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

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TABLE ND.2
CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a, b}
NONDUAL BENEFICIARIES, SOUTH DAKOTA, 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	109,338	91	8,594	21,158	79,436	59	1,004,619	714	89,351	161,341	752,666	547
Age												
5 and younger	32,290	0	655	0	31,635	0	296,770	0	6,571	0	290,199	0
6-14	34,533	0	1,318	0	33,215	0	345,264	0	14,716	0	330,548	0
15-20	17,596	0	1,086	1,944	14,566	0	157,153	0	11,623	13,756	131,774	0
21-44	20,380	0	2,627	17,714	20	19	162,651	0	27,449	134,894	145	163
45-64	4,412	0	2,874	1,498	0	40	41,786	0	28,728	12,674	0	384
65-74	43	18	23	2	0	0	338	156	165	17	0	0
75-84	38	31	7	0	0	0	336	263	73	0	0	0
85 and older	46	42	4	0	0	0	321	295	26	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	60,636	62	4,191	17,218	39,106	59	548,275	447	44,133	132,710	370,438	547
Male	48,702	29	4,403	3,940	40,330	0	456,344	267	45,218	28,631	382,228	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	60,613	79	4,951	11,414	44,117	52	547,456	585	50,097	82,385	413,926	463
African American	2,974	1	117	613	2,243	0	25,344	12	1,022	4,163	20,147	0
Other/unknown	45,751	11	3,526	9,131	33,076	7	431,819	117	38,232	74,793	318,593	84
Use of Nursing Facilities^c												
Entire year	152	31	121	0	0	0	1,433	265	1,168	0	0	0
Part year	188	10	172	3	3	0	1,798	79	1,656	30	33	0
None	108,998	50	8,301	21,155	79,433	59	1,001,388	370	86,527	161,311	752,633	547
Maintenance Assistance Status												
Cash	35,453	41	7,893	10,417	17,102	0	341,215	330	83,437	85,931	171,517	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0
Poverty-related	50,979	1	1	4,360	46,558	59	471,127	12	10	23,487	447,071	547
Other/unknown	22,906	49	700	6,381	15,776	0	192,277	372	5,904	51,923	134,078	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	109,338	91	8,594	21,158	79,436	59	1,004,619	714	89,351	161,341	752,666	547
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 South 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.

TABLE ND.3
ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC^{a, b}
NONDUAL BENEFICIARIES, SOUTH 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	56.9	5.7	\$382	\$67	\$3,238	11.8	109,338
Age							
5 and younger	60.3	3.4	162	48	2,119	7.6	32,290
6-14	53.4	3.9	292	74	1,874	15.6	34,533
15-20	53.0	4.9	325	66	3,837	8.5	17,596
21-44	59.8	8.3	578	70	4,923	11.7	20,380
45-64	62.6	26.7	1,990	75	11,676	17.0	4,412
65-74	51.2	19.1	841	44	7,868	10.7	43
75-84	65.8	31.1	1,257	41	15,543	8.1	38
85 and older	63.0	31.5	1,435	46	13,857	10.4	46
Unknown	0.0	0.0	0	0	0	0.0	0
Basis of Eligibility^e							
Aged	64.8	30.2	1,273	42	13,837	9.2	91
Disabled	67.6	24.7	2,119	86	15,964	13.3	8,594
Adults	58.2	6.0	325	54	2,929	11.1	21,158
Children	55.4	3.5	208	59	1,923	10.8	79,436
Unknown	76.3	21.1	1,155	55	13,914	8.3	59
Gender							
Female	59.3	6.2	382	61	3,184	12.0	60,636
Male	54.0	5.0	382	76	3,306	11.6	48,702
Unknown	0.0	0.0	0	0	0	0.0	0
Race							
White	68.9	7.5	528	70	3,171	16.6	60,613
African American	53.2	3.5	226	65	1,671	13.5	2,974
Other/unknown	41.4	3.4	199	58	3,429	5.8	45,751
Use of Nursing Facilities^f							
Entire year	94.1	78.8	4,652	59	44,382	10.5	152
Part year	96.8	61.6	4,206	68	62,003	6.8	188
None	56.8	5.5	369	67	3,079	12.0	108,998
Maintenance Assistance Status							
Cash	52.6	8.7	653	75	4,985	13.1	35,453
Medically needy	0.0	0.0	0	0	0	0.0	0
Poverty related	58.1	3.5	198	56	1,347	14.7	50,979
Other/unknown	61.0	5.9	372	63	4,743	7.8	22,906

Source: Data for this table are from the MAX 2005 file for South 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 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, SOUTH DAKOTA, 2005

Beneficiary Characteristics	Mean Number of Rx	Mean Rx \$	Number of Rx, Percentage with:							Mean \$, All Medicaid FFS \$ ^d	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		Beneficiaries	Benefit Months
All	0.6	\$42	11.8	43.1	46.8	4.9	3.7	1.2	0.4	\$352	109,338	1,004,619
Age												
5 and younger	0.4	18	7.6	39.7	56.1	3.1	1.0	0.1	0.0	231	32,290	296,770
6-14	0.4	29	15.6	46.6	46.5	4.0	2.6	0.3	0.0	187	34,533	345,264
15-20	0.5	36	8.5	47.0	42.5	6.0	3.8	0.6	0.1	430	17,596	157,153
21-44	1.0	72	11.7	40.2	41.8	8.0	6.9	2.6	0.5	617	20,380	162,651
45-64	2.8	210	17.0	37.4	21.5	8.0	15.3	12.2	5.6	1,233	4,412	41,786
65-74	2.4	107	10.7	48.8	11.6	14.0	16.3	7.0	2.3	1,001	43	338
75-84	3.5	142	8.1	34.2	15.8	2.6	18.4	21.1	7.9	1,758	38	336
85 and older	4.5	206	10.4	37.0	8.7	10.9	17.4	19.6	6.5	1,986	46	321
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	3.9	162	9.2	35.2	11.0	8.8	20.9	16.5	7.7	1,764	91	714
Disabled	2.4	204	13.3	32.4	27.9	9.6	16.0	10.1	3.9	1,535	8,594	89,351
Adults	0.8	43	11.1	41.8	43.4	7.7	5.5	1.4	0.2	384	21,158	161,341
Children	0.4	22	10.8	44.6	49.7	3.7	1.8	0.2	0.0	203	79,436	752,666
Unknown	2.3	125	8.3	23.7	33.9	10.2	22.0	10.2	0.0	1,501	59	547
Gender												
Female	0.7	42	12.0	40.7	48.1	5.4	3.9	1.4	0.5	352	60,636	548,275
Male	0.5	41	11.6	46.0	45.1	4.4	3.4	0.9	0.2	353	48,702	456,344
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	0.8	58	16.6	31.1	54.9	6.7	5.0	1.7	0.5	351	60,613	547,456
African American	0.4	27	13.5	46.8	47.0	3.6	2.1	0.3	0.1	196	2,974	25,344
Other/unknown	0.4	21	5.8	58.6	36.0	2.7	2.0	0.6	0.2	363	45,751	431,819
Use of Nursing Facilities^f												
Entire year	8.4	493	10.5	5.9	2.0	7.9	19.1	38.8	26.3	4,708	152	1,433
Part year	6.4	440	6.8	3.2	19.1	8.0	27.1	19.7	22.9	6,483	188	1,798
None	0.6	40	12.0	43.2	46.9	4.9	3.6	1.1	0.3	335	108,998	1,001,388
Maintenance Assistance Status												
Cash	0.9	68	13.1	47.4	37.8	5.4	5.6	2.8	1.0	518	35,453	341,215
Medically needy	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Poverty related	0.4	21	14.7	41.9	52.2	4.0	1.7	0.2	0.0	146	50,979	471,127
Other/unknown	0.7	44	7.8	39.0	48.4	6.3	5.0	1.1	0.2	565	22,906	192,277

