STATISTICAL COMPENDIUM:
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2005
NORTH DAKOTA

LIST OF TABLES

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown
All	**58,832**	**105**	**4,621**	**16,394**	**37,712**	**0**	**485,138**	**891**	**46,527**	**118,468**	**319,252**	**0**
Age												
5 and younger	16,584	0	193	0	16,391	0	137,758	0	2,026	0	135,732	0
6-14	15,312	0	464	2	14,846	0	136,775	0	4,964	11	131,800	0
15-20	7,996	0	428	1,351	6,217	0	64,782	0	4,428	9,780	50,574	0
21-44	15,669	0	1,628	13,783	258	0	117,532	0	16,414	99,972	1,146	0
45-64	3,157	0	1,901	1,256	0	0	27,365	0	18,668	8,697	0	0
65-74	59	50	7	2	0	0	439	404	27	8	0	0
75-84	29	29	0	0	0	0	253	253	0	0	0	0
85 and older	26	26	0	0	0	0	234	234	0	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	34,206	60	2,405	13,209	18,532	0	280,621	525	24,519	98,997	156,580	0
Male	24,624	45	2,216	3,185	19,178	0	204,506	366	22,008	19,471	162,661	0
Unknown	2	0	0	0	2	0	11	0	0	0	11	0
Race												
White	37,006	66	3,329	10,579	23,032	0	299,597	579	33,600	74,202	191,216	0
African American	1,599	14	78	434	1,073	0	12,741	136	693	2,969	8,943	0
Other/unknown	20,227	25	1,214	5,381	13,607	0	172,800	176	12,234	41,297	119,093	0
Use of Nursing Facilities[c]												
Entire year	130	33	97	0	0	0	1,324	317	1,007	0	0	0
Part year	127	6	107	13	1	0	1,197	50	1,012	123	12	0
None	58,575	66	4,417	16,381	37,711	0	482,617	524	44,508	118,345	319,240	0
Maintenance Assistance Status												
Cash	26,446	37	4,012	8,290	14,107	0	222,741	297	42,348	58,226	121,870	0
Medically needy	4,538	68	568	1,545	2,357	0	31,296	594	3,801	7,866	19,035	0
Poverty-related	12,099	0	2	1,178	10,919	0	88,468	0	11	6,239	82,218	0
Other/unknown	15,749	0	39	5,381	10,329	0	142,633	0	367	46,137	96,129	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	58,002	105	4,619	16,062	37,216	0	482,155	891	46,519	117,316	317,429	0
FFS part year, with Rx claims	450	0	2	203	245	0	1,830	0	8	768	1,054	0
FFS part year, no Rx claims	380	0	0	129	251	0	1,153	0	0	384	769	0

Source: Data for this table are from the MAX 2005 file for North Dakota, released by CMS in 12/2008. 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.

Nondual Beneficiaries

ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC[a, b]
NONDUAL BENEFICIARIES, NORTH DAKOTA, 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	**59.7**	**7.1**	**$419**	**$59**	**$3,579**	**11.7**	**58,832**
Age							
5 and younger	59.0	3.0	128	42	1,929	6.6	16,584
6-14	53.7	4.4	278	64	2,121	13.1	15,312
15-20	58.7	6.2	405	65	4,131	9.8	7,996
21-44	64.1	9.3	539	58	4,680	11.5	15,669
45-64	71.8	31.1	2,034	66	11,845	17.2	3,157
65-74	71.2	27.0	1,577	58	17,796	8.9	59
75-84	89.7	41.6	1,644	40	20,133	8.2	29
85 and older	92.3	43.8	1,435	33	27,967	5.1	26
Unknown	0.0	0.0	0	0	0	0.0	0
Basis of Eligibility[e]							
Aged	81.0	35.5	1,583	45	20,071	7.9	105
Disabled	78.9	32.0	2,454	77	20,162	12.2	4,621
Adults	62.6	7.4	342	46	2,458	13.9	16,394
Children	56.0	3.8	200	53	1,989	10.1	37,712
Unknown	0.0	0.0	0	0	0	0.0	0
Gender							
Female	62.4	7.8	426	54	3,376	12.6	34,206
Male	55.8	6.0	410	69	3,862	10.6	24,624
Unknown	50.0	6.5	536	83	696	77.0	2
Race							
White	63.2	8.1	504	62	3,969	12.7	37,006
African American	60.2	4.9	239	49	2,053	11.7	1,599
Other/unknown	53.2	5.2	278	53	2,988	9.3	20,227
Use of Nursing Facilities[f]							
Entire year	97.7	77.3	5,197	67	61,885	8.4	130
Part year	96.9	55.5	3,746	68	47,448	7.9	127
None	59.5	6.8	401	59	3,355	12.0	58,575
Maintenance Assistance Status							
Cash	60.0	9.2	599	65	4,495	13.3	26,446
Medically needy	54.9	9.0	533	59	7,869	6.8	4,538
Poverty related	52.9	2.9	133	46	1,087	12.3	12,099
Other/unknown	65.7	6.1	305	50	2,721	11.2	15,749

Source: Data for this table are from the MAX 2005 file for North Dakota, released by CMS in 12/2008. 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.

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC[a, b]
NONDUAL BENEFICIARIES, NORTH DAKOTA, 2005

Beneficiary Characteristics	Mean Number of Rx	Mean Rx $	Rx $ as a Percentage of All Medicaid FFS $[c]	Number of Rx, Percentage with: 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]	Number Beneficiaries	Benefit Months
All	**0.9**	**$51**	**11.7**	**40.3**	**45.9**	**6.0**	**5.3**	**1.9**	**0.5**	**$434**	**58,832**	**485,138**
Age												
5 and younger	0.4	15	6.6	41.0	55.2	3.0	0.8	0.1	0.0	232	16,584	137,758
6-14	0.5	31	13.1	46.3	44.9	4.6	3.8	0.4	0.0	237	15,312	136,775
15-20	0.8	50	9.8	41.3	44.9	6.7	5.9	1.1	0.1	510	7,996	64,782
21-44	1.2	72	11.5	35.9	42.8	9.5	8.3	2.9	0.6	624	15,669	117,532
45-64	3.6	235	17.2	28.2	21.7	9.3	20.3	15.5	5.0	1,367	3,157	27,365
65-74	3.6	212	8.9	28.8	27.1	5.1	13.6	18.6	6.8	2,392	59	439
75-84	4.8	188	8.2	10.3	20.7	17.2	13.8	20.7	17.2	2,308	29	253
85 and older	4.9	159	5.1	7.7	11.5	0.0	38.5	42.3	0.0	3,107	26	234
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	4.2	187	7.9	19.0	21.9	6.7	20.0	25.7	6.7	2,365	105	891
Disabled	3.2	244	12.2	21.1	26.0	11.9	22.0	14.8	4.2	2,002	4,621	46,527
Adults	1.0	47	13.9	37.4	44.3	8.9	7.1	1.9	0.4	340	16,394	118,468
Children	0.4	24	10.1	44.0	49.2	4.0	2.5	0.3	0.0	235	37,712	319,252
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Gender												
Female	1.0	52	12.6	37.6	47.2	6.7	5.8	2.3	0.6	412	34,206	280,621
Male	0.7	49	10.6	44.2	44.3	5.0	4.8	1.4	0.3	465	24,624	204,506
Unknown	1.2	98	77.0	50.0	50.0	0.0	0.0	0.0	0.0	127	2	11
Race												
White	1.0	62	12.7	36.8	47.0	6.9	6.3	2.4	0.6	490	37,006	299,597
African American	0.6	30	11.7	39.8	51.2	4.2	3.8	1.0	0.0	258	1,599	12,741
Other/unknown	0.6	33	9.3	46.8	43.5	4.5	3.7	1.1	0.3	350	20,227	172,800
Use of Nursing Facilities[f]												
Entire year	7.6	510	8.4	2.3	4.6	4.6	23.1	42.3	23.1	6,076	130	1,324
Part year	5.9	397	7.9	3.1	10.2	13.4	30.7	27.6	15.0	5,034	127	1,197
None	0.8	49	12.0	40.5	46.1	6.0	5.3	1.8	0.4	407	58,575	482,617
Maintenance Assistance Status												
Cash	1.1	71	13.3	40.0	43.1	6.2	6.7	3.2	0.8	534	26,446	222,741
Medically needy	1.3	77	6.8	45.1	34.4	7.8	8.4	3.3	0.9	1,141	4,538	31,296
Poverty related	0.4	18	12.3	47.1	47.4	3.6	1.7	0.1	0.0	149	12,099	88,468
Other/unknown	0.7	34	11.2	34.3	52.9	6.9	5.0	0.8	0.1	300	15,749	142,633

