABLES

SUPPLEMENTAL TABLE 1. MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES

SUPPLEMENTAL TABLE 1A. MEDICAID PHARMACY REIMBURSEMENT FOR DISABLED DUAL ELIGIBLE BENEFICIARIES UNDER AGE 65

SUPPLEMENTAL TABLE 1B. MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 AND OLDER

SUPPLEMENTAL TABLE 1C. MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 TO 74

SUPPLEMENTAL TABLE 1D. MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 75 TO 84

SUPPLEMENTAL TABLE 1E. MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 85 AND OLDER

APPENDIX TABLES

APPENDIX TABLE A.1. CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS
OF ELIGIBILITY, NONDUAL BENEFICIARIES

APPENDIX TABLE A.2. MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS, NONDUAL BENEFICIARIES
APPENDIX TABLE A.3. CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY, DUAL ELIGIBLE BENEFICIARIES
APPENDIX TABLE A.4. MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS, DUAL ELIGIBLE BENEFICIARIES

TABLE ND.2
CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a, b}
NONDUAL BENEFICIARIES, MONTANA, 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	81,710	127	11,330	8,183	62,058	12	733,317	686	114,098	57,809	560,627	97
Age												
5 and younger	27,416	0	600	3	26,813	0	244,810	0	6,157	17	238,636	0
6-14	25,055	0	1,143	5	23,907	0	236,329	0	12,276	23	224,030	0
15-20	13,348	0	1,105	1,048	11,193	2	114,936	0	11,652	5,919	97,360	5
21-44	10,412	1	3,244	7,017	145	5	83,834	4	32,413	50,780	601	36
45-64	5,331	8	5,211	107	0	5	52,636	83	51,441	1,056	0	56
65-74	51	26	25	0	0	0	299	153	146	0	0	0
75-84	42	39	1	2	0	0	173	159	1	13	0	0
85 and older	55	53	1	1	0	0	300	287	12	1	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	44,435	74	5,696	7,671	30,982	12	391,779	426	58,167	52,749	280,340	97
Male	37,275	53	5,634	512	31,076	0	341,538	260	55,931	5,060	280,287	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	56,666	104	8,963	6,143	41,445	11	496,729	530	89,164	41,719	365,229	87
African American	875	0	92	41	742	0	8,024	0	958	240	6,826	0
Other/unknown	24,169	23	2,275	1,999	19,871	1	228,564	156	23,976	15,850	188,572	10
Use of Nursing Facilities^c												
Entire year	147	19	128	0	0	0	1,535	187	1,348	0	0	0
Part year	260	8	239	9	4	0	2,579	62	2,379	99	39	0
None	81,303	100	10,963	8,174	62,054	12	729,203	437	110,371	57,710	560,588	97
Maintenance Assistance Status												
Cash	31,284	29	10,215	1,833	19,207	0	302,439	206	105,698	16,878	179,657	0
Medically needy	667	79	529	15	44	0	3,827	325	3,240	17	245	0
Poverty-related	32,084	0	0	4,333	27,739	12	268,086	0	0	23,826	244,163	97
Other/unknown	17,675	19	586	2,002	15,068	0	158,965	155	5,160	17,088	136,562	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	81,710	127	11,330	8,183	62,058	12	733,317	686	114,098	57,809	560,627	97
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 Montana, 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, MONTANA, 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	57.2	7.2	\$518	\$72	\$4,170	12.4	81,710
Age							
5 and younger	56.3	2.5	97	39	2,255	4.3	27,416
6-14	50.1	3.9	301	77	2,795	10.8	25,055
15-20	55.4	5.6	428	76	4,342	9.8	13,348
21-44	70.3	13.1	1,138	87	6,972	16.3	10,412
45-64	74.6	38.7	2,713	70	14,457	18.8	5,331
65-74	56.9	16.0	800	50	3,893	20.6	51
75-84	26.2	15.1	1,223	81	6,515	18.8	42
85 and older	47.3	20.4	842	41	13,867	6.1	55
Unknown	0.0	0.0	0	0	0	0.0	0
Basis of Eligibility^e							
Aged	45.7	21.7	1,389	64	10,475	13.3	127
Disabled	73.0	28.7	2,476	86	14,057	17.6	11,330
Adults	68.9	7.2	375	52	4,423	8.5	8,183
Children	52.8	3.2	178	55	2,317	7.7	62,058
Unknown	83.3	27.9	1,641	59	11,859	13.8	12
Gender							
Female	59.5	8.0	519	65	4,002	13.0	44,435
Male	54.5	6.2	517	83	4,370	11.8	37,275
Unknown	0.0	0.0	0	0	0	0.0	0
Race							
White	63.6	8.6	636	74	4,279	14.9	56,666
African American	63.8	5.9	409	69	3,358	12.2	875
Other/unknown	42.0	3.8	247	65	3,944	6.3	24,169
Use of Nursing Facilities^f							
Entire year	98.0	76.6	4,783	62	51,045	9.4	147
Part year	92.3	61.8	4,031	65	46,293	8.7	260
None	57.0	6.9	499	73	3,950	12.6	81,303
Maintenance Assistance Status							
Cash	57.5	11.4	906	80	5,779	15.7	31,284
Medically needy	62.5	24.6	2,083	85	17,267	12.1	667
Poverty related	54.7	2.9	136	47	1,798	7.6	32,084
Other/unknown	61.2	6.8	467	69	5,132	9.1	17,675

Source: Data for this table are from the MAX 2005 file for Montana, 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, MONTANA, 2005