Source: Data for this table are from the MAX 2005 file for South 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 I of Table 1 for methodology used to determine nursing facility residence.

Benef(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, SOUTH 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	0.6	\$42	\$67	0.3	\$32	\$123	0.0	\$3	\$72	0.3	\$7	\$22
Age												
5 and younger	0.4	18	48	0.1	13	87	0.0	1	52	0.2	4	18
6-14	0.4	29	74	0.2	24	115	0.0	2	71	0.2	4	21
15-20	0.5	36	66	0.2	28	118	0.0	2	62	0.3	6	22
21-44	1.0	72	70	0.4	55	147	0.1	5	78	0.6	13	22
45-64	2.8	210	75	1.1	156	142	0.1	13	97	1.6	40	26
65-74	2.4	107	44	0.6	61	94	0.1	8	98	1.7	38	22
75-84	3.5	142	41	1.2	100	85	0.1	6	44	2.2	36	17
85 and older	4.5	206	46	1.5	148	96	0.1	4	42	2.9	53	19
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility^d												
Aged	3.9	162	42	1.3	113	87	0.1	4	48	2.4	44	18
Disabled	2.4	204	86	1.0	161	156	0.1	11	88	1.2	32	26
Adults	0.8	43	54	0.3	30	119	0.0	3	71	0.5	9	19
Children	0.4	22	59	0.2	17	100	0.0	1	62	0.2	4	20
Unknown	2.3	125	55	0.8	91	112	0.1	5	40	1.3	29	22
Gender												
Female	0.7	42	61	0.3	31	118	0.0	3	68	0.4	8	21
Male	0.5	41	76	0.3	33	129	0.0	2	79	0.3	6	23
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Race												
White	0.8	58	70	0.4	45	125	0.0	4	74	0.4	9	22
African American	0.4	27	65	0.2	21	125	0.0	1	73	0.2	5	20
Other/unknown	0.4	21	58	0.1	16	115	0.0	1	66	0.2	4	20
Use of Nursing Facilities^e												
Entire year	8.4	493	59	2.6	319	123	0.4	33	92	5.4	141	26
Part year	6.4	440	68	2.2	311	139	0.3	29	111	3.9	99	25
None	0.6	40	67	0.3	31	122	0.0	3	71	0.3	7	22
Maintenance Assistance Status												
Cash	0.9	68	75	0.4	52	142	0.0	4	85	0.5	12	24
Medically needy	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Poverty related	0.4	21	56	0.2	16	98	0.0	1	59	0.2	4	20
Other/unknown	0.7	44	63	0.3	35	114	0.0	2	63	0.4	7	20

Source: Data for this table are from the MAX 2005 file for South 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 South Dakota, 1.1 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.medispain.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, SOUTH DAKOTA, 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 Brand-Name	Patent Brand-Name			Patented Brand-Name	Patent Brand-Name			Patented Brand-Name	Patent Brand-Name						
Anti-infective Agents	0.2	0.1	0.0	0.2	\$10	\$5	\$2	\$3	\$41	\$79	\$61	\$20	116,084	\$4,749,561	45,239	41.4	470,231
Biologicals	0.2	0.2	0.0	0.0	136	135	0	0	709	726	119	83	1,296	919,114	644	0.6	6,776
Antineoplastic Agents	0.7	0.2	0.0	0.5	129	110	1	19	194	656	185	38	983	190,954	146	0.1	1,477
Endocrine/Metabolic Drugs	0.4	0.1	0.1	0.2	25	16	3	5	62	123	61	25	48,718	3,043,585	11,902	10.9	120,600
Cardiovascular Agents	0.9	0.3	0.0	0.6	32	24	0	8	35	73	30	14	39,201	1,390,901	4,186	3.8	42,979
Respiratory Agents	0.4	0.2	0.0	0.1	22	19	1	2	59	86	60	18	98,028	5,816,558	25,224	23.1	266,065
Gastrointestinal Agents	0.4	0.2	0.0	0.2	40	36	0	4	95	147	66	25	34,018	3,245,794	7,886	7.2	80,335
Genitourinary Agents	0.3	0.1	0.0	0.1	18	13	1	3	67	111	59	26	7,212	481,687	2,719	2.5	26,951
CNS Drugs	0.8	0.5	0.0	0.4	81	71	1	9	96	153	137	24	84,099	8,089,336	9,937	9.1	99,513
Stimulants/Anti-obesity/Anorexia	0.8	0.7	0.0	0.1	78	75	1	3	103	111	76	33	37,162	3,824,292	4,632	4.2	48,869
Miscellaneous Psychological/ Neurological Agents	0.3	0.3	0.0	0.1	164	159	1	4	474	550	104	79	755	358,154	220	0.2	2,186
Analgesics and Anesthetics	0.4	0.0	0.0	0.3	17	7	3	6	46	164	216	21	56,211	2,595,604	15,541	14.2	155,502
Neuromuscular Agents	0.6	0.3	0.0	0.3	55	43	2	9	95	174	76	32	38,098	3,635,775	6,296	5.8	66,191
Nutritional Products	0.3	0.0	0.0	0.3	5	1	0	4	17	41	27	14	8,997	150,110	3,507	3.2	31,802
Hematological Agents	0.6	0.1	0.1	0.4	127	120	1	6	217	852	30	14	5,205	1,129,897	906	0.8	8,912
Topical Products	0.2	0.1	0.0	0.1	8	5	0	3	43	83	33	24	44,359	1,901,465	22,064	20.2	233,947
Miscellaneous Products	0.2	0.1	0.0	0.1	22	17	2	2	121	144	240	49	1,758	213,513	913	0.8	9,883
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	5	0	0	0	29	0	0	0	614	17,936	353	0.3	3,771
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.	622,798	41,754,236	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for South 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.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 South Dakota, 1.1 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.