Source: Data for this table are from the MAX 2005 file for North Dakota, released by CMS in 12/2008. 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.

AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC[a, b, c]
NONDUAL BENEFICIARIES, NORTH DAKOTA, 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	**0.9**	**$51**	**$59**	**0.3**	**$38**	**$115**	**0.0**	**$3**	**$68**	**0.5**	**$11**	**$22**
Age												
5 and younger	0.4	15	42	0.1	11	82	0.0	1	47	0.2	4	18
6-14	0.5	31	64	0.2	25	102	0.0	1	68	0.2	5	21
15-20	0.8	50	65	0.3	40	118	0.0	2	56	0.4	9	21
21-44	1.2	72	58	0.4	50	125	0.1	4	68	0.8	17	22
45-64	3.6	235	66	1.3	169	132	0.1	12	89	2.2	53	25
65-74	3.6	212	58	1.6	174	110	0.0	2	40	2.0	36	18
75-84	4.8	188	40	1.9	137	73	0.2	3	22	2.7	48	18
85 and older	4.9	159	33	1.2	92	74	0.3	11	36	3.3	57	17
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility[d]												
Aged	4.2	187	45	1.5	137	89	0.1	4	32	2.5	45	18
Disabled	3.2	244	77	1.2	184	148	0.1	11	87	1.8	48	27
Adults	1.0	47	46	0.3	31	103	0.1	3	61	0.7	13	20
Children	0.4	24	53	0.2	18	93	0.0	1	56	0.2	4	19
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Gender												
Female	1.0	52	54	0.3	37	110	0.0	3	65	0.6	12	21
Male	0.7	49	69	0.3	38	123	0.0	2	73	0.4	9	24
Unknown	1.2	98	83	1.2	98	83	0.0	0	0	0.0	0	0
Race												
White	1.0	62	62	0.4	47	117	0.0	3	67	0.6	12	22
African American	0.6	30	49	0.2	23	102	0.0	1	40	0.4	6	17
Other/unknown	0.6	33	53	0.2	22	112	0.0	2	74	0.4	8	22
Use of Nursing Facilities[e]												
Entire year	7.6	510	67	2.7	387	143	0.2	19	82	4.6	103	22
Part year	5.9	397	68	1.9	258	134	0.3	23	88	3.7	116	32
None	0.8	49	59	0.3	36	115	0.0	2	67	0.5	10	22
Maintenance Assistance Status												
Cash	1.1	71	65	0.4	52	130	0.0	4	76	0.6	15	24
Medically needy	1.3	77	59	0.5	58	110	0.1	4	65	0.7	16	22
Poverty related	0.4	18	46	0.2	13	84	0.0	1	56	0.2	4	18
Other/unknown	0.7	34	50	0.3	25	95	0.0	2	54	0.4	7	19

Source: Data for this table are from the MAX 2005 file for North Dakota, released by CMS in 12/2008. 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 North Dakota, 0.2 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.

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY[a, b, c, d]
NONDUAL BENEFICIARIES, NORTH DAKOTA, 2005

Therapeutic Category	Number of Rx per Benefit Month Among Users				$ per Benefit Month Among Users				$ per Rx				Total Number of Rx	Total Rx $	Users[e]		
	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			Number of Users	As a Percentage of All Benes	Number of Benefit Months
Anti-infective Agents	0.3	0.1	0.0	0.2	$10	$5	$2	$3	$39	$78	$57	$21	61,971	$2,442,868	24,659	41.9	245,071
Biologicals	0.3	0.3	0.0	0.0	336	320	0	16	1021	1,043	0	720	351	358,451	109	0.2	1,066
Antineoplastic Agents	0.6	0.1	0.0	0.4	112	95	1	16	198	683	225	38	828	164,184	153	0.3	1,460
Endocrine/Metabolic Drugs	0.5	0.2	0.0	0.3	20	12	2	6	41	75	46	21	39,342	1,623,244	8,121	13.8	80,969
Cardiovascular Agents	1.0	0.3	0.0	0.6	33	23	0	9	34	72	36	14	38,132	1,281,637	3,865	6.6	39,317
Respiratory Agents	0.3	0.2	0.0	0.2	18	14	0	3	51	89	46	17	44,612	2,256,180	12,593	21.4	128,463
Gastrointestinal Agents	0.4	0.1	0.0	0.2	25	19	0	6	70	157	46	25	12,259	852,108	3,301	5.6	33,612
Genitourinary Agents	0.2	0.1	0.0	0.1	12	8	1	3	50	83	58	24	4,969	248,617	2,033	3.5	20,457
CNS Drugs	0.9	0.5	0.0	0.4	79	68	1	10	87	141	140	25	75,821	6,576,191	8,336	14.2	82,894
Stimulants/Anti-obesity/Anorexia	0.7	0.6	0.0	0.2	60	54	1	5	82	94	90	36	24,197	1,981,486	3,256	5.5	33,204
Miscellaneous Psychological/ Neurological Agents	0.4	0.4	0.0	0.0	201	198	1	2	470	509	94	71	747	350,804	172	0.3	1,745
Analgesics and Anesthetics	0.4	0.1	0.0	0.4	20	9	3	8	46	172	146	23	44,990	2,065,473	10,325	17.5	101,266
Neuromuscular Agents	0.7	0.3	0.0	0.3	59	44	2	12	86	141	87	35	31,013	2,679,678	4,451	7.6	45,754
Nutritional Products	0.3	0.0	0.0	0.3	5	1	0	4	15	23	43	14	6,241	94,655	1,877	3.2	18,148
Hematological Agents	0.6	0.2	0.0	0.4	93	87	1	6	149	498	28	14	3,995	596,129	635	1.1	6,393
Topical Products	0.2	0.1	0.0	0.1	8	5	0	3	38	74	35	21	24,245	910,157	11,654	19.8	118,901
Miscellaneous Products	0.3	0.1	0.0	0.1	46	34	1	11	168	245	174	85	947	159,027	318	0.5	3,423
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	6	0	0	0	35	0	0	0	562	19,658	299	0.5	3,203
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.	415,222	24,660,547	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for North Dakota, released by CMS in 12/2008. 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 North Dakota, 0.2 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.