Beneficiary Characteristics	Mean Number of Rx	Mean Rx \$	Number of Rx, Percentage with:								Number	
			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	0.8	\$58	12.4	42.8	45.1	4.7	4.7	2.0	0.6	\$465	81,710	733,317
Age												
5 and younger	0.3	11	4.3	43.7	54.1	1.6	0.5	0.0	0.0	253	27,416	244,810
6-14	0.4	32	10.8	49.9	42.8	4.0	3.0	0.3	0.0	296	25,055	236,329
15-20	0.7	50	9.8	44.6	43.3	6.5	4.7	0.8	0.1	504	13,348	114,936
21-44	1.6	141	16.3	29.7	43.7	10.0	11.1	4.5	1.0	866	10,412	83,834
45-64	3.9	275	18.8	25.4	18.1	9.4	21.8	18.0	7.4	1,464	5,331	52,636
65-74	2.7	137	20.6	43.1	13.7	5.9	15.7	19.6	2.0	664	51	299
75-84	3.7	297	18.8	73.8	4.8	7.1	2.4	7.1	4.8	1,582	42	173
85 and older	3.7	154	6.1	52.7	9.1	5.5	20.0	10.9	1.8	2,542	55	300
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Basis of Eligibility^e												
Aged	4.0	257	13.3	54.3	11.0	5.5	15.0	9.4	4.7	1,939	127	686
Disabled	2.9	246	17.6	27.0	26.8	10.4	19.0	12.4	4.4	1,396	11,330	114,098
Adults	1.0	53	8.5	31.1	50.8	9.6	7.1	1.4	0.1	626	8,183	57,809
Children	0.4	20	7.7	47.2	47.8	3.1	1.8	0.2	0.0	257	62,058	560,627
Unknown	3.5	203	13.8	16.7	25.0	25.0	16.7	8.3	8.3	1,467	12	97
Gender												
Female	0.9	59	13.0	40.5	46.2	5.1	4.9	2.4	0.9	454	44,435	391,779
Male	0.7	57	11.8	45.5	43.9	4.3	4.5	1.6	0.4	477	37,275	341,538
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	1.0	73	14.9	36.4	48.8	5.6	5.8	2.5	0.8	488	56,666	496,729
African American	0.6	45	12.2	36.2	51.9	6.4	3.8	1.5	0.2	366	875	8,024
Other/unknown	0.4	26	6.3	58.0	36.2	2.6	2.2	0.8	0.2	417	24,169	228,564
Use of Nursing Facilities^f												
Entire year	7.3	458	9.4	2.0	3.4	8.2	24.5	40.8	21.1	4,888	147	1,535
Part year	6.2	406	8.7	7.7	10.8	8.8	25.8	28.8	18.1	4,667	260	2,579
None	0.8	56	12.6	43.0	45.3	4.7	4.6	1.9	0.5	441	81,303	729,203
Maintenance Assistance Status												
Cash	1.2	94	15.7	42.5	39.3	5.5	7.3	4.0	1.4	598	31,284	302,439
Medically needy	4.3	363	12.1	37.5	13.6	8.1	18.7	16.3	5.7	3,009	667	3,827
Poverty related	0.3	16	7.6	45.3	49.4	3.5	1.7	0.1	0.0	215	32,084	268,086
Other/unknown	0.8	52	9.1	38.8	49.0	5.4	5.1	1.4	0.3	571	17,675	158,965

Source: Data for this table are from the MAX 2005 file for Montana, 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, MONTANA, 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	\$58	\$72	0.3	\$42	\$147	0.0	\$3	\$102	0.5	\$13	\$27
Age												
5 and younger	0.3	11	39	0.1	7	90	0.0	0	52	0.2	3	16
6-14	0.4	32	77	0.2	27	125	0.0	1	76	0.2	4	22
15-20	0.7	50	76	0.3	40	147	0.0	2	62	0.4	8	23
21-44	1.6	141	87	0.5	102	204	0.1	8	109	1.1	32	30
45-64	3.9	275	70	1.2	176	145	0.2	21	134	2.5	77	30
65-74	2.7	137	50	0.9	87	94	0.1	5	42	1.7	45	27
75-84	3.7	297	81	1.6	237	145	0.4	10	27	1.7	50	30
85 and older	3.7	154	41	0.7	55	75	0.4	36	90	2.6	63	25
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility^d												
Aged	4.0	257	64	1.2	167	137	0.4	21	57	2.4	69	29
Disabled	2.9	246	86	1.0	175	180	0.1	15	128	1.8	56	32
Adults	1.0	53	52	0.3	36	136	0.0	3	68	0.7	14	20
Children	0.4	20	55	0.1	15	104	0.0	1	64	0.2	4	19
Unknown	3.5	203	59	1.4	147	107	0.1	5	76	2.0	52	26
Gender												
Female	0.9	59	65	0.3	41	140	0.0	3	93	0.6	14	25
Male	0.7	57	83	0.3	42	155	0.0	3	116	0.4	11	30
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Race												
White	1.0	73	74	0.4	53	148	0.0	4	103	0.6	16	27
African American	0.6	45	69	0.3	35	129	0.0	2	72	0.3	7	21
Other/unknown	0.4	26	65	0.1	18	140	0.0	2	98	0.3	7	25
Use of Nursing Facilities^e												
Entire year	7.3	458	62	2.2	283	131	0.6	32	53	4.6	142	31
Part year	6.2	406	65	1.7	257	148	0.4	33	92	4.1	116	28
None	0.8	56	73	0.3	40	147	0.0	3	104	0.5	12	26
Maintenance Assistance Status												
Cash	1.2	94	80	0.4	67	167	0.0	5	114	0.7	21	29
Medically needy	4.3	363	85	1.4	253	187	0.2	23	101	2.7	87	32
Poverty related	0.3	16	47	0.1	12	96	0.0	1	56	0.2	4	18
Other/unknown	0.8	52	69	0.3	39	127	0.0	3	98	0.4	10	24