Benef(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; CNS = Central Nervous System; MAX = Medicaid Analytic Extract; n.a. = not applicable; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE ND.7
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP^{a, b, c}
 NONDUAL BENEFICIARIES, SOUTH DAKOTA, 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	\$4,899,901	3,562	3.3	37,456	0.7	\$200	\$131
STIMULANTS/ANTI-OBESITY/ANOREXIANTS	3,824,292	5,616	5.1	59,620	0.6	103	64
ANTIASTHMATIC	3,424,516	17,656	16.1	186,969	0.3	71	18
ANTICONVULSANT	3,146,357	3,531	3.2	37,297	0.7	116	84
ANTIDEPRESSANTS	2,788,905	9,550	8.7	96,517	0.5	61	29
ULCER DRUGS	2,314,144	6,126	5.6	62,202	0.4	102	37
ANALGESICS - Narcotic	1,348,552	16,066	14.7	161,443	0.2	36	8
DERMATOLOGICAL	1,318,660	16,964	15.5	183,130	0.1	51	7
MISC. ENDOCRINE	1,240,798	642	0.6	7,036	0.5	335	176
ANTIHISTAMINES	1,235,340	10,128	9.3	109,618	0.2	48	11
Total	25,541,465	89,841		941,288	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for South 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.medispn.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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

Nondual Beneficiaries

TABLE ND.7A
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS COMBINED
 AND FIRST AND SECOND GROUPS SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, SOUTH DAKOTA, 2005

Beneficiary Characteristics	All Top 10 Drug Groups			ANTIPSYCHOTICS				STIMULANTS/ANTI-OBESITY/ANOREXIANTS				
	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
All	298,741	\$25,541,465	3,562	3.3	37,456	0.7	\$131	5,616	5.1	59,620	0.6	\$64
Female												
All Females	166,885	13,090,124	1,756	2.9	18,262	0.6	116	1,672	2.8	17,733	0.6	64
Female, Disabled												
All Ages	62,064	6,303,631	815	19.4	8,974	0.8	169	214	5.1	2,447	0.7	80
5 and younger	1,407	129,851	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	4,958	523,528	44	9.1	503	0.7	106	81	16.7	925	0.7	68
15-20	3,375	335,787	54	12.7	624	0.7	111	49	11.6	569	0.7	81
21-44	20,677	2,210,877	336	25.3	3,708	0.7	166	49	3.7	550	0.7	98
45-64	31,472	3,090,661	379	22.9	4,115	0.8	188	35	2.1	403	0.6	86
65-74	78	3,463	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	58	4,405	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	39	5,059	2	66.7	24	1.0	166	0	0.0	0	0.0	0
Female, Other Eligibles												
All Ages	104,821	6,786,493	941	1.7	9,288	0.4	65	1,458	2.6	15,286	0.6	61
5 and younger	13,951	672,740	7	0.0	76	0.4	54	45	0.3	452	0.4	25
6-14	25,502	1,981,917	209	1.3	2,238	0.5	75	891	5.5	9,594	0.6	63
15-20	18,261	1,194,664	297	3.2	2,951	0.4	67	279	3.0	2,843	0.5	58
21-44	40,500	2,458,404	382	2.7	3,595	0.3	57	210	1.5	2,070	0.5	54
45-64	6,060	451,198	38	3.5	354	0.6	78	33	3.0	327	0.6	119
65-74	118	6,183	1	7.1	12	0.7	6	0	0.0	0	0.0	0
75-84	160	8,056	3	16.7	23	0.8	77	0	0.0	0	0.0	0
85 and older	269	13,331	4	12.5	39	0.6	33	0	0.0	0	0.0	0
Male												
All Males	131,856	12,451,341	1,806	3.7	19,194	0.7	145	3,944	8.1	41,887	0.6	64
Male, Disabled												
All Ages	45,585	5,316,942	885	20.1	9,775	0.8	180	545	12.4	6,153	0.8	75
5 and younger	2,776	224,920	8	2.1	89	0.5	90	21	5.6	243	0.5	41
6-14	8,779	1,139,168	185	22.2	2,088	0.7	118	326	39.1	3,691	0.7	73
15-20	6,449	726,002	122	18.4	1,382	0.8	146	136	20.5	1,526	0.8	79
21-44	13,941	1,716,219	339	26.1	3,696	0.8	198	56	4.3	632	0.9	87
45-64	13,534	1,503,320	229	18.8	2,496	0.9	228	6	0.5	61	0.8	181
65-74	66	5,564	1	11.1	12	0.1	2	0	0.0	0	0.0	0
75-84	40	1,749	1	50.0	12	1.4	105	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, SOUTH DAKOTA, 2005

Beneficiary Characteristics	All Top 10 Drug Groups		ANTIPSYCHOTICS					STIMULANTS/ANTI-OBESITY/ANOREXIANTS				
	Number of Rx	Rx \$	Number of Users	Users as % of All Bene	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 Bene	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
Male, Other Eligibles												
All Ages	86,271	7,134,399	921	2.1	9,419	0.6	108	3,399	7.7	35,734	0.6	62
5 and younger	19,397	1,082,313	33	0.2	366	0.4	58	164	1.0	1,843	0.4	44
6-14	42,577	3,876,861	472	2.8	4,971	0.6	99	2,547	15.1	26,958	0.6	63
15-20	17,850	1,715,484	337	4.6	3,396	0.7	131	620	8.4	6,296	0.6	66
21-44	5,091	347,371	66	2.0	585	0.3	68	60	1.8	570	0.5	64
45-64	1,037	92,883	10	2.2	68	0.7	241	8	1.8	67	0.4	71
65-74	7	614	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	142	5,673	1	7.7	9	0.9	33	0	0.0	0	0.0	0
85 and older	170	13,200	2	20.0	24	1.2	192	0	0.0	0	0.0	0
Unknown	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2005 file for South 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.medspan.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, SOUTH DAKOTA, 2005