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

Top 10 Drug Groups	Total Medicaid Rx $	Users			Among Users		
		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	$3,790,678	2,637	4.5	28,186	0.7	$193	$134
ANTICONVULSANT	2,405,192	2,998	5.1	32,056	0.7	107	75
ANTIDEPRESSANTS	2,281,531	8,474	14.4	85,661	0.5	55	27
STIMULANTS/ANTI-OBESITY/ANOREXIANTS	1,969,453	3,829	6.5	39,638	0.6	82	50
ANTIASTHMATIC	1,604,844	8,684	14.8	89,151	0.3	64	18
ANALGESICS - Narcotic	1,079,600	11,939	20.3	119,935	0.3	34	9
ANTIDIABETIC	705,093	1,624	2.8	16,413	0.7	64	43
MACROLIDE ANTIBIOTICS	607,288	9,996	17.0	103,703	0.1	42	6
DERMATOLOGICAL	588,775	8,638	14.7	90,401	0.2	42	7
ULCER DRUGS	553,452	3,164	5.4	32,315	0.4	48	17
Total	15,585,906	61,983		637,459	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for North Dakota, released by CMS in 12/2008. 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

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	**215,825**	**$15,585,906**	**2,637**	**4.5**	**28,186**	**0.7**	**$135**	**2,998**	**5.1**	**32,056**	**0.7**	**$75**
Female												
All Females	131,189	8,640,237	1,381	4.0	14,784	0.6	116	1,844	5.4	19,569	0.6	67
Female, Disabled												
All Ages	47,482	3,991,950	657	27.3	7,298	0.8	168	775	32.2	8,724	0.8	86
5 and younger	274	25,012	0	0.0	0	0.0	0	7	9.2	82	0.7	116
6-14	1,575	151,243	28	17.9	334	0.7	104	52	33.3	607	0.7	90
15-20	1,817	147,294	34	20.6	383	0.5	112	52	31.5	596	1.0	78
21-44	15,458	1,404,605	260	30.4	2,833	0.8	160	297	34.8	3,322	0.9	101
45-64	28,263	2,256,776	334	29.1	3,746	0.9	185	366	31.9	4,113	0.7	73
65-74	95	7,020	1	14.3	2	0.5	3	1	14.3	4	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
Female, Other Eligibles												
All Ages	83,707	4,648,287	724	2.3	7,486	0.4	65	1,069	3.4	10,845	0.5	52
5 and younger	8,577	380,954	5	0.1	60	0.4	55	69	0.9	713	0.7	53
6-14	13,953	911,207	157	2.2	1,711	0.5	73	151	2.1	1,619	0.7	76
15-20	12,213	766,821	213	5.0	2,208	0.5	70	166	3.9	1,732	0.5	69
21-44	42,413	2,208,347	306	2.7	3,064	0.3	53	601	5.3	5,973	0.4	40
45-64	5,691	336,449	32	3.8	327	0.5	93	75	8.8	729	0.6	53
65-74	337	18,564	3	10.3	36	0.6	106	2	6.9	23	0.7	37
75-84	224	8,285	3	20.0	20	0.6	72	0	0.0	0	0.0	0
85 and older	299	17,660	5	29.4	60	0.4	82	5	29.4	56	1.0	24
Male												
All Males	84,625	6,944,681	1,256	5.1	13,402	0.8	155	1,154	4.7	12,487	0.8	88
Male, Disabled												
All Ages	31,907	3,295,507	599	27.0	6,611	0.9	206	601	27.1	6,647	0.9	107
5 and younger	542	43,136	6	5.1	72	0.7	111	11	9.4	121	0.7	70
6-14	4,314	440,690	106	34.4	1,242	0.7	137	71	23.1	825	0.8	102
15-20	3,858	427,222	85	32.3	940	1.0	219	69	26.2	754	1.1	119
21-44	10,247	1,227,342	225	29.1	2,450	0.9	215	261	33.7	2,893	1.0	135
45-64	12,946	1,157,117	177	23.5	1,907	1.0	236	189	25.1	2,054	0.8	66
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

Nondual Beneficiaries

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, NORTH DAKOTA, 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
Male, Other Eligibles												
All Ages	52,718	3,649,174	657	2.9	6,791	0.6	107	553	2.5	5,840	0.7	67
5 and younger	9,817	460,506	12	0.1	133	0.4	74	64	0.8	718	0.6	34
6-14	23,660	1,820,177	349	4.6	3,725	0.6	103	249	3.3	2,712	0.6	71
15-20	11,890	962,347	240	7.3	2,455	0.7	119	137	4.2	1,478	0.8	90
21-44	5,285	297,251	41	1.5	333	0.4	96	75	2.7	681	0.6	48
45-64	1,507	81,767	8	2.0	80	0.3	30	19	4.7	180	0.5	25
65-74	237	14,539	2	8.7	24	0.8	80	5	21.7	40	1.0	32
75-84	208	10,101	3	21.4	29	0.6	71	3	21.4	19	1.0	29
85 and older	114	2,486	2	22.2	12	0.7	42	1	11.1	12	1.0	14
Unknown	11	988	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 North Dakota, released by CMS in 12/2008. 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.