Source: Data for this table are from the MAX 2005 file for Montana, 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 Montana, 0.6 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, MONTANA, 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	0.1	0.0	0.2	\$10	\$5	\$2	\$3	\$45	\$100	\$66	\$23	72,490	\$3,250,434	30,893	37.8	318,643
Biologicals	0.3	0.2	0.0	0.0	240	187	40	13	910	827	3,969	470	494	449,765	198	0.2	1,876
Antineoplastic Agents	0.6	0.2	0.0	0.4	169	146	0	23	294	882	60	56	1,297	381,298	214	0.3	2,260
Endocrine/Metabolic Drugs	0.5	0.2	0.0	0.3	33	23	3	7	60	121	62	23	48,862	2,933,396	8,818	10.8	89,591
Cardiovascular Agents	1.0	0.3	0.0	0.7	41	28	0	12	39	90	21	17	53,641	2,109,328	4,825	5.9	51,693
Respiratory Agents	0.4	0.2	0.0	0.2	22	19	0	3	59	105	56	16	61,212	3,608,838	15,572	19.1	162,777
Gastrointestinal Agents	0.4	0.1	0.0	0.3	32	24	0	8	79	173	62	30	20,305	1,609,254	4,822	5.9	50,499
Genitourinary Agents	0.3	0.1	0.0	0.1	15	11	1	4	53	82	57	26	6,877	367,088	2,423	3.0	24,146
CNS Drugs	1.0	0.5	0.0	0.5	110	93	1	16	108	184	134	31	107,563	11,625,940	10,160	12.4	105,822
Stimulants/Anti-obesity/Anorexia	0.8	0.6	0.0	0.1	70	64	1	5	92	103	73	38	31,291	2,871,291	3,853	4.7	41,128
Miscellaneous Psychological/ Neurological Agents	0.4	0.3	0.0	0.1	183	174	0	9	522	642	118	114	1,174	613,178	308	0.4	3,347
Analgesics and Anesthetics	0.5	0.0	0.0	0.5	31	8	8	14	56	202	255	30	71,779	3,995,645	13,043	16.0	130,946
Neuromuscular Agents	0.8	0.3	0.0	0.5	75	52	4	19	89	153	84	42	50,282	4,496,809	5,607	6.9	60,284
Nutritional Products	0.3	0.0	0.0	0.3	4	0	0	4	14	23	13	13	20,231	278,195	7,008	8.6	70,460
Hematological Agents	0.6	0.1	0.1	0.3	208	182	2	24	371	1,259	24	74	5,815	2,154,811	1,028	1.3	10,377
Topical Products	0.2	0.1	0.0	0.1	7	4	0	3	38	76	42	21	31,265	1,189,711	15,643	19.1	163,454
Miscellaneous Products	0.5	0.2	0.0	0.3	163	129	8	26	327	712	261	90	1,185	387,728	230	0.3	2,385
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	9	0	0	0	44	0	0	0	580	25,641	270	0.3	2,884
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.	586,343	42,348,350	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for Montana, 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.medispn.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 Montana, 0.6 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.medispn.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, MONTANA, 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	\$8,115,909	5,170	6.3	56,976	0.6	\$225	\$142
ANTICONVULSANT	3,951,323	4,425	5.4	48,488	0.7	110	81
ANTIDEPRESSANTS	3,060,613	9,440	11.6	99,546	0.5	60	31
STIMULANTS/ANTI-OBESITY/ANOREXIANTS	2,871,291	4,518	5.5	48,651	0.6	92	59
ANALGESICS - Narcotic	2,780,969	15,501	19.0	157,854	0.3	51	18
ASTHMA/ANTI-ASTHMATIC	2,624,583	13,007	15.9	137,604	0.3	66	19
MISC. HEMATOLOGICAL	1,243,655	191	0.2	2,009	0.5	1,143	619
MISC. ENDOCRINE	1,199,435	642	0.8	7,193	0.5	311	167
ANTIDIABETIC	1,078,672	2,114	2.6	22,614	0.7	70	48
ULCER DRUGS	1,070,488	4,612	5.6	48,838	0.4	51	22
Total	27,996,938	59,620		629,773	n.a.	n.a.	n.a.

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

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, MONTANA, 2005

Beneficiary Characteristics	All Top 10 Drug Groups			ANTIPSYCHOTICS				ANTICONVULSANT				
	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	290,031	\$27,996,938	5,170	6.3	56,976	0.6	\$142	4,425	5.4	48,488	0.7	\$82
Female												
All Females	165,098	13,538,306	2,561	5.8	28,122	0.6	125	2,553	5.7	27,777	0.7	77
Female, Disabled												
All Ages	108,043	9,649,293	1,656	29.1	18,495	0.6	147	1,817	31.9	20,018	0.7	77
5 and younger	538	54,096	1	0.4	12	0.1	1	30	12.2	341	0.5	73
6-14	2,797	342,992	68	18.5	750	0.7	147	85	23.1	960	0.8	109
15-20	3,886	435,755	142	33.8	1,566	0.6	108	93	22.1	1,023	0.7	85
21-44	30,580	2,946,032	634	38.0	7,117	0.6	137	643	38.5	7,044	0.7	81
45-64	70,183	5,866,384	811	27.2	9,050	0.7	161	966	32.4	10,650	0.7	71
65-74	59	4,034	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	57,055	3,889,013	905	2.3	9,627	0.5	84	736	1.9	7,759	0.7	78
5 and younger	4,074	280,040	27	0.2	313	0.5	63	48	0.4	531	0.5	62
6-14	16,415	1,434,230	274	2.4	3,043	0.5	102	161	1.4	1,755	0.8	91
15-20	16,291	1,110,378	354	5.0	3,735	0.4	82	222	3.1	2,317	0.6	63
21-44	18,509	936,806	229	3.4	2,286	0.4	63	289	4.3	2,991	0.7	85
45-64	1,196	85,011	17	24.3	202	0.8	125	10	14.3	111	1.0	48
65-74	129	7,904	0	0.0	0	0.0	0	1	7.7	12	2.3	208
75-84	122	10,705	1	4.2	12	2.0	438	2	8.3	17	0.8	64
85 and older	319	23,939	3	9.4	36	0.6	58	3	9.4	25	1.3	27
Male												
All Males	124,933	14,458,632	2,609	7.0	28,854	0.7	159	1,872	5.0	20,711	0.8	87
Male, Disabled												
All Ages	66,376	8,974,569	1,446	25.7	16,110	0.7	183	1,156	20.5	12,767	0.7	80
5 and younger	1,084	124,888	9	2.5	101	0.6	113	38	10.7	412	0.7	115
6-14	8,397	1,291,001	293	37.8	3,284	0.7	161	159	20.5	1,817	0.7	99
15-20	7,078	1,515,953	251	36.6	2,853	0.6	147	139	20.3	1,585	0.7	91
21-44	17,854	2,936,940	510	32.4	5,625	0.7	222	388	24.6	4,202	0.7	79
45-64	31,857	3,098,005	382	17.1	4,240	0.7	176	430	19.3	4,733	0.7	67
65-74	106	7,782	1	7.7	7	0.9	321	2	15.4	18	0.4	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

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, MONTANA, 2005

Beneficiary Characteristics	All Top 10 Drug Groups			ANTIPSYCHOTICS				ANTICONVULSANT				
	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	58,557	5,484,063	1,163	3.7	12,744	0.7	129	716	2.3	7,944	0.8	99
5 and younger	6,751	413,955	34	0.2	393	0.4	78	58	0.4	638	0.3	30
6-14	31,374	2,964,399	620	5.1	6,831	0.6	121	313	2.6	3,390	0.7	73
15-20	13,586	1,244,761	387	7.5	4,078	0.7	117	158	3.1	1,695	0.8	85
21-44	5,647	745,395	104	21.0	1,245	0.9	214	166	33.5	1,981	1.2	173
45-64	790	76,657	8	16.0	96	0.9	217	15	30.0	178	1.3	154
65-74	60	4,324	1	7.7	6	1.0	26	1	7.7	6	1.3	55
75-84	213	28,136	6	35.3	63	0.7	277	3	17.6	36	1.0	69
85 and older	136	6,436	3	13.6	32	0.5	38	2	9.1	20	1.0	32
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 Montana, 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, MONTANA, 2005