Beneficiary Characteristics	ANTIASTHMATIC					ANTICONVULSANT					ANTIDEPRESSANTS				
	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	17,656	16.1	186,969	0.3	\$18	3,531	3.2	37,297	0.7	\$84	9,550	8.7	96,517	0.5	\$29
Female															
All Females	9,055	14.9	94,994	0.3	17	2,127	3.5	22,369	0.7	81	6,946	11.5	69,582	0.5	29
Female, Disabled															
All Ages	1,465	35.0	16,364	0.4	36	1,108	26.4	12,279	0.9	107	1,735	41.4	19,138	0.6	42
5 and younger	137	49.5	1,581	0.3	21	39	14.1	466	0.7	65	2	0.7	21	0.2	9
6-14	154	31.8	1,793	0.5	31	139	28.7	1,573	0.9	128	47	9.7	528	0.7	27
15-20	79	18.6	837	0.3	22	84	19.8	964	0.9	115	96	22.6	1,093	0.6	31
21-44	371	27.9	4,209	0.4	28	421	31.7	4,674	1.0	128	668	50.3	7,376	0.6	40
45-64	720	43.5	7,896	0.5	46	425	25.7	4,602	0.8	81	918	55.5	10,072	0.7	45
65-74	2	14.3	24	0.1	4	0	0.0	0	0.0	0	4	28.6	48	0.5	16
75-84	2	40.0	24	1.0	102	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	7,590	13.4	78,630	0.2	14	1,019	1.8	10,090	0.5	49	5,211	9.2	50,444	0.4	25
5 and younger	2,657	17.2	28,319	0.2	11	55	0.4	616	0.4	56	9	0.1	97	0.3	3
6-14	2,032	12.5	22,023	0.2	18	148	0.9	1,661	0.6	85	586	3.6	6,339	0.4	18
15-20	1,000	10.9	10,094	0.2	13	169	1.8	1,695	0.4	44	1,210	13.2	11,964	0.4	21
21-44	1,668	11.6	15,932	0.2	12	570	4.0	5,374	0.5	40	3,048	21.2	28,624	0.4	27
45-64	218	20.1	2,129	0.3	20	74	6.8	737	0.5	37	333	30.8	3,204	0.5	34
65-74	2	14.3	24	1.0	45	1	7.1	2	0.5	18	7	50.0	52	0.7	39
75-84	4	22.2	18	0.2	6	0	0.0	0	0.0	0	7	38.9	62	0.9	49
85 and older	9	28.1	91	0.5	33	2	6.3	5	0.8	41	11	34.4	102	0.6	22
Male															
All Males	8,601	17.7	91,975	0.3	19	1,404	2.9	14,928	0.8	90	2,604	5.3	26,935	0.5	28
Male, Disabled															
All Ages	1,042	23.7	11,496	0.4	37	868	19.7	9,576	0.9	108	922	20.9	10,131	0.6	35
5 and younger	260	68.8	2,880	0.4	35	49	13.0	528	0.7	71	4	1.1	43	0.3	3
6-14	221	26.5	2,577	0.4	43	131	15.7	1,518	0.8	107	121	14.5	1,407	0.6	19
15-20	119	18.0	1,333	0.4	29	149	22.5	1,644	0.9	132	121	18.3	1,395	0.7	36
21-44	148	11.4	1,617	0.5	37	297	22.9	3,286	0.9	120	322	24.8	3,528	0.7	42
45-64	294	24.1	3,089	0.5	37	242	19.8	2,600	0.8	86	350	28.7	3,710	0.6	36
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	11.1	12	1.1	9
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	150.0	36	0.4	10
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, SOUTH DAKOTA, 2005

Beneficiary Characteristics	ANTIASTHMATIC					ANTICONVULSANT					ANTIDEPRESSANTS				
	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	7,559	17.1	80,479	0.2	17	536	1.2	5,352	0.5	57	1,682	3.8	16,804	0.5	23
5 and younger	3,952	24.4	42,086	0.2	13	65	0.4	717	0.5	49	17	0.1	184	0.3	9
6-14	2,661	15.7	28,873	0.3	22	214	1.3	2,244	0.5	63	658	3.9	7,024	0.5	19
15-20	747	10.2	7,757	0.3	20	138	1.9	1,362	0.6	70	667	9.1	6,628	0.5	26
21-44	162	4.8	1,417	0.3	15	102	3.0	903	0.5	37	286	8.5	2,467	0.4	27
45-64	29	6.4	269	0.4	32	14	3.1	99	0.5	22	49	10.7	441	0.5	36
65-74	0	0.0	0	0.0	0	1	16.7	12	0.4	50	0	0.0	0	0.0	0
75-84	5	38.5	41	0.5	11	2	15.4	15	1.2	44	1	7.7	12	0.2	17
85 and older	3	30.0	36	0.2	12	0	0.0	0	0.0	0	4	40.0	48	1.0	51
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 South 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.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, SOUTH DAKOTA, 2005

Beneficiary Characteristics	ULCER DRUGS					ANALGESICS - Narcotic					DERMATOLOGICAL				
	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	6,126	5.6	62,202	0.4	\$37	16,066	14.7	161,443	0.2	\$8	16,964	15.5	183,130	0.1	\$7
Female															
All Females	3,973	6.6	40,503	0.4	39	11,966	19.7	118,965	0.2	8	9,919	16.4	106,637	0.1	7
Female, Disabled															
All Ages	1,176	28.1	13,036	0.5	61	2,090	49.9	23,154	0.4	23	1,331	31.8	15,321	0.2	10
5 and younger	54	19.5	570	0.4	21	25	9.0	284	0.1	2	92	33.2	1,020	0.1	4
6-14	71	14.6	804	0.6	46	43	8.9	505	0.1	1	167	34.4	1,928	0.1	7
15-20	54	12.7	608	0.4	43	68	16.0	778	0.1	2	116	27.4	1,333	0.2	10
21-44	333	25.1	3,718	0.5	60	776	58.4	8,541	0.4	16	466	35.1	5,416	0.2	10
45-64	656	39.7	7,240	0.6	68	1,170	70.7	12,961	0.5	30	489	29.6	5,612	0.2	11
65-74	3	21.4	36	0.9	60	5	35.7	49	0.4	6	0	0.0	0	0.0	0
75-84	2	40.0	24	0.8	58	3	60.0	36	0.4	15	1	20.0	12	0.1	1
85 and older	3	100.0	36	0.1	7	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	2,797	5.0	27,467	0.3	28	9,876	17.5	95,811	0.2	4	8,588	15.2	91,316	0.1	7
5 and younger	579	3.7	5,368	0.2	13	349	2.3	3,892	0.1	1	3,181	20.6	34,113	0.1	5
6-14	371	2.3	4,101	0.2	21	764	4.7	8,516	0.1	1	2,160	13.3	24,175	0.1	7
15-20	464	5.1	4,700	0.2	22	1,877	20.5	18,430	0.1	1	1,478	16.1	15,548	0.1	9
21-44	1,195	8.3	11,419	0.3	35	6,396	44.5	60,105	0.2	5	1,607	11.2	15,800	0.1	8
45-64	170	15.7	1,728	0.5	65	478	44.2	4,767	0.3	12	149	13.8	1,557	0.1	8
65-74	4	28.6	43	0.5	61	2	14.3	24	0.5	7	3	21.4	29	0.5	5
75-84	6	33.3	40	0.7	67	2	11.1	24	2.3	17	1	5.6	9	0.1	1
85 and older	8	25.0	68	0.8	40	8	25.0	53	0.6	30	9	28.1	85	0.3	9
Male															
All Males	2,153	4.4	21,699	0.4	34	4,100	8.4	42,478	0.2	10	7,045	14.5	76,493	0.1	7
Male, Disabled															
All Ages	675	15.3	7,363	0.6	57	1,063	24.1	11,312	0.4	26	969	22.0	11,175	0.2	11
5 and younger	89	23.5	968	0.5	33	24	6.3	286	0.1	1	107	28.3	1,230	0.1	4
6-14	49	5.9	585	0.5	43	71	8.5	825	0.1	1	182	21.8	2,130	0.1	8
15-20	60	9.1	688	0.5	54	85	12.8	979	0.1	4	174	26.3	2,028	0.2	12
21-44	199	15.3	2,182	0.6	63	360	27.7	3,811	0.4	23	297	22.9	3,508	0.2	12
45-64	275	22.5	2,905	0.6	65	521	42.7	5,387	0.5	38	207	17.0	2,256	0.2	16
65-74	2	22.2	23	0.7	64	1	11.1	12	2.8	323	1	11.1	11	0.2	8
75-84	1	50.0	12	0.5	8	1	50.0	12	0.1	1	1	50.0	12	0.3	2
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, SOUTH DAKOTA, 2005