Beneficiary Characteristics	ANTIDEPRESSANTS					STIMULANTS/ANTI-OBESITY/ANOREXIANTS					ANTIASTHMATIC				
	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	**8,474**	**14.4**	**85,661**	**0.5**	**$27**	**3,829**	**6.5**	**39,638**	**0.6**	**$50**	**8,684**	**14.8**	**89,151**	**0.3**	**$18**
Female															
All Females	6,294	18.4	63,343	0.5	26	1,410	4.1	14,485	0.5	47	5,020	14.7	51,409	0.3	18
Female, Disabled															
All Ages	1,416	58.9	15,756	0.6	35	142	5.9	1,577	0.6	64	982	40.8	10,971	0.4	34
5 and younger	0	0.0	0	0.0	0	2	2.6	24	0.4	20	30	39.5	330	0.3	34
6-14	32	20.5	381	0.6	15	44	28.2	514	0.6	64	50	32.1	562	0.3	23
15-20	62	37.6	680	0.5	27	17	10.3	193	0.6	58	51	30.9	590	0.4	19
21-44	535	62.6	5,915	0.6	32	42	4.9	462	0.6	55	304	35.6	3,410	0.4	28
45-64	785	68.4	8,772	0.7	39	37	3.2	384	0.7	81	540	47.1	6,031	0.5	39
65-74	2	28.6	8	1.0	55	0	0.0	0	0.0	0	7	100.0	48	1.1	109
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	4,878	15.3	47,587	0.4	24	1,268	4.0	12,908	0.5	45	4,038	12.7	40,438	0.2	13
5 and younger	18	0.2	191	0.4	9	42	0.5	439	0.4	26	1,138	14.1	11,810	0.2	12
6-14	433	5.9	4,727	0.4	16	689	9.5	7,064	0.6	45	747	10.3	7,655	0.3	16
15-20	878	20.4	8,706	0.4	19	255	5.9	2,590	0.5	46	485	11.3	4,929	0.2	12
21-44	3,213	28.5	30,900	0.4	25	267	2.4	2,661	0.5	47	1,496	13.3	14,403	0.3	13
45-64	307	36.1	2,768	0.5	35	15	1.8	154	0.5	51	152	17.9	1,415	0.4	26
65-74	10	34.5	113	0.7	32	0	0.0	0	0.0	0	9	31.0	104	0.4	31
75-84	10	66.7	98	0.9	41	0	0.0	0	0.0	0	5	33.3	60	0.6	11
85 and older	9	52.9	84	0.9	44	0	0.0	0	0.0	0	6	35.3	62	0.5	21
Male															
All Males	2,180	8.9	22,318	0.5	28	2,418	9.8	25,143	0.6	51	3,664	14.9	37,742	0.3	18
Male, Disabled															
All Ages	687	31.0	7,455	0.7	35	281	12.7	3,154	0.8	67	526	23.7	5,745	0.5	34
5 and younger	3	2.6	36	0.4	4	7	6.0	72	0.4	30	43	36.8	462	0.3	28
6-14	75	24.4	873	0.7	28	164	53.2	1,871	0.8	64	78	25.3	907	0.4	28
15-20	92	35.0	977	0.7	38	78	29.7	861	0.8	74	40	15.2	440	0.4	21
21-44	230	29.7	2,435	0.7	38	22	2.8	250	0.8	78	115	14.9	1,233	0.4	32
45-64	287	38.1	3,134	0.6	36	10	1.3	100	0.6	55	250	33.2	2,703	0.5	40
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

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, NORTH DAKOTA, 2005

Beneficiary Characteristics	ANTIDEPRESSANTS					STIMULANTS/ANTI-OBESITY/ANOREXIANTS					ANTIASTHMATIC				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx $ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx $ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx $ per Benefit Month
Male, Other Eligibles															
All Ages	1,493	6.7	14,863	0.5	24	2,137	9.5	21,989	0.6	49	3,138	14.0	31,997	0.2	15
5 and younger	23	0.3	245	0.4	18	86	1.0	910	0.3	25	1,494	17.9	15,399	0.2	13
6-14	622	8.2	6,628	0.5	20	1,572	20.8	16,333	0.6	49	1,083	14.3	11,289	0.3	17
15-20	517	15.8	5,112	0.5	26	427	13.0	4,290	0.7	53	366	11.2	3,703	0.3	20
21-44	251	9.0	2,112	0.5	31	46	1.7	387	0.5	55	153	5.5	1,245	0.3	17
45-64	63	15.5	613	0.5	20	6	1.5	69	0.4	61	29	7.1	226	0.5	38
65-74	7	30.4	76	0.8	35	0	0.0	0	0.0	0	5	21.7	46	0.8	95
75-84	4	28.6	31	0.7	27	0	0.0	0	0.0	0	7	50.0	77	0.4	42
85 and older	6	66.7	46	0.8	16	0	0.0	0	0.0	0	1	11.1	12	0.1	1
Unknown	0	0.0	0	0.0	0	1	50.0	10	0.9	91	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2005 file for North Dakota, released by CMS in 12/2008. 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.

Nondual Beneficiaries

Beneficiary Characteristics	ANALGESICS - Narcotic					ANTIDIABETIC					MACROLIDE ANTIBIOTICS				
	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	**11,939**	**20.3**	**119,935**	**0.3**	**$9**	**1,624**	**2.8**	**16,413**	**0.7**	**$43**	**9,996**	**17.0**	**103,703**	**0.1**	**$6**
Female															
All Females	9,178	26.8	92,421	0.3	8	1,153	3.4	11,728	0.7	42	6,086	17.8	62,826	0.1	6
Female, Disabled															
All Ages	1,507	62.7	16,599	0.4	21	577	24.0	6,487	0.8	48	585	24.3	6,621	0.1	7
5 and younger	8	10.5	94	0.1	1	0	0.0	0	0.0	0	26	34.2	294	0.1	5
6-14	24	15.4	273	0.1	2	2	1.3	24	0.6	35	36	23.1	416	0.2	7
15-20	44	26.7	503	0.1	1	2	1.2	24	1.0	98	36	21.8	413	0.1	6
21-44	624	73.1	6,788	0.4	21	111	13.0	1,240	0.7	47	223	26.1	2,503	0.1	7
45-64	805	70.2	8,933	0.5	24	461	40.2	5,195	0.8	48	262	22.8	2,982	0.1	7
65-74	2	28.6	8	1.0	9	1	14.3	4	1.0	16	2	28.6	13	0.3	15
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	7,671	24.1	75,822	0.2	5	576	1.8	5,241	0.5	34	5,501	17.3	56,205	0.1	6
5 and younger	257	3.2	2,790	0.1	1	6	0.1	65	0.4	24	1,756	21.8	18,354	0.2	6
6-14	378	5.2	4,001	0.1	1	24	0.3	252	0.8	56	1,060	14.5	11,092	0.1	5
15-20	1,155	26.9	11,645	0.2	2	37	0.9	351	0.6	53	650	15.1	6,688	0.1	6
21-44	5,456	48.4	53,187	0.3	6	373	3.3	3,396	0.5	31	1,899	16.9	18,723	0.1	6
45-64	399	46.9	3,928	0.4	14	120	14.1	1,016	0.6	35	126	14.8	1,238	0.1	7
65-74	10	34.5	106	0.1	2	13	44.8	126	0.8	41	4	13.8	46	0.1	5
75-84	9	60.0	97	0.3	5	2	13.3	23	0.6	15	3	20.0	36	0.2	8
85 and older	7	41.2	68	0.7	80	1	5.9	12	0.5	5	3	17.6	28	0.1	5
Male															
All Males	2,761	11.2	27,514	0.3	11	471	1.9	4,685	0.7	46	3,909	15.9	40,867	0.1	6
Male, Disabled															
All Ages	759	34.3	8,159	0.4	26	288	13.0	3,172	0.7	47	338	15.3	3,868	0.1	7
5 and younger	9	7.7	100	0.1	1	1	0.9	12	2.0	141	43	36.8	476	0.1	5
6-14	25	8.1	288	0.1	1	2	0.6	24	0.3	21	67	21.8	771	0.1	6
15-20	40	15.2	451	0.1	2	8	3.0	91	0.5	34	48	18.3	547	0.1	7
21-44	242	31.3	2,588	0.4	25	58	7.5	614	0.7	42	95	12.3	1,091	0.1	8
45-64	443	58.8	4,732	0.5	31	219	29.0	2,431	0.7	48	85	11.3	983	0.1	7
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Nondual Beneficiaries