Beneficiary Characteristics	ANTIDEPRESSANTS					STIMULANTS/ANTI-OBESITY/ANOREXIANTS					ANALGESICS - Narcotic				
	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
All	9,440	11.6	99,546	0.5	\$31	4,518	5.5	48,651	0.6	\$59	15,501	19.0	157,854	0.3	\$18
Female															
All Females	6,453	14.5	67,311	0.5	31	1,445	3.3	15,742	0.6	56	10,960	24.7	109,307	0.3	15
Female, Disabled															
All Ages	3,366	59.1	37,310	0.6	37	314	5.5	3,594	0.7	73	4,040	70.9	45,094	0.5	31
5 and younger	1	0.4	12	0.2	1	1	0.4	8	0.1	52	21	8.6	245	0.1	1
6-14	57	15.5	663	0.6	21	76	20.7	856	0.7	67	53	14.4	616	0.2	3
15-20	139	33.1	1,534	0.6	34	58	13.8	679	0.7	61	122	29.0	1,388	0.1	2
21-44	1,097	65.7	12,215	0.5	36	77	4.6	893	0.6	76	1,333	79.9	15,011	0.5	31
45-64	2,071	69.5	22,882	0.6	38	102	3.4	1,158	0.7	84	2,507	84.1	27,812	0.6	34
65-74	1	8.3	4	1.0	51	0	0.0	0	0.0	0	4	33.3	22	0.3	7
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	3,087	8.0	30,001	0.4	23	1,131	2.9	12,148	0.6	51	6,920	17.9	64,213	0.2	3
5 and younger	14	0.1	152	0.4	15	33	0.3	392	0.3	24	325	2.5	3,493	0.1	1
6-14	529	4.5	5,762	0.4	18	785	6.7	8,487	0.6	53	704	6.0	7,600	0.1	1
15-20	1,267	17.8	12,655	0.4	23	268	3.8	2,829	0.5	49	2,020	28.4	19,508	0.2	2
21-44	1,241	18.6	11,069	0.4	24	43	0.6	424	0.4	37	3,815	57.2	33,033	0.2	3
45-64	30	42.9	303	0.9	53	2	2.9	16	0.8	34	39	55.7	406	0.5	24
65-74	1	7.7	10	0.8	40	0	0.0	0	0.0	0	1	7.7	12	1.4	13
75-84	3	12.5	26	0.7	38	0	0.0	0	0.0	0	2	8.3	17	1.1	28
85 and older	2	6.3	24	1.0	35	0	0.0	0	0.0	0	14	43.8	144	0.4	98
Male															
All Males	2,987	8.0	32,235	0.5	31	3,073	8.2	32,909	0.7	61	4,541	12.2	48,547	0.4	25
Male, Disabled															
All Ages	1,613	28.6	17,645	0.5	34	548	9.7	6,178	0.7	71	2,359	41.9	25,640	0.5	45
5 and younger	1	0.3	12	0.6	4	12	3.4	136	0.3	27	42	11.8	467	0.2	2
6-14	178	23.0	2,031	0.5	27	286	36.9	3,219	0.7	66	87	11.2	974	0.1	2
15-20	205	29.9	2,321	0.6	37	147	21.5	1,697	0.7	81	159	23.2	1,797	0.2	7
21-44	482	30.6	5,162	0.5	37	61	3.9	645	0.7	75	694	44.1	7,581	0.5	31
45-64	741	33.2	8,081	0.5	33	42	1.9	481	0.8	74	1,372	61.5	14,783	0.7	61
65-74	6	46.2	38	0.3	9	0	0.0	0	0.0	0	5	38.5	38	0.3	12
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, MONTANA, 2005

Beneficiary Characteristics	ANTIDEPRESSANTS					STIMULANTS/ANTI-OBESITY/ANOREXIANTS					ANALGESICS - Narcotic				
	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	1,374	4.3	14,590	0.5	27	2,525	8.0	26,731	0.7	58	2,182	6.9	22,907	0.1	2
5 and younger	29	0.2	327	0.3	9	127	0.9	1,417	0.4	32	479	3.5	5,269	0.1	1
6-14	695	5.7	7,540	0.5	23	1,893	15.4	20,008	0.7	60	752	6.1	8,063	0.1	1
15-20	526	10.2	5,348	0.5	27	478	9.3	5,002	0.6	61	807	15.7	8,205	0.2	2
21-44	99	20.0	1,121	0.8	52	27	5.4	304	0.6	53	113	22.8	1,094	0.3	15
45-64	15	30.0	164	0.7	70	0	0.0	0	0.0	0	12	24.0	129	0.4	18
65-74	1	7.7	6	0.8	68	0	0.0	0	0.0	0	6	46.2	33	0.5	28
75-84	3	17.6	27	1.1	66	0	0.0	0	0.0	0	5	29.4	40	0.5	15
85 and older	6	27.3	57	0.9	50	0	0.0	0	0.0	0	8	36.4	74	0.2	4
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 Montana, 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, MONTANA, 2005