Beneficiary Characteristics	ULCER DRUGS					ANALGESICS - Narcotic					DERMATOLOGICAL				
	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	1,478	3.3	14,336	0.3	22	3,037	6.9	31,166	0.2	4	6,076	13.7	65,318	0.1	7
5 and younger	717	4.4	6,505	0.3	15	479	3.0	5,310	0.1	1	3,192	19.7	34,204	0.1	5
6-14	355	2.1	3,909	0.2	19	791	4.7	8,801	0.1	1	1,669	9.9	18,554	0.1	6
15-20	196	2.7	2,008	0.3	29	796	10.8	8,273	0.1	1	1,042	14.2	10,934	0.2	14
21-44	167	5.0	1,515	0.3	45	827	24.6	7,517	0.3	8	132	3.9	1,191	0.2	10
45-64	33	7.2	295	0.4	47	134	29.4	1,158	0.3	22	31	6.8	336	0.2	14
65-74	0	0.0	0	0.0	0	1	16.7	12	0.1	1	0	0.0	0	0.0	0
75-84	6	46.2	60	0.6	29	6	46.2	59	0.6	20	5	38.5	43	0.2	9
85 and older	4	40.0	44	0.8	79	3	30.0	36	0.7	14	5	50.0	56	0.3	13
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 South 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.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, SOUTH DAKOTA, 2005

Beneficiary Characteristics	MISC. ENDOCRINE					ANTIHISTAMINES					Number of Beneficiaries	Number of Benefit Months
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month		
All	642	0.6	7,036	0.5	\$176	10,128	9.3	109,618	0.2	\$11	109,338	1,004,619
Female												
All Females	334	0.6	3,667	0.5	110	5,729	9.4	61,242	0.2	11	60,636	548,275
Female, Disabled												
All Ages	184	4.4	2,053	0.6	130	614	14.7	7,024	0.4	22	4,191	44,133
5 and younger	14	5.1	160	0.9	294	24	8.7	282	0.3	9	277	2,766
6-14	17	3.5	192	0.6	384	77	15.9	884	0.4	15	485	5,428
15-20	5	1.2	44	0.7	178	49	11.6	565	0.3	14	424	4,573
21-44	35	2.6	418	0.6	149	206	15.5	2,331	0.4	23	1,329	14,111
45-64	113	6.8	1,239	0.6	61	255	15.4	2,926	0.5	27	1,654	17,086
65-74	0	0.0	0	0.0	0	2	14.3	24	0.1	6	14	84
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	5	60
85 and older	0	0.0	0	0.0	0	1	33.3	12	1.0	67	3	25
Female, Other Eligibles												
All Ages	150	0.3	1,614	0.4	86	5,115	9.1	54,218	0.2	10	56,445	504,142
5 and younger	15	0.1	149	0.3	61	1,341	8.7	14,836	0.2	5	15,460	141,549
6-14	76	0.5	872	0.4	106	1,568	9.6	17,406	0.2	12	16,297	162,078
15-20	13	0.1	142	0.5	137	824	9.0	8,439	0.2	11	9,157	79,708
21-44	23	0.2	244	0.4	40	1,281	8.9	12,482	0.2	10	14,385	110,837
45-64	20	1.8	186	0.5	35	98	9.1	1,028	0.3	15	1,082	9,506
65-74	0	0.0	0	0.0	0	1	7.1	7	0.1	3	14	123
75-84	1	5.6	1	1.0	77	0	0.0	0	0.0	0	18	141
85 and older	2	6.3	20	0.9	50	2	6.3	20	0.6	31	32	200
Male												
All Males	308	0.6	3,369	0.5	248	4,399	9.0	48,376	0.2	12	48,702	456,344
Male, Disabled												
All Ages	86	2.0	980	0.7	341	402	9.1	4,572	0.4	22	4,403	45,218
5 and younger	9	2.4	100	0.6	240	60	15.9	673	0.3	10	378	3,805
6-14	34	4.1	389	0.7	656	105	12.6	1,216	0.4	23	833	9,288
15-20	11	1.7	125	0.7	117	70	10.6	807	0.4	21	662	7,050
21-44	15	1.2	170	0.8	172	95	7.3	1,098	0.6	32	1,298	13,338
45-64	17	1.4	196	0.6	55	72	5.9	778	0.4	20	1,220	11,642
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	9	81
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	13
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	1

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, SOUTH DAKOTA, 2005

Beneficiary Characteristics	MISC. ENDOCRINE					ANTIHISTAMINES					Number of Beneficiaries	Number of Benefit Months
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean		Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean			
				Rx per Month	Rx \$ per Benefit				Rx per Month	Rx \$ per Benefit		
Male, Other Eligibles												
All Ages	222	0.5	2,389	0.5	210	3,997	9.0	43,804	0.2	10	44,299	411,126
5 and younger	8	0.0	85	0.8	397	1,622	10.0	17,952	0.2	6	16,175	148,650
6-14	167	1.0	1,791	0.4	183	1,773	10.5	19,675	0.3	13	16,918	168,470
15-20	42	0.6	454	0.6	305	493	6.7	5,174	0.3	16	7,353	65,822
21-44	3	0.1	36	0.2	12	91	2.7	837	0.2	11	3,368	24,365
45-64	0	0.0	0	0.0	0	15	3.3	139	0.2	11	456	3,552
65-74	0	0.0	0	0.0	0	1	16.7	12	0.1	1	6	50
75-84	1	7.7	11	0.5	42	2	15.4	15	0.6	18	13	122
85 and older	1	10.0	12	1.1	82	0	0.0	0	0.0	0	10	95
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 South 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.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, SOUTH 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	\$493	8.4	152	1,433
Age				
0-64	552	8.9	118	1,143
65-74	415	9.6	3	31
75-84	287	7.8	9	68
85 and older	228	5.2	22	191
Unknown	0	0.0	0	0
Gender				
Female	510	8.7	82	765
Male	475	8.0	70	668
Unknown	0	0.0	0	0
Race				
White	445	8.4	92	827
African American	374	6.7	2	22
Other/unknown	566	8.3	58	584
Basis of Eligibility^c				
Aged	247	6.2	31	265
Disabled	549	8.9	121	1,168
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 South 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 188 beneficiaries who were in nursing facilities for part of their enrollment and their 1,798 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, SOUTH DAKOTA, 2005