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, NORTH DAKOTA, 2005

Beneficiary Characteristics	ANALGESICS - Narcotic					ANTIDIABETIC					MACROLIDE ANTIBIOTICS				
	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	2,002	8.9	19,355	0.2	5	183	0.8	1,513	0.7	43	3,571	15.9	36,999	0.1	6
5 and younger	327	3.9	3,535	0.1	1	2	0.0	18	1.2	75	1,947	23.3	20,259	0.2	6
6-14	352	4.7	3,749	0.1	1	15	0.2	137	1.1	53	996	13.2	10,691	0.1	5
15-20	439	13.4	4,366	0.1	2	30	0.9	298	0.7	60	377	11.5	3,884	0.1	6
21-44	730	26.3	6,307	0.3	10	89	3.2	646	0.5	29	214	7.7	1,819	0.1	6
45-64	137	33.7	1,258	0.4	15	35	8.6	331	0.7	50	33	8.1	315	0.1	6
65-74	7	30.4	62	0.2	3	3	13.0	36	0.7	77	1	4.3	5	0.2	10
75-84	7	50.0	61	0.5	7	5	35.7	29	1.2	40	2	14.3	17	0.1	8
85 and older	3	33.3	17	0.2	1	4	44.4	18	0.4	12	1	11.1	9	0.1	9
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	50.0	10	0.2	8

Source: Data for this table are from the MAX 2005 file for North Dakota, released by CMS in 12/2008. 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.

Nondual Beneficiaries

Beneficiary Characteristics	DERMATOLOGICAL					ULCER DRUGS						
	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 Beneficiaries	Number of Benefit Months
All	**8,638**	**14.7**	**90,401**	**0.2**	**$7**	**3,164**	**5.4**	**32,315**	**0.4**	**$17**	**58,832**	**485,138**
Female												
All Females	5,376	15.7	56,256	0.2	7	2,208	6.5	22,794	0.3	16	34,206	280,621
Female, Disabled												
All Ages	800	33.3	9,187	0.2	10	666	27.7	7,473	0.5	26	2,405	24,519
5 and younger	20	26.3	229	0.1	4	10	13.2	119	0.3	10	76	801
6-14	39	25.0	453	0.1	7	12	7.7	137	0.4	21	156	1,655
15-20	56	33.9	638	0.2	9	27	16.4	304	0.4	19	165	1,716
21-44	287	33.6	3,290	0.2	9	197	23.1	2,170	0.5	26	854	8,738
45-64	397	34.6	4,573	0.2	11	417	36.4	4,726	0.6	27	1,147	11,582
65-74	1	14.3	4	0.3	5	3	42.9	17	0.8	54	7	27
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Female, Other Eligibles												
All Ages	4,576	14.4	47,069	0.1	6	1,542	4.8	15,321	0.2	11	31,801	256,102
5 and younger	1,461	18.2	15,258	0.1	4	198	2.5	1,766	0.2	10	8,044	66,718
6-14	928	12.7	9,966	0.1	6	133	1.8	1,389	0.2	9	7,286	64,142
15-20	665	15.5	6,831	0.2	9	191	4.4	1,981	0.2	6	4,295	34,198
21-44	1,385	12.3	13,694	0.2	6	867	7.7	8,639	0.2	11	11,265	84,448
45-64	116	13.6	1,091	0.2	6	130	15.3	1,299	0.3	15	850	6,068
65-74	6	20.7	71	0.3	6	11	37.9	117	0.3	9	29	222
75-84	3	20.0	36	0.3	10	5	33.3	48	0.6	14	15	135
85 and older	12	70.6	122	0.2	2	7	41.2	82	0.5	6	17	171
Male												
All Males	3,262	13.2	34,145	0.2	7	956	3.9	9,521	0.4	20	24,624	204,506
Male, Disabled												
All Ages	559	25.2	6,354	0.2	9	388	17.5	4,191	0.6	27	2,216	22,008
5 and younger	28	23.9	330	0.1	8	14	12.0	144	0.5	30	117	1,225
6-14	72	23.4	832	0.1	8	20	6.5	234	0.5	28	308	3,309
15-20	92	35.0	1,033	0.2	10	16	6.1	176	0.5	16	263	2,712
21-44	200	25.8	2,314	0.2	10	109	14.1	1,223	0.6	31	774	7,676
45-64	167	22.1	1,845	0.2	8	229	30.4	2,414	0.6	26	754	7,086
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

Nondual Beneficiaries

Beneficiary Characteristics	DERMATOLOGICAL					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	2,703	12.1	27,791	0.1	6	568	2.5	5,330	0.3	15	22,408	182,498
5 and younger	1,360	16.3	14,017	0.1	5	233	2.8	2,161	0.2	10	8,345	69,003
6-14	683	9.0	7,417	0.1	5	89	1.2	952	0.3	17	7,562	67,669
15-20	490	15.0	4,876	0.2	11	78	2.4	776	0.3	9	3,273	26,156
21-44	136	4.9	1,173	0.2	6	114	4.1	927	0.4	25	2,776	16,670
45-64	23	5.7	211	0.3	18	35	8.6	345	0.4	24	406	2,629
65-74	3	13.0	36	0.1	5	6	26.1	59	0.6	20	23	190
75-84	7	50.0	52	0.5	13	7	50.0	54	0.5	18	14	118
85 and older	1	11.1	9	0.7	5	6	66.7	56	0.7	13	9	63
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	11

Source: Data for this table are from the MAX 2005 file for North Dakota, released by CMS in 12/2008. 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.