Beneficiary Characteristics	ANTIASTHMATIC					MISC. HEMATOLOGICAL					MISC. ENDOCRINE				
	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	13,007	15.9	137,604	0.3	\$19	191	0.2	2,009	0.5	\$619	642	0.8	7,193	0.5	\$167
Female															
All Females	6,807	15.3	71,816	0.3	20	109	0.2	1,171	0.5	59	415	0.9	4,672	0.5	100
Female, Disabled															
All Ages	2,363	41.5	26,274	0.4	31	106	1.9	1,143	0.6	59	314	5.5	3,590	0.6	79
5 and younger	93	38.0	1,043	0.2	17	0	0.0	0	0.0	0	2	0.8	24	0.6	227
6-14	63	17.1	679	0.3	19	0	0.0	0	0.0	0	12	3.3	137	0.3	215
15-20	76	18.1	875	0.3	22	0	0.0	0	0.0	0	10	2.4	118	0.6	378
21-44	620	37.1	6,922	0.3	22	9	0.5	105	0.5	57	37	2.2	414	0.5	93
45-64	1,510	50.7	16,743	0.5	37	95	3.2	1,025	0.6	59	253	8.5	2,897	0.6	58
65-74	1	8.3	12	0.1	1	2	16.7	13	0.8	87	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	4,444	11.5	45,542	0.2	13	3	0.0	28	0.3	35	101	0.3	1,082	0.5	170
5 and younger	1,374	10.4	14,661	0.2	10	1	0.0	12	0.1	2	9	0.1	87	0.7	424
6-14	1,335	11.5	14,258	0.3	16	0	0.0	0	0.0	0	55	0.5	581	0.4	202
15-20	995	14.0	10,048	0.3	14	1	0.0	4	0.5	62	13	0.2	140	0.4	98
21-44	707	10.6	6,231	0.2	10	0	0.0	0	0.0	0	13	0.2	156	0.8	65
45-64	23	32.9	257	0.5	33	1	1.4	12	0.5	60	5	7.1	58	0.7	50
65-74	7	53.8	58	0.9	65	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	2	8.3	17	1.3	97	0	0.0	0	0.0	0	1	4.2	12	1.0	74
85 and older	1	3.1	12	0.2	3	0	0.0	0	0.0	0	5	15.6	48	0.7	37
Male															
All Males	6,200	16.6	65,788	0.3	18	82	0.2	838	0.5	1,402	227	0.6	2,521	0.5	290
Male, Disabled															
All Ages	1,428	25.3	15,596	0.4	32	80	1.4	821	0.5	1,427	92	1.6	997	0.6	566
5 and younger	154	43.4	1,673	0.3	22	0	0.0	0	0.0	0	3	0.8	36	0.6	418
6-14	196	25.3	2,257	0.3	25	1	0.1	12	1.1	12,225	24	3.1	280	0.6	357
15-20	124	18.1	1,443	0.4	23	3	0.4	36	0.6	17,762	9	1.3	94	0.5	206
21-44	248	15.7	2,716	0.4	24	12	0.8	130	0.6	2,168	22	1.4	228	0.9	1,804
45-64	701	31.4	7,477	0.5	40	63	2.8	634	0.5	164	34	1.5	359	0.5	53
65-74	5	38.5	30	0.6	40	1	7.7	9	0.3	40	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.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, MONTANA, 2005

Beneficiary Characteristics	ANTIASTHMATIC					MISC. HEMATOLOGICAL					MISC. ENDOCRINE				
	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	4,772	15.1	50,192	0.2	14	2	0.0	17	0.2	190	135	0.4	1,524	0.5	109
5 and younger	2,252	16.5	24,086	0.2	11	1	0.0	5	0.2	595	9	0.1	103	0.3	80
6-14	1,895	15.5	19,771	0.3	18	0	0.0	0	0.0	0	100	0.8	1,115	0.4	113
15-20	573	11.1	5,785	0.3	16	1	0.0	12	0.2	21	15	0.3	177	0.6	125
21-44	39	7.9	420	0.3	27	0	0.0	0	0.0	0	7	1.4	84	0.5	80
45-64	8	16.0	86	0.1	4	0	0.0	0	0.0	0	2	4.0	24	1.0	73
65-74	2	15.4	12	0.7	18	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	1	5.9	12	1.5	175	0	0.0	0	0.0	0	1	5.9	9	0.7	49
85 and older	2	9.1	20	0.2	7	0	0.0	0	0.0	0	1	4.5	12	0.8	66
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 Montana, 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, MONTANA, 2005

Beneficiary Characteristics	ANTIDIABETIC					ULCER DRUGS					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	2,114	2.6	22,614	0.7	\$48	4,612	5.6	48,838	0.4	\$22	81,710	733,317
Female												
All Females	1,426	3.2	15,209	0.7	46	3,015	6.8	31,784	0.4	22	44,435	391,779
Female, Disabled												
All Ages	1,138	20.0	12,591	0.7	49	1,705	29.9	19,032	0.5	29	5,696	58,167
5 and younger	0	0.0	0	0.0	0	22	9.0	227	0.3	24	245	2,569
6-14	11	3.0	132	0.6	63	18	4.9	204	0.4	24	368	3,951
15-20	16	3.8	184	0.8	63	49	11.7	542	0.3	16	420	4,342
21-44	221	13.2	2,470	0.7	46	473	28.3	5,310	0.5	23	1,669	17,146
45-64	885	29.7	9,755	0.7	49	1,142	38.3	12,747	0.6	32	2,981	30,081
65-74	5	41.7	50	0.7	44	1	8.3	2	1.0	162	12	66
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	1	12
Female, Other Eligibles												
All Ages	288	0.7	2,618	0.6	35	1,310	3.4	12,752	0.2	11	38,739	333,612
5 and younger	6	0.0	59	1.2	61	207	1.6	1,918	0.2	12	13,166	117,234
6-14	51	0.4	547	0.7	56	239	2.0	2,664	0.2	10	11,659	109,740
15-20	44	0.6	417	0.5	27	346	4.9	3,413	0.2	8	7,103	58,855
21-44	168	2.5	1,384	0.5	26	489	7.3	4,411	0.3	12	6,672	46,731
45-64	7	10.0	84	0.8	62	21	30.0	250	0.8	43	70	687
65-74	4	30.8	38	0.3	22	1	7.7	12	1.0	21	13	94
75-84	1	4.2	5	0.2	10	1	4.2	12	1.0	25	24	94
85 and older	7	21.9	84	1.4	48	6	18.8	72	0.3	5	32	177
Male												
All Males	688	1.8	7,405	0.7	51	1,597	4.3	17,054	0.4	22	37,275	341,538
Male, Disabled												
All Ages	570	10.1	6,214	0.7	49	946	16.8	10,374	0.5	27	5,634	55,931
5 and younger	0	0.0	0	0.0	0	40	11.3	425	0.3	23	355	3,588
6-14	10	1.3	120	0.4	34	43	5.5	471	0.4	20	775	8,325
15-20	17	2.5	203	0.5	43	67	9.8	752	0.4	24	685	7,310
21-44	98	6.2	1,103	0.7	51	258	16.4	2,838	0.6	26	1,575	15,267
45-64	439	19.7	4,743	0.7	50	536	24.0	5,869	0.5	28	2,230	21,360
65-74	6	46.2	45	0.9	49	2	15.4	19	0.4	31	13	80
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	1
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, MONTANA, 2005