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users								Users				
	Total	Off-Patent Brand-Name	Off-Patent Brand-Name	Generic	Total	Off-Patent Brand-Name	Off-Patent Brand-Name	Generic	Total	Off-Patent Brand-Name	Off-Patent Brand-Name	Generic	Total Number of Rx	Total Rx \$	Number of Users	As a Percentage of All-Year Nursing Facility Residents	Number of Benefit Months
Anti-infective Agents	0.6	0.1	0.0	0.4	\$25	\$12	\$4	\$9	\$45	\$109	\$97	\$22	619	\$28,155	103	67.8	1,110
Biologicals	0.1	0.1	0.0	0.0	4	2	0	2	37	33	0	43	12	442	10	6.6	113
Antineoplastic Agents	0.0	0.0	0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0.0	0
Endocrine/Metabolic Drugs	1.5	0.4	0.2	0.9	69	36	19	14	47	92	99	16	858	40,656	59	38.8	591
Cardiovascular Agents	1.9	0.5	0.0	1.5	58	37	0	21	30	77	19	15	1,623	48,751	86	56.6	835
Respiratory Agents	0.9	0.6	0.1	0.3	64	56	3	5	70	92	59	20	473	33,221	52	34.2	517
Gastrointestinal Agents	1.3	0.6	0.0	0.8	100	84	1	15	75	152	41	19	1,141	85,278	87	57.2	857
Genitourinary Agents	0.9	0.5	0.1	0.3	50	38	2	10	57	69	35	37	328	18,809	37	24.3	378
CNS Drugs	2.1	1.1	0.0	1.0	177	151	3	24	84	141	123	23	2,418	204,310	114	75.0	1,153
Stimulants/Anti-obesity/Anorexia	0.5	0.0	0.0	0.5	4	0	0	4	9	0	0	9	5	44	1	0.7	10
Miscellaneous Psychological/Neurological Agents	0.8	0.8	0.0	0.0	361	361	0	0	429	429	0	0	48	20,569	5	3.3	57
Analgesics and Anesthetics	1.6	0.2	0.2	1.2	91	16	23	51	58	89	149	42	1,304	75,958	85	55.9	837
Neuromuscular Agents	1.7	0.3	0.1	1.3	109	43	4	61	66	128	71	49	1,463	96,077	81	53.3	885
Nutritional Products	1.1	0.0	0.0	1.1	19	0	1	18	18	6	45	17	575	10,139	53	34.9	530
Hematological Agents	1.1	0.2	0.1	0.9	43	31	1	11	38	162	19	13	583	22,211	49	32.2	518
Topical Products	0.6	0.2	0.0	0.4	26	16	1	9	44	96	33	23	486	21,329	78	51.3	823
Miscellaneous Products	0.1	0.0	0.0	0.1	2	1	0	1	10	23	0	8	17	176	10	6.6	114
Unknown Therapeutic Category	0.6	0.0	0.0	0.0	22	0	0	0	35	0	0	0	27	943	4	2.6	43
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.	11,980	707,068	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for South Dakota, released by CMS in 12/2008. 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 188 beneficiaries who were in nursing facilities for part of their enrollment and their 1,798 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.medispn.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.medispn.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

In South Dakota, 1.1 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, SOUTH 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	\$129,344	71	46.7	682	1.1	\$180	\$190
ANTICONVULSANT	69,176	71	46.7	746	1.2	75	93
ANTIDEPRESSANTS	64,593	128	84.2	1,380	0.8	57	47
ULCER DRUGS	62,645	87	57.2	861	0.8	89	73
ANALGESICS - Narcotic	61,087	89	58.6	907	1.1	59	67
ANTIASTHMATIC	23,387	53	34.9	509	0.6	80	46
ANTIDIABETIC	20,704	50	32.9	492	1.0	42	42
ANTIHYPERLIPIDEMIC	20,570	29	19.1	287	0.8	88	72
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	20,569	6	3.9	69	0.7	429	298
MISC. ENDOCRINE	19,778	19	12.5	202	0.7	131	98
Total	491,853	603		6,135	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for South 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 188 beneficiaries who were in nursing facilities for part of their enrollment and their 1,798 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); 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, SOUTH DAKOTA, 2005

Beneficiary Characteristics	All Top 10 Drug Groups			ANTIPSYCHOTICS				ANTICONSULSANT				
	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	5,745	\$491,853	71	46.7	682	1.1	\$190	71	46.7	746	1.2	\$93
Female												
All Females	3,071	254,960	35	42.7	320	1.0	159	27	32.9	276	1.3	87
Female, Disabled												
All Ages	2,578	230,304	30	50.0	279	1.0	178	25	41.7	271	1.3	88
64 or younger	2,553	226,274	28	47.5	255	1.0	179	25	42.4	271	1.3	88
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	25	4,030	2	200.0	24	1.0	166	0	0.0	0	0.0	0
Female, Other Eligibles												
All Ages	493	24,656	5	22.7	41	0.7	34	2	9.1	5	0.8	41
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	101	5,651	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	125	4,742	1	20.0	2	1.0	44	0	0.0	0	0.0	0
85 and older	267	14,263	4	26.7	39	0.6	33	2	13.3	5	0.8	41
Male												
All Males	2,674	236,893	36	51.4	362	1.1	217	44	62.9	470	1.2	96
Male, Disabled												
All Ages	2,467	224,683	34	55.7	341	1.1	226	42	68.9	455	1.2	98
64 or younger	2,413	220,587	33	55.9	329	1.2	234	42	71.2	455	1.2	98
65-74	54	4,096	1	100.0	12	0.1	2	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	207	12,210	2	22.2	21	1.0	69	2	22.2	15	1.2	44
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	116	4,093	1	25.0	9	0.9	33	2	50.0	15	1.2	44
85 and older	91	8,117	1	20.0	12	1.1	95	0	0.0	0	0.0	0
Unknown	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2005 file for South 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 188 beneficiaries who were in nursing facilities for part of their enrollment and their 1,798 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.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, SOUTH DAKOTA, 2005