Nondual Beneficiaries

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
BY BENEFICIARY CHARACTERISTIC[a, b]
NONDUAL BENEFICIARIES, NORTH DAKOTA, 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	**$510**	**7.6**	**130**	**1,324**
Age				
0-64	594	8.0	96	1,003
65-74	279	6.9	8	88
75-84	315	6.8	9	78
85 and older	197	5.7	17	155
Unknown	0	0.0	0	0
Gender				
Female	539	8.0	71	716
Male	477	7.1	59	608
Unknown	0	0.0	0	0
Race				
White	527	7.5	104	1,033
African American	390	7.3	2	24
Other/unknown	458	8	24	267
Basis of Eligibility[c]				
Aged	248	6.2	33	317
Disabled	593	8.0	97	1,007
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 North Dakota, released by CMS in 12/2008. 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 127 beneficiaries who were
in nursing facilities for part of their enrollment and their 1,197 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, NORTH DAKOTA, 2005

Therapeutic Category	Number of Rx per Benefit Month Among Users				$ per Benefit Month Among Users				$ per Rx				Total Number of Rx	Total Rx $	Users		Number of Benefit Months
	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			Number of Users	As a Percentage of All-Year Nursing Facility Residents	
Anti-infective Agents	0.4	0.1	0.0	0.3	$20	$9	$3	$9	$50	$80	$73	$34	379	$19,051	90	69.2	948
Biologicals	0.0	0.0	0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0.0	0
Antineoplastic Agents	1.0	0.0	0.0	0.9	65	36	0	28	67	887	0	31	47	3,165	7	5.4	49
Endocrine/Metabolic Drugs	1.3	0.5	0.1	0.8	53	32	9	12	40	69	111	15	750	29,896	55	42.3	569
Cardiovascular Agents	2.3	0.6	0.0	1.6	67	45	0	22	29	74	2	13	1,932	56,789	84	64.6	853
Respiratory Agents	1.1	0.7	0.0	0.4	105	97	0	8	99	144	8	21	549	54,145	48	36.9	516
Gastrointestinal Agents	1.1	0.2	0.0	0.9	48	21	3	24	45	120	95	28	684	30,688	59	45.4	642
Genitourinary Agents	1.0	0.8	0.0	0.2	63	57	0	6	64	70	48	34	255	16,218	24	18.5	256
CNS Drugs	2.0	0.9	0.0	1.0	171	143	4	24	84	152	110	23	2,184	184,207	105	80.8	1,080
Stimulants/Anti-obesity/Anorexia	0.8	0.8	0.0	0.1	133	132	0	1	158	167	0	27	32	5,058	4	3.1	38
Miscellaneous Psychological/ Neurological Agents	1.1	1.1	0.0	0.0	115	115	0	0	101	101	0	0	101	10,193	10	7.7	89
Analgesics and Anesthetics	0.8	0.3	0.0	0.5	92	73	4	16	114	256	115	32	606	68,853	72	55.4	746
Neuromuscular Agents	1.6	0.5	0.1	1.0	131	85	10	35	83	168	87	37	1,250	103,393	73	56.2	792
Nutritional Products	0.8	0.0	0.0	0.8	12	0	0	12	15	6	0	15	330	4,967	38	29.2	403
Hematological Agents	1.1	0.4	0.0	0.8	163	155	0	8	142	436	24	10	465	66,095	38	29.2	406
Topical Products	0.5	0.2	0.0	0.3	26	18	1	6	49	118	25	19	432	21,030	75	57.7	817
Miscellaneous Products	0.4	0.1	0.0	0.3	16	5	0	11	46	96	0	36	26	1,184	7	5.4	74
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	10	0	0	0	29	0	0	0	25	736	6	4.6	72
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.	10,047	675,668	n.a.	n.a.	n.a.

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, NORTH DAKOTA, 2005

Top 10 Drug Groups in Nursing Facilities	Total Medicaid Rx $	Users				Among Users	
		Number of Users	As a Percentage of All-Year Nursing Facility Residents	Number of Benefit Months	Number of Rx per Benefit Month	$ per Rx	Rx $ per Benefit Month
ANTIPSYCHOTICS	$125,106	64	49.2	695	1.0	$179	$180
ANTICONVULSANT	86,112	77	59.2	828	1.1	92	104
ANTIDEPRESSANTS	53,333	111	85.4	1,134	1.0	48	47
HEMATOPOIETIC AGENTS	46,781	20	15.4	230	0.9	232	203
ANALGESICS - ANTI-INFLAMMATORY	46,536	32	24.6	351	0.5	242	133
ANTIASTHMATIC	34,694	66	50.8	683	0.6	81	51
ANTIHYPERLIPIDEMIC	28,872	31	23.8	355	0.9	93	81
ULCER DRUGS	21,441	64	49.2	692	0.8	41	31
ANTIDIABETIC	20,750	32	24.6	350	1.1	52	59
MISC. RESPIRATORY	16,515	1	0.8	12	0.9	1501	1,376
Total	480,140	498		5,330	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for North Dakota, released by CMS in 12/2008. 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 127 beneficiaries who were in nursing facilities for part of their enrollment and their 1,197 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, NORTH DAKOTA, 2005

Beneficiary Characteristics	All Top 10 Drug Groups		ANTIPSYCHOTICS					ANTICONVULSANT				
	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	**4,821**	**$480,140**	**64**	**49.2**	**695**	**1.0**	**$180**	**77**	**59.2**	**828**	**1.1**	**$104**
Female												
All Females	2,592	271,989	36	50.7	374	1.0	174	40	56.3	436	1.1	101
Female, Disabled												
All Ages	2,294	253,985	28	52.8	294	1.1	200	36	67.9	392	1.1	109
64 or younger	2,271	253,303	28	53.8	294	1.1	200	36	69.2	392	1.1	109
65-74	23	682	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	298	18,004	8	44.4	80	0.5	80	4	22.2	44	1.0	27
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	31	1,558	1	100.0	12	0.1	1	0	0.0	0	0.0	0
75-84	56	4,574	2	50.0	8	1.1	175	0	0.0	0	0.0	0
85 and older	211	11,872	5	38.5	60	0.4	82	4	30.8	44	1.0	27
Male												
All Males	2,229	208,151	28	47.5	321	1.1	187	37	62.7	392	1.2	108
Male, Disabled												
All Ages	1,801	184,978	23	52.3	270	1.1	206	31	70.5	330	1.3	122
64 or younger	1,801	184,978	23	52.3	270	1.1	206	31	70.5	330	1.3	122
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	428	23,173	5	33.3	51	0.8	88	6	40.0	62	1.0	30
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	206	12,380	2	33.3	24	0.8	80	3	50.0	36	1.0	34
75-84	149	8,435	2	40.0	24	0.7	86	2	40.0	14	1.0	34
85 and older	73	2,358	1	25.0	3	2.0	163	1	25.0	12	1.0	14
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 North Dakota, released by CMS in 12/2008. 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 127 beneficiaries who were in nursing facilities for part of their enrollment and their 1,197 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.