Beneficiary Characteristics	ANTIDIABETIC					ULCER DRUGS					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		
Male, Other Eligibles												
All Ages	118	0.4	1,191	0.7	58	651	2.1	6,680	0.3	15	31,641	285,607
5 and younger	13	0.1	145	0.4	34	259	1.9	2,391	0.2	12	13,650	121,419
6-14	43	0.4	453	0.6	44	176	1.4	1,916	0.3	13	12,253	114,313
15-20	34	0.7	295	0.9	93	129	2.5	1,380	0.3	13	5,140	44,429
21-44	9	1.8	99	0.9	43	69	13.9	796	0.7	29	496	4,690
45-64	14	28.0	149	1.0	56	11	22.0	130	1.0	32	50	508
65-74	1	7.7	6	1.8	351	2	15.4	15	0.4	11	13	59
75-84	3	17.6	36	0.9	77	2	11.8	24	1.0	22	17	78
85 and older	1	4.5	8	0.5	13	3	13.6	28	0.7	16	22	111
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 Montana, 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, MONTANA, 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	\$458	7.3	147	1,535
Age				
0-64	466	7.4	129	1,360
65-74	0	0.0	0	0
75-84	818	9.5	5	57
85 and older	192	5.2	13	118
Unknown	0	0.0	0	0
Gender				
Female	513	8.2	83	888
Male	383	6.2	64	647
Unknown	0	0.0	0	0
Race				
White	484	7.3	108	1,121
African American	419	10.5	1	2
Other/unknown	388	7.4	38	412
Basis of Eligibility^c				
Aged	442	7.5	19	187
Disabled	460	7.3	128	1,348
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 Montana, 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 260 beneficiaries who were in nursing facilities for part of their enrollment and their 2,579 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, MONTANA, 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	0.5	0.1	0.0	0.3	\$16	\$5	\$3	\$9	\$36	\$70	\$68	\$25	515	\$18,439	100	68.0	1,133
Biologicals	0.1	0.1	0.0	0.1	3	1	0	2	29	20	0	39	22	644	18	12.2	211
Antineoplastic Agents	1.0	0.0	0.0	1.0	41	0	0	41	41	0	0	41	15	609	2	1.4	15
Endocrine/Metabolic Drugs	1.4	0.7	0.2	0.6	75	57	6	12	52	84	37	20	1,056	55,289	70	47.6	739
Cardiovascular Agents	1.9	0.4	0.0	1.5	58	32	1	26	31	87	15	18	1,356	42,439	69	46.9	730
Respiratory Agents	0.7	0.5	0.0	0.3	50	43	2	5	67	91	80	20	537	35,905	68	46.3	723
Gastrointestinal Agents	1.2	0.3	0.0	0.9	51	29	0	22	44	106	17	25	994	43,782	78	53.1	857
Genitourinary Agents	0.8	0.4	0.0	0.4	48	34	0	14	62	84	67	37	332	20,449	39	26.5	430
CNS Drugs	2.1	1.0	0.0	1.0	223	182	0	40	108	180	46	39	2,350	254,731	105	71.4	1,142
Stimulants/Anti-obesity/Anorexia	0.9	0.3	0.0	0.6	60	52	0	8	70	202	0	13	37	2,572	4	2.7	43
Miscellaneous Psychological/Neurological Agents	0.6	0.6	0.0	0.0	301	296	0	4	475	503	0	99	74	35,182	10	6.8	117
Analgesics and Anesthetics	1.3	0.1	0.2	1.0	73	11	22	40	55	86	110	39	1,150	62,723	83	56.5	858
Neuromuscular Agents	1.6	0.2	0.3	1.0	94	26	15	53	60	116	52	50	1,616	97,363	91	61.9	1,035
Nutritional Products	0.8	0.0	0.1	0.7	14	0	1	14	18	15	12	18	456	8,090	53	36.1	558
Hematological Agents	1.3	0.1	0.6	0.5	42	26	10	7	33	202	16	13	336	11,042	27	18.4	261
Topical Products	0.5	0.1	0.0	0.4	17	8	0	9	35	61	35	26	359	12,586	64	43.5	731
Miscellaneous Products	0.1	0.1	0.0	0.0	1	1	0	0	13	14	0	11	9	116	7	4.8	83
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	7	0	0	0	25	0	0	0	46	1,170	15	10.2	171
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.	11,260	703,131	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for Montana, 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 260 beneficiaries who were in nursing facilities for part of their enrollment and their 2,579 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 Montana, 0.6 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, MONTANA, 2005

Top 10 Drug Groups in Nursing Facilities	Total Medicaid Rx \$	Users		Among Users		Rx \$ per Benefit Month	
		Number of Users	As a Percentage of All-Year Nursing Facility Residents	Number of Benefit Months	Number of Rx per Benefit Month		
ANTIPSYCHOTICS	\$174,732	70	47.6	807	0.9	\$239	\$217
ANTIDEPRESSANTS	63,269	92	62.6	1,008	1.0	63	63
ANTICONVULSANT	58,437	78	53.1	911	1.1	59	64
ANALGESICS - Narcotic	49,506	96	65.3	999	0.9	57	50
ANTIDIABETIC	37,105	54	36.7	590	1.1	58	63
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	35,557	14	9.5	162	0.5	428	219
ULCER DRUGS	35,455	75	51.0	812	0.9	49	44
MUSCULOSKELETAL THERAPY AGENTS	33,076	32	21.8	359	1.1	86	92
ANTIASTHMATIC	27,735	65	44.2	661	0.5	81	42
ANTIHYPERLIPIDEMIC	19,609	19	12.9	214	0.9	106	92
Total	534,481	595		6,523	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for Montana, 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 260 beneficiaries who were in nursing facilities for part of their enrollment and their 2,579 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, MONTANA, 2005

Beneficiary Characteristics	All Top 10 Drug Groups		ANTIPSYCHOTICS					ANTIDEPRESSANTS				
	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	5,975	\$534,481	70	47.6	807	0.9	\$217	92	62.6	1,008	1.0	\$63
Female												
All Females	3,903	344,429	47	56.6	543	1.0	219	58	69.9	647	1.1	61
Female, Disabled												
All Ages	3,435	313,728	41	56.2	471	0.9	232	55	75.3	611	1.1	63
64 or younger	3,435	313,728	41	56.2	471	0.9	232	55	75.3	611	1.1	63
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	468	30,701	6	60.0	72	1.0	129	3	30.0	36	1.0	40
64 or younger	131	10,699	2	200.0	24	1.0	81	0	0.0	0	0.0	0
65-74	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	93	8,573	1	100.0	12	2.0	438	1	100.0	12	1.0	51
85 and older	244	11,429	3	37.5	36	0.6	58	2	25.0	24	1.0	35
Male												
All Males	2,072	190,052	23	35.9	264	0.8	212	34	53.1	361	0.9	65
Male, Disabled												
All Ages	1,808	156,756	18	32.7	207	0.8	187	30	54.5	327	0.8	65
64 or younger	1,808	156,756	18	32.7	207	0.8	187	30	54.5	327	0.8	65
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	264	33,296	5	55.6	57	0.8	305	4	44.4	34	1.3	69
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	234	32,319	5	125.0	57	0.8	305	2	50.0	21	1.4	81
85 and older	30	977	0	0.0	0	0.0	0	2	40.0	13	1.2	49
Unknown	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2005 file for Montana, 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 260 beneficiaries who were in nursing facilities for part of their enrollment and their 2,579 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.medispn.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, MONTANA, 2005