Beneficiary Characteristics	ANTIDEPRESSANTS					ULCER DRUGS					ANALGESICS - Narcotic				
	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	128	84.2	1,380	0.8	\$47	87	57.2	861	0.8	\$73	89	58.6	907	1.1	\$67
Female															
All Females	78	95.1	831	0.8	44	47	57.3	463	0.8	66	52	63.4	530	1.2	76
Female, Disabled															
All Ages	64	106.7	687	0.8	46	37	61.7	382	0.8	65	43	71.7	460	1.2	83
64 or younger	64	108.5	687	0.8	46	36	61.0	370	0.8	67	43	72.9	460	1.2	83
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	1	100.0	12	0.1	3	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	14	63.6	144	0.8	34	10	45.5	81	0.9	72	9	40.9	70	1.3	31
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	2	100.0	24	1.0	70	1	50.0	12	1.0	139	1	50.0	12	0.8	14
75-84	4	80.0	37	1.0	41	3	60.0	15	1.0	111	1	20.0	12	4.4	33
85 and older	8	53.3	83	0.6	20	6	40.0	54	0.9	47	7	46.7	46	0.7	34
Male															
All Males	50	71.4	549	0.9	52	40	57.1	398	0.9	80	37	52.9	377	1.1	55
Male, Disabled															
All Ages	49	80.3	537	0.9	51	34	55.7	342	0.8	82	31	50.8	318	1.2	61
64 or younger	48	81.4	525	0.9	52	33	55.9	330	0.8	85	30	50.8	306	1.1	51
65-74	1	100.0	12	1.1	9	1	100.0	12	0.6	8	1	100.0	12	2.8	323
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	1	11.1	12	1.0	75	6	66.7	56	1.0	69	6	66.7	59	0.8	22
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	0	0.0	0	0.0	0	3	75.0	24	1.0	18	4	100.0	35	0.9	33
85 and older	1	20.0	12	1.0	75	3	60.0	32	1.0	107	2	40.0	24	0.5	6
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2005 file for South 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 188 beneficiaries who were in nursing facilities for part of their enrollment and their 1,798 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.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, SOUTH DAKOTA, 2005

Beneficiary Characteristics	ANTIASTHMATIC					ANTIDIABETIC					ANTIHYPERLIPIDEMIC				
	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	53	34.9	509	0.6	\$46	50	32.9	492	1.0	\$42	29	19.1	287	0.8	\$72
Female															
All Females	28	34.1	261	0.5	41	34	41.5	314	0.9	32	18	22.0	182	0.8	70
Female, Disabled															
All Ages	15	25.0	144	0.4	46	23	38.3	238	0.9	37	15	25.0	162	0.8	71
64 or younger	15	25.4	144	0.4	46	23	39.0	238	0.9	37	15	25.4	162	0.8	71
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	13	59.1	117	0.6	36	11	50.0	76	0.9	17	3	13.6	20	1.0	63
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	2	100.0	24	1.0	45	3	150.0	26	1.0	22	1	50.0	7	0.9	72
75-84	3	60.0	6	0.5	17	2	40.0	2	1.0	69	2	40.0	13	1.0	59
85 and older	8	53.3	87	0.5	34	6	40.0	48	0.9	12	0	0.0	0	0.0	0
Male															
All Males	25	35.7	248	0.6	51	16	22.9	178	1.1	60	11	15.7	105	0.8	74
Male, Disabled															
All Ages	17	27.9	171	0.8	69	14	23.0	160	1.1	54	10	16.4	99	0.8	75
64 or younger	17	28.8	171	0.8	69	14	23.7	160	1.1	54	10	16.9	99	0.8	75
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	88.9	77	0.4	12	2	22.2	18	0.9	116	1	11.1	6	0.5	71
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	5	125.0	41	0.5	11	1	25.0	6	0.5	6	1	25.0	6	0.5	71
85 and older	3	60.0	36	0.2	12	1	20.0	12	1.2	171	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 South 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 188 beneficiaries who were in nursing facilities for part of their enrollment and their 1,798 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.medispans.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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

TABLE ND.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, SOUTH DAKOTA, 2005

Beneficiary Characteristics	MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL					MISC. ENDOCRINE					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	6	3.9	69	0.7	\$298	19	12.5	202	0.7	\$98	152	1,433
Female												
All Females	5	6.1	60	0.8	340	17	20.7	179	0.8	106	82	765
Female, Disabled												
All Ages	2	3.3	24	0.7	707	16	26.7	178	0.8	106	60	594
64 or younger	2	3.4	24	0.7	707	16	27.1	178	0.8	106	59	582
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	1	12
Female, Other Eligibles												
All Ages	3	13.6	36	0.8	96	1	4.5	1	1.0	77	22	171
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	2	19
75-84	0	0.0	0	0.0	0	1	20.0	1	1.0	77	5	30
85 and older	3	20.0	36	0.8	96	0	0.0	0	0.0	0	15	122
Male												
All Males	1	1.4	9	0.2	17	2	2.9	23	0.4	36	70	668
Male, Disabled												
All Ages	0	0.0	0	0.0	0	1	1.6	12	0.3	31	61	574
64 or younger	0	0.0	0	0.0	0	1	1.7	12	0.3	31	59	561
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	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	1
Male, Other Eligibles												
All Ages	1	11.1	9	0.2	17	1	11.1	11	0.5	42	9	94
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	9	0.2	17	1	25.0	11	0.5	42	4	38
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	5	56
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 South 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 188 beneficiaries who were in nursing facilities for part of their enrollment and their 1,798 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.11
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
 AMONG NONDUALS, BY BENEFICIARY CHARACTERISTIC^{a,b}
 SOUTH 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 \$	\$ per Part D Excluded Rx	Part D Excluded Rx \$ as a Percentage of All Nondual Rx \$	Total Number of Beneficiaries
All	16,506	15.1	0.4	42,284	\$8	\$859,686	\$20	2.1	109,338
Age									
5 and younger	5,887	18.2	0.3	10,350	6	191,048	18	3.7	32,290
6-14	4,092	11.8	0.2	7,336	5	170,023	23	1.7	34,533
15-20	1,996	11.3	0.2	4,191	6	114,085	27	2.0	17,596
21-44	3,265	16.0	0.6	11,300	11	216,051	19	1.8	20,380
45-64	1,233	27.9	2.0	8,865	37	163,528	18	1.9	4,412
65-74	6	14.0	1.3	54	24	1,032	19	2.9	43
75-84	12	31.6	2.2	83	45	1,699	20	3.6	38
85 and older	15	32.6	2.3	105	48	2,220	21	3.4	46
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Basis of Eligibility^c									
Aged	27	29.7	2.4	221	50	4,528	20	3.9	91
Disabled	2,286	26.6	1.8	15,324	38	323,581	21	1.8	8,594
Adults	2,981	14.1	0.4	7,944	7	146,049	18	2.1	21,158
Children	11,198	14.1	0.2	18,701	5	384,311	21	2.3	79,436
Unknown	14	23.7	1.6	94	21	1,217	13	1.8	59
Gender									
Female	9,733	16.1	0.4	26,846	9	544,879	20	2.4	60,636
Male	6,773	13.9	0.3	15,438	6	314,807	20	1.7	48,702
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Race									
White	11,221	18.5	0.5	30,500	11	638,003	21	2.0	60,613
African American	293	9.9	0.2	579	4	12,567	22	1.9	2,974
Other/unknown	4,992	10.9	0.2	11,205	5	209,116	19	2.3	45,751
Use of Nursing Facilities^d									
Entire year	96	63.2	7.8	1,184	130	19,709	17	2.8	152
Part year	114	60.6	5.5	1,029	103	19,325	19	2.4	188
None	16,296	15.0	0.4	40,071	8	820,652	20	2.0	108,998
Maintenance Assistance Status									
Cash	5,956	16.8	0.6	22,517	13	454,482	20	2.0	35,453
Medically needy	0	0.0	0.0	0	0	0	0	0.0	0
Poverty related	7,119	14.0	0.2	11,918	5	248,083	21	2.5	50,979
Other/unknown	3,431	15.0	0.3	7,849	7	157,121	20	1.8	22,906