Nondual Beneficiaries

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, NORTH DAKOTA, 2005

Beneficiary Characteristics	ANTIDEPRESSANTS					HEMATOPOIETIC AGENTS					ANALGESICS - ANTI-INFLAMMATORY				
	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	**111**	**85.4**	**1,134**	**1.0**	**$47**	**20**	**15.4**	**230**	**0.9**	**$203**	**32**	**24.6**	**351**	**0.5**	**$133**
Female															
All Females	66	93.0	664	1.0	40	10	14.1	120	1.0	343	23	32.4	255	0.6	168
Female, Disabled															
All Ages	52	98.1	536	1.0	37	9	17.0	108	1.0	381	21	39.6	231	0.5	180
64 or younger	51	98.1	532	1.0	37	9	17.3	108	1.0	381	20	38.5	227	0.5	184
65-74	1	100.0	4	1.0	40	0	0.0	0	0.0	0	1	100.0	4	0.3	1
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	14	77.8	128	1.0	54	1	5.6	12	0.3	3	2	11.1	24	0.9	51
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	1	100.0	12	0.3	2	1	100.0	12	0.3	3	1	100.0	12	0.8	10
75-84	4	100.0	32	1.5	99	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	9	69.2	84	0.9	44	0	0.0	0	0.0	0	1	7.7	12	1.0	93
Male															
All Males	45	76.3	470	1.0	56	10	16.9	110	0.8	51	9	15.3	96	0.5	38
Male, Disabled															
All Ages	35	79.5	372	1.0	62	6	13.6	72	0.8	76	6	13.6	61	0.5	40
64 or younger	35	79.5	372	1.0	62	6	13.6	72	0.8	76	6	13.6	61	0.5	40
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male, Other Eligibles															
All Ages	10	66.7	98	0.8	33	4	26.7	38	0.9	4	3	20.0	35	0.4	34
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	5	83.3	60	0.9	43	1	16.7	12	1.0	3	1	16.7	12	0.2	2
75-84	3	60.0	26	0.7	23	3	60.0	26	0.8	5	1	20.0	12	0.3	23
85 and older	2	50.0	12	0.9	8	0	0.0	0	0.0	0	1	25.0	11	0.9	82
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 North Dakota, released by CMS in 12/2008. 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 127 beneficiaries who were in nursing facilities for part of their enrollment and their 1,197 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.

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, NORTH DAKOTA, 2005

Beneficiary Characteristics	ANTIASTHMATIC					ANTIHYPERLIPIDEMIC					ULCER DRUGS				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx $	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx $	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx $
All	**66**	**50.8**	**683**	**0.6**	**$51**	**31**	**23.8**	**355**	**0.9**	**$81**	**64**	**49.2**	**692**	**0.8**	**$31**
Female															
All Females	29	40.8	274	0.6	45	17	23.9	193	0.9	85	36	50.7	379	0.8	29
Female, Disabled															
All Ages	25	47.2	236	0.6	52	14	26.4	163	1.0	89	30	56.6	309	0.8	34
64 or younger	22	42.3	224	0.6	52	14	26.9	163	1.0	89	29	55.8	305	0.8	35
65-74	3	300.0	12	1.4	43	0	0.0	0	0.0	0	1	100.0	4	0.3	1
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	22.2	38	0.4	3	3	16.7	30	0.7	58	6	33.3	70	0.5	7
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	0	0.0	0	0.0	0	1	100.0	12	1.1	113	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	4	30.8	38	0.4	3	2	15.4	18	0.4	21	6	46.2	70	0.5	7
Male															
All Males	37	62.7	409	0.7	55	14	23.7	162	0.8	78	28	47.5	313	0.7	33
Male, Disabled															
All Ages	29	65.9	313	0.7	51	11	25.0	126	0.8	79	19	43.2	217	0.7	40
64 or younger	29	65.9	313	0.7	51	11	25.0	126	0.8	79	19	43.2	217	0.7	40
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	8	53.3	96	0.6	68	3	20.0	36	0.8	74	9	60.0	96	0.7	18
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	3	50.0	36	0.9	113	2	33.3	24	1.0	81	2	33.3	24	1.0	25
75-84	4	80.0	48	0.5	51	1	20.0	12	0.5	62	4	80.0	38	0.5	16
85 and older	1	25.0	12	0.1	1	0	0.0	0	0.0	0	3	75.0	34	0.8	15
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 North Dakota, released by CMS in 12/2008. 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 127 beneficiaries who were in nursing facilities for part of their enrollment and their 1,197 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.

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, NORTH DAKOTA, 2005

	ANTIDIABETIC					MISC. RESPIRATORY						
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	**32**	**24.6**	**350**	**1.1**	**$59**	**1**	**0.8**	**12**	**0.9**	**$1,376**	**130**	**1,324**
Female												
All Females	16	22.5	192	1.2	66	0	0.0	0	0.0	0	71	716
Female, Disabled												
All Ages	16	30.2	192	1.2	66	0	0.0	0	0.0	0	53	544
64 or younger	16	30.8	192	1.2	66	0	0.0	0	0.0	0	52	540
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	4
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	0	0.0	0	0.0	0	0	0.0	0	0.0	0	18	172
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	1	12
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	4	32
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	13	128
Male												
All Males	16	27.1	158	1.1	51	1	1.7	12	0.9	1,376	59	608
Male, Disabled												
All Ages	11	25.0	132	1.0	52	1	2.3	12	0.9	1,376	44	463
64 or younger	11	25.0	132	1.0	52	1	2.3	12	0.9	1,376	44	463
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	5	33.3	26	1.4	49	0	0.0	0	0.0	0	15	145
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	6	72
75-84	3	60.0	22	1.4	50	0	0.0	0	0.0	0	5	46
85 and older	2	50.0	4	1.3	42	0	0.0	0	0.0	0	4	27
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 North Dakota, released by CMS in 12/2008. 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 127 beneficiaries who were in nursing facilities for part of their enrollment and their 1,197 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.

USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D

AMONG NONDUALS, BY BENEFICIARY CHARACTERISTIC[a,b]

NORTH DAKOTA, 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 $	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	**12,285**	**20.9**	**0.7**	**44,105**	**$14**	**$832,941**	**$19**	**3.4**	**58,832**
Age									
5 and younger	3,390	20.4	0.5	7,801	9	142,998	18	6.7	16,584
6-14	2,298	15.0	0.3	4,970	9	131,410	26	3.1	15,312
15-20	1,378	17.2	0.4	3,540	11	86,550	24	2.7	7,996
21-44	3,813	24.3	1.0	14,923	16	253,299	17	3.0	15,669
45-64	1,349	42.7	3.9	12,355	67	211,024	17	3.3	3,157
65-74	28	47.5	4.2	247	57	3,373	14	3.6	59
75-84	16	55.2	4.3	125	101	2,917	23	6.1	29
85 and older	13	50.0	5.5	144	53	1,370	10	3.7	26
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Basis of Eligibility[c]									
Aged	53	50.5	4.7	494	69	7,201	15	4.3	105
Disabled	1,972	42.7	3.8	17,356	80	370,762	21	3.3	4,621
Adults	3,734	22.8	0.7	12,007	12	189,077	16	3.4	16,394
Children	6,526	17.3	0.4	14,248	7	265,901	19	3.5	37,712
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Gender									
Female	7,865	23.0	0.9	29,343	16	549,698	19	3.8	34,206
Male	4,420	18.0	0.6	14,762	12	283,243	19	2.8	24,624
Unknown	0	0.0	0.0	0	0	0	0	0.0	2
Race									
White	7,170	19.4	0.7	27,199	15	542,175	20	2.9	37,006
African American	384	24.0	0.6	999	7	11,054	11	2.9	1,599
Other/unknown	4,731	23.4	0.8	15,907	14	279,712	18	5.0	20,227
Use of Nursing Facilities[d]									
Entire year	83	63.8	8.8	1,143	164	21,294	19	3.2	130
Part year	91	71.7	6.9	879	130	16,503	19	3.5	127
None	12,111	20.7	0.7	42,083	14	795,144	19	3.4	58,575
Maintenance Assistance Status									
Cash	6,584	24.9	1.1	29,510	21	545,921	18	3.4	26,446
Medically needy	830	18.3	0.8	3,825	19	85,117	22	3.5	4,538
Poverty related	1,634	13.5	0.2	2,863	4	44,316	15	2.7	12,099
Other/unknown	3,237	20.6	0.5	7,907	10	157,587	20	3.3	15,749

Source: Data for this table are from the MAX 2005 file for North Dakota, released by CMS in 12/2008. 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.