Beneficiary Characteristics	ANTICONVULSANT					ANALGESICS - Narcotic					ANTIDIABETIC				
	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	78	53.1	911	1.1	\$64	96	65.3	999	0.9	\$50	54	36.7	590	1.1	\$63
Female															
All Females	40	48.2	455	1.1	55	60	72.3	644	0.9	43	41	49.4	455	1.2	69
Female, Disabled															
All Ages	36	49.3	418	1.1	56	44	60.3	469	1.1	51	32	43.8	347	1.1	69
64 or younger	36	49.3	418	1.1	56	44	60.3	469	1.1	51	32	43.8	347	1.1	69
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	4	40.0	37	0.6	47	16	160.0	175	0.5	21	9	90.0	108	1.4	68
64 or younger	1	100.0	12	0.5	44	3	300.0	36	1.0	38	2	200.0	24	1.3	136
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	1	100.0	12	1.0	68	1	100.0	12	1.2	26	0	0.0	0	0.0	0
85 and older	2	25.0	13	0.5	30	12	150.0	127	0.3	15	7	87.5	84	1.4	48
Male															
All Males	38	59.4	456	1.1	73	36	56.3	355	0.8	61	13	20.3	135	0.8	43
Male, Disabled															
All Ages	35	63.6	420	1.1	73	33	60.0	322	0.8	66	10	18.2	99	0.8	31
64 or younger	35	63.6	420	1.1	73	33	60.0	322	0.8	66	10	18.2	99	0.8	31
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	3	33.3	36	1.0	69	3	33.3	33	0.5	16	3	33.3	36	0.9	77
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	3	75.0	36	1.0	69	3	75.0	33	0.5	16	3	75.0	36	0.9	77
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2005 file for Montana, 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 260 beneficiaries who were in nursing facilities for part of their enrollment and their 2,579 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, MONTANA, 2005

Beneficiary Characteristics	MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL					ULCER DRUGS					MUSCULOSKELETAL THERAPY AGENTS				
	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	14	9.5	162	0.5	\$220	75	51.0	812	0.9	\$44	32	21.8	359	1.1	\$92
Female															
All Females	8	9.6	96	0.5	336	42	50.6	444	0.9	37	19	22.9	221	1.1	97
Female, Disabled															
All Ages	6	8.2	72	0.5	423	36	49.3	372	0.9	39	19	26.0	221	1.1	97
64 or younger	6	8.2	72	0.5	423	36	49.3	372	0.9	39	19	26.0	221	1.1	97
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	2	20.0	24	0.5	73	6	60.0	72	0.7	29	0	0.0	0	0.0	0
64 or younger	0	0.0	0	0.0	0	1	100.0	12	1.0	118	0	0.0	0	0.0	0
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	1	100.0	12	1.0	25	0	0.0	0	0.0	0
85 and older	2	25.0	24	0.5	73	4	50.0	48	0.5	7	0	0.0	0	0.0	0
Male															
All Males	6	9.4	66	0.5	51	33	51.6	368	0.9	52	13	20.3	138	1.0	85
Male, Disabled															
All Ages	4	7.3	48	0.3	18	30	54.5	332	0.9	55	13	23.6	138	1.0	85
64 or younger	4	7.3	48	0.3	18	30	54.5	332	0.9	55	13	23.6	138	1.0	85
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	2	22.2	18	1.0	137	3	33.3	36	1.0	23	0	0.0	0	0.0	0
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	2	50.0	18	1.0	137	2	50.0	24	1.0	22	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	1	20.0	12	1.0	26	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 Montana, 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 260 beneficiaries who were in nursing facilities for part of their enrollment and their 2,579 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, MONTANA, 2005

Beneficiary Characteristics	ANTIASTHMATIC					ANTIHYPERTENSIVE					All-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$		
All	65	44.2	661	0.5	\$42	19	12.9	214	0.9	\$92	147	1,535
Female												
All Females	44	53.0	444	0.6	41	13	15.7	142	1.0	96	83	888
Female, Disabled												
All Ages	41	56.2	408	0.5	40	12	16.4	130	1.0	93	73	785
64 or younger	41	56.2	408	0.5	40	12	16.4	130	1.0	93	73	785
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	3	30.0	36	0.8	53	1	10.0	12	1.2	132	10	103
64 or younger	1	100.0	12	0.7	50	1	100.0	12	1.2	132	1	12
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
75-84	1	100.0	12	1.6	107	0	0.0	0	0.0	0	1	12
85 and older	1	12.5	12	0.2	3	0	0.0	0	0.0	0	8	79
Male												
All Males	21	32.8	217	0.4	44	6	9.4	72	0.6	83	64	647
Male, Disabled												
All Ages	19	34.5	193	0.4	38	4	7.3	48	0.6	75	55	563
64 or younger	19	34.5	193	0.4	38	4	7.3	48	0.6	75	55	563
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	2	22.2	24	0.8	89	2	22.2	24	0.6	98	9	84
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
75-84	1	25.0	12	1.5	175	2	50.0	24	0.6	98	4	45
85 and older	1	20.0	12	0.2	3	0	0.0	0	0.0	0	5	39
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 Montana, 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 260 beneficiaries who were in nursing facilities for part of their enrollment and their 2,579 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.medispain.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}
MONTANA, 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	16,158	19.8	0.8	68,476	\$17	\$1,415,292	\$21	3.3	81,710
Age									
5 and younger	4,621	16.9	0.3	8,941	5	130,593	15	4.9	27,416
6-14	3,992	15.9	0.4	9,382	7	168,140	18	2.2	25,055
15-20	2,184	16.4	0.4	5,748	9	116,837	20	2.0	13,348
21-44	2,754	26.5	1.6	16,791	35	368,354	22	3.1	10,412
45-64	2,570	48.2	5.1	27,345	118	627,182	23	4.3	5,331
65-74	18	35.3	1.5	78	27	1,400	18	3.4	51
75-84	8	19.0	2.4	100	40	1,679	17	3.3	42
85 and older	11	20.0	1.7	91	20	1,107	12	2.4	55
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Basis of Eligibility^c									
Aged	29	22.8	2.2	275	45	5,689	21	3.2	127
Disabled	4,583	40.5	3.6	40,981	86	971,229	24	3.5	11,330
Adults	1,587	19.4	0.8	6,511	14	116,324	18	3.8	8,183
Children	9,952	16.0	0.3	20,673	5	321,584	16	2.9	62,058
Unknown	7	58.3	3.0	36	39	466	13	2.4	12
Gender									
Female	9,384	21.1	1.0	42,820	20	902,258	21	3.9	44,435
Male	6,774	18.2	0.7	25,656	14	513,034	20	2.7	37,275
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Race									
White	12,654	22.3	1.0	57,260	21	1,217,605	21	3.4	56,666
African American	178	20.3	0.8	679	12	10,242	15	2.9	875
Other/unknown	3,326	13.8	0.4	10,537	8	187,445	18	3.1	24,169
Use of Nursing Facilities^d									
Entire year	103	70.1	10.6	1,552	236	34,750	22	4.9	147
Part year	202	77.7	7.9	2,041	161	41,823	20	4.0	260
None	15,853	19.5	0.8	64,883	16	1,338,719	21	3.3	81,303
Maintenance Assistance Status									
Cash	7,490	23.9	1.4	43,095	30	951,308	22	3.4	31,284
Medically needy	256	38.4	3.0	2,029	94	62,734	31	4.5	667
Poverty related	5,023	15.7	0.3	9,799	4	137,714	14	3.2	32,084
Other/unknown	3,389	19.2	0.8	13,553	15	263,536	19	3.2	17,675