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

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}
 SOUTH DAKOTA, 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	0.0	\$1	\$20	\$0	\$0	1,004,619
Age						
5 and younger	0.0	1	18	0	0	296,770
6-14	0.0	0	23	0	0	345,264
15-20	0.0	1	27	0	0	157,153
21-44	0.1	1	19	0	0	162,651
45-64	0.2	4	18	0	1	41,786
65-74	0.2	3	19	0	2	338
75-84	0.2	5	20	0	1	336
85 and older	0.3	7	21	0	0	321
Unknown	0.0	0	0	0	0	0
Basis of Eligibility^c						
Aged	0.3	6	20	0	1	714
Disabled	0.2	4	21	0	2	89,351
Adults	0.0	1	18	0	0	161,341
Children	0.0	1	21	0	0	752,666
Unknown	0.2	2	13	0	1	547
Gender						
Female	0.0	1	20	0	0	548,275
Male	0.0	1	20	0	0	456,344
Unknown	0.0	0	0	0	0	0
Race						
White	0.1	1	21	0	0	547,456
African American	0.0	0	22	0	0	25,344
Other/unknown	0.0	0	19	0	0	431,819
Use of Nursing Facilities^d						
Entire year	0.8	14	17	0	4	1,433
Part year	0.6	11	19	0	4	1,798
None	0.0	1	20	0	0	1,001,388
Maintenance Assistance Status						
Cash	0.1	1	20	0	0	341,215
Medically needy	0.0	0	0	0	0	0
Poverty related	0.0	1	21	0	0	471,127
Other/unknown	0.0	1	20	0	0	192,277

Source: Data for this table are from the MAX 2005 file for South Dakota, released by CMS in 12/2008. 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}
SOUTH DAKOTA, 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	18,672	\$46	\$859,686	100.0	42,284	\$20	100.0	
Anorexia or weight loss/gain	21	267	5,609	0.7	73	77	0.2	
Fertility drugs	0	0	0	0.0	0	0	0.0	
Drugs for cosmetic purposes	79	18	1,423	0.2	117	12	0.3	
Cough and cold medications	10,712	43	460,074	53.5	18,029	26	42.6	
Vitamins and minerals	772	91	70,295	8.2	3,790	19	9.0	
Non-prescription drugs	4,464	17	77,887	9.1	6,577	12	15.6	
Barbiturates	152	74	11,285	1.3	1,503	8	3.6	
Benzodiazepines	2,277	91	207,860	24.2	11,575	18	27.4	
Other Part D Excl Rx Drugs	195	130	25,253	2.9	620	41	1.5	

Source: Data for this table are from the MAX 2005 file for South Dakota, released by CMS in 12/2008. 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, SOUTH 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	109,338	91	8,594	21,158	79,436	59	1,004,619	714	89,351	161,341	752,666	547
Age												
5 and younger	32,290	0	655	0	31,635	0	296,770	0	6,571	0	290,199	0
6-14	34,533	0	1,318	0	33,215	0	345,264	0	14,716	0	330,548	0
15-20	17,596	0	1,086	1,944	14,566	0	157,153	0	11,623	13,756	131,774	0
21-44	20,380	0	2,627	17,714	20	19	162,651	0	27,449	134,894	145	163
45-64	4,412	0	2,874	1,498	0	40	41,786	0	28,728	12,674	0	384
65-74	43	18	23	2	0	0	338	156	165	17	0	0
75-84	38	31	7	0	0	0	336	263	73	0	0	0
85 and older	46	42	4	0	0	0	321	295	26	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	60,636	62	4,191	17,218	39,106	59	548,275	447	44,133	132,710	370,438	547
Male	48,702	29	4,403	3,940	40,330	0	456,344	267	45,218	28,631	382,228	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	60,613	79	4,951	11,414	44,117	52	547,456	585	50,097	82,385	413,926	463
African American	2,974	1	117	613	2,243	0	25,344	12	1,022	4,163	20,147	0
Other/unknown	45,751	11	3,526	9,131	33,076	7	431,819	117	38,232	74,793	318,593	84
Use of Nursing Facilities^c												
Entire year	152	31	121	0	0	0	1,433	265	1,168	0	0	0
Part year	188	10	172	3	3	0	1,798	79	1,656	30	33	0
None	108,998	50	8,301	21,155	79,433	59	1,001,388	370	86,527	161,311	752,633	547
Maintenance Assistance Status												
Cash	35,453	41	7,893	10,417	17,102	0	341,215	330	83,437	85,931	171,517	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0
Poverty related	50,979	1	1	4,360	46,558	59	471,127	12	10	23,487	447,071	547
Other/unknown	22,906	49	700	6,381	15,776	0	192,277	372	5,904	51,923	134,078	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	109,338	91	8,594	21,158	79,436	59	1,004,619	714	89,351	161,341	752,666	547
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 South 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, SOUTH 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	109,338	1,004,619	109,338	1,004,619	0	0
Fee-for-service (FFS) all year	109,338	1,004,619	109,338	1,004,619	0	0
FFS part year, with Rx claims	0	0	0	0	0	0
FFS part year, with no Rx claims	0	0	0	0	0	0
Managed care (MC) all year, with Rx claims	0	0	0	0	0	0
MC all year, with no Rx claims	0	0	0	0	0	0

Source: Data for this table are from the MAX 2005 file for South 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