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**	**$19**	**$0**	**$0**	**485,138**
Age						
5 and younger	0.1	1	18	0	0	137,758
6-14	0.0	1	26	0	0	136,775
15-20	0.1	1	24	0	0	64,782
21-44	0.1	2	17	0	1	117,532
45-64	0.5	8	17	0	2	27,365
65-74	0.6	8	14	0	1	439
75-84	0.5	12	23	0	4	253
85 and older	0.6	6	10	0	1	234
Unknown	0.0	0	0	0	0	0
Basis of Eligibility[c]						
Aged	0.6	8	15	0	2	891
Disabled	0.4	8	21	0	2	46,527
Adults	0.1	2	16	0	0	118,468
Children	0.0	1	19	0	0	319,252
Unknown	0.0	0	0	0	0	0
Gender						
Female	0.1	2	19	0	0	280,621
Male	0.1	1	19	0	0	204,506
Unknown	0.0	0	0	0	0	11
Race						
White	0.1	2	20	0	0	299,597
African American	0.1	1	11	0	0	12,741
Other/unknown	0.1	2	18	0	0	172,800
Use of Nursing Facilities[d]						
Entire year	0.9	16	19	0	6	1,324
Part year	0.7	14	19	0	3	1,197
None	0.1	2	19	0	0	482,617
Maintenance Assistance Status						
Cash	0.1	2	18	0	1	222,741
Medically needy	0.1	3	22	0	1	31,296
Poverty related	0.0	1	15	0	0	88,468
Other/unknown	0.1	1	20	0	0	142,633

Source: Data for this table are from the MAX 2005 file for North Dakota, released by CMS in 12/2008. 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.

USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D FOR SELECTED DRUG CATEGORIES AMONG NONDUALS[a,b,c]
NORTH DAKOTA, 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	**16,009**	**$52**	**$832,941**	**100.0**	**44,105**	**$19**	**100.0**
Anorexia or weight loss/gain	0	0	0	0.0	0	0	0.0
Fertility drugs	1	19	19	0.0	1	19	0.0
Drugs for cosmetic purposes	67	17	1,171	0.1	104	11	0.2
Cough and cold medications	6,388	29	188,412	22.6	10,295	18	23.3
Vitamins and minerals	534	95	50,892	6.1	2,580	20	5.8
Non-prescription drugs	6,724	57	382,180	45.9	19,240	20	43.6
Barbiturates	112	121	13,552	1.6	987	14	2.2
Benzodiazepines	1,961	82	160,000	19.2	10,329	15	23.4
Other Part D Excl Rx Drugs	222	165	36,715	4.4	569	65	1.3

Source: Data for this table are from the MAX 2005 file for North Dakota, released by CMS in 12/2008. 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.

Nondual Beneficiaries

CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY[a, b]

NONDUAL BENEFICIARIES, NORTH DAKOTA, 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	**59,444**	**105**	**4,621**	**16,584**	**38,134**	**0**	**494,456**	**891**	**46,543**	**121,687**	**325,335**	**0**
Age												
5 and younger	16,775	0	193	0	16,582	0	140,475	0	2,033	0	138,442	0
6-14	15,495	0	464	2	15,029	0	139,388	0	4,964	11	134,413	0
15-20	8,050	0	428	1,360	6,262	0	65,769	0	4,428	10,043	51,298	0
21-44	15,845	0	1,628	13,956	261	0	120,403	0	16,423	102,798	1,182	0
45-64	3,165	0	1,901	1,264	0	0	27,495	0	18,668	8,827	0	0
65-74	59	50	7	2	0	0	439	404	27	8	0	0
75-84	29	29	0	0	0	0	253	253	0	0	0	0
85 and older	26	26	0	0	0	0	234	234	0	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	34,573	60	2,405	13,368	18,740	0	286,294	525	24,528	101,700	159,541	0
Male	24,869	45	2,216	3,216	19,392	0	208,151	366	22,015	19,987	165,783	0
Unknown	2	0	0	0	2	0	11	0	0	0	11	0
Race												
White	37,420	66	3,329	10,709	23,316	0	305,492	579	33,616	76,310	194,987	0
African American	1,618	14	78	439	1,087	0	12,964	136	693	3,026	9,109	0
Other/unknown	20,406	25	1,214	5,436	13,731	0	176,000	176	12,234	42,351	121,239	0
Use of Nursing Facilities[c]												
Entire year	130	33	97	0	0	0	1,324	317	1,007	0	0	0
Part year	127	6	107	13	1	0	1,197	50	1,012	123	12	0
None	59,187	66	4,417	16,571	38,133	0	491,935	524	44,524	121,564	325,323	0
Maintenance Assistance Status												
Cash	26,726	37	4,012	8,389	14,288	0	227,250	297	42,355	59,896	124,702	0
Medically needy	4,559	68	568	1,551	2,372	0	31,615	594	3,810	7,976	19,235	0
Poverty related	12,217	0	2	1,188	11,027	0	89,934	0	11	6,363	83,560	0
Other/unknown	15,942	0	39	5,456	10,447	0	145,657	0	367	47,452	97,838	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	58,002	105	4,619	16,062	37,216	0	482,155	891	46,519	117,316	317,429	0
FFS part year, with Rx claims	450	0	2	203	245	0	4,273	0	24	1,873	2,376	0
FFS part year, no Rx claims	380	0	0	129	251	0	2,568	0	0	893	1,675	0
MC all year, with Rx claims	373	0	0	134	239	0	3,763	0	0	1,300	2,463	0
MC all year, no Rx claims	239	0	0	56	183	0	1,697	0	0	305	1,392	0

Source: Data for this table are from the MAX 2005 file for North Dakota, released by CMS in 12/2008. 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, NORTH DAKOTA, 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	**59,444**	**494,456**	**58,832**	**485,138**	**0**	**9,318**
Fee-for-service (FFS) all year	58,002	482,155	58,002	482,155	0	0
FFS part year, with Rx claims	450	4,273	450	1,830	0	2,443
FFS part year, with no Rx claims	380	2,568	380	1,153	0	1,415
Managed care (MC) all year, with Rx claims	373	3,763	0	0	0	3,763
MC all year, with no Rx claims	239	1,697	0	0	0	1,697

Source: Data for this table are from the MAX 2005 file for North Dakota, released by CMS in 12/2008. 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