Source: Data for this table are from the MAX 2005 file for Montana, 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}
MONTANA, 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	\$2	\$21	\$0	\$1	733,317
Age						
5 and younger	0.0	1	15	0	0	244,810
6-14	0.0	1	18	0	0	236,329
15-20	0.1	1	20	0	0	114,936
21-44	0.2	4	22	0	2	83,834
45-64	0.5	12	23	0	4	52,636
65-74	0.3	5	18	0	1	299
75-84	0.6	10	17	0	1	173
85 and older	0.3	4	12	0	1	300
Unknown	0.0	0	0	0	0	0
Basis of Eligibility^c						
Aged	0.4	8	21	0	1	686
Disabled	0.4	9	24	0	3	114,098
Adults	0.1	2	18	0	1	57,809
Children	0.0	1	16	0	0	560,627
Unknown	0.4	5	13	0	3	97
Gender						
Female	0.1	2	21	0	1	391,779
Male	0.1	2	20	0	0	341,538
Unknown	0.0	0	0	0	0	0
Race						
White	0.1	2	21	0	1	496,729
African American	0.1	1	15	0	0	8,024
Other/unknown	0.0	1	18	0	0	228,564
Use of Nursing Facilities^d						
Entire year	1.0	23	22	1	9	1,535
Part year	0.8	16	20	0	6	2,579
None	0.1	2	21	0	1	729,203
Maintenance Assistance Status						
Cash	0.1	3	22	0	1	302,439
Medically needy	0.5	16	31	0	3	3,827
Poverty related	0.0	1	14	0	0	268,086
Other/unknown	0.1	2	19	0	1	158,965

Source: Data for this table are from the MAX 2005 file for Montana, 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}
MONTANA, 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	Total Number Rx.
All	20,593	\$69	\$1,415,292	100.0	68,476	\$21	100.0	68,476
Anorexia or weight loss/gain	1	92	92	0.0	4	23	0.0	4
Fertility drugs	0	0	0	0.0	0	0	0.0	0
Drugs for cosmetic purposes	31	18	559	0.0	42	13	0.1	42
Cough and cold medications	6,762	27	185,842	13.1	10,189	18	14.9	10,189
Vitamins and minerals	3,120	55	172,837	12.2	10,767	16	15.7	10,767
Non-prescription drugs	7,096	64	457,163	32.3	24,363	19	35.6	24,363
Barbiturates	135	126	17,024	1.2	1,228	14	1.8	1,228
Benzodiazepines	3,111	146	454,112	32.1	20,695	22	30.2	20,695
Other Part D Excl Rx Drugs	337	379	127,663	9.0	1,188	107	1.7	1,188

Source: Data for this table are from the MAX 2005 file for Montana, 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, MONTANA, 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	81,885	127	11,335	8,187	62,224	12	735,477	686	114,209	57,851	562,634	97
Age												
5 and younger	27,460	0	601	3	26,856	0	245,383	0	6,175	18	239,190	0
6-14	25,148	0	1,145	5	23,998	0	237,442	0	12,332	24	225,086	0
15-20	13,386	0	1,107	1,052	11,225	2	115,410	0	11,689	5,959	97,757	5
21-44	10,412	1	3,244	7,017	145	5	83,834	4	32,413	50,780	601	36
45-64	5,331	8	5,211	107	0	5	52,636	83	51,441	1,056	0	56
65-74	51	26	25	0	0	0	299	153	146	0	0	0
75-84	42	39	1	2	0	0	173	159	1	13	0	0
85 and older	55	53	1	1	0	0	300	287	12	1	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	44,515	74	5,697	7,675	31,057	12	392,782	426	58,196	52,791	281,272	97
Male	37,370	53	5,638	512	31,167	0	342,695	260	56,013	5,060	281,362	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	56,817	104	8,968	6,147	41,587	11	498,496	530	89,252	41,752	366,875	87
African American	876	0	92	41	743	0	8,050	0	958	240	6,852	0
Other/unknown	24,192	23	2,275	1,999	19,894	1	228,931	156	23,999	15,859	188,907	10
Use of Nursing Facilities^c												
Entire year	147	19	128	0	0	0	1,535	187	1,348	0	0	0
Part year	260	8	239	9	4	0	2,579	62	2,379	99	39	0
None	81,478	100	10,968	8,178	62,220	12	731,363	437	110,482	57,752	562,595	97
Maintenance Assistance Status												
Cash	31,320	29	10,220	1,833	19,238	0	302,921	206	105,809	16,878	180,028	0
Medically needy	667	79	529	15	44	0	3,827	325	3,240	17	245	0
Poverty related	32,221	0	0	4,337	27,872	12	269,591	0	0	23,867	245,627	97
Other/unknown	17,677	19	586	2,002	15,070	0	159,138	155	5,160	17,089	136,734	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	81,710	127	11,330	8,183	62,058	12	735,164	686	114,177	57,846	562,358	97
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 Montana, 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, MONTANA, 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	81,885	735,477	81,710	733,317	0	2,160
Fee-for-service (FFS) all year	81,710	735,164	81,710	733,317	0	1,847
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 Montana, 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