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**STATISTICAL COMPENDIUM:
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2006
IDAHO**

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TABLE ND.2
CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a, b}
NONDUAL BENEFICIARIES, IDAHO, 2006

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown
All	195,435	457	20,323	32,034	142,621	0	1,850,113	4,652	217,335	233,717	1,394,409	0
Age												
5 and younger	62,280	0	1,675	27	60,578	0	589,409	0	17,104	127	572,178	0
6-14	63,595	0	4,276	16	59,303	0	655,164	0	47,775	97	607,292	0
15-20	28,276	0	2,733	2,823	22,720	0	264,188	0	30,000	19,325	214,863	0
21-44	33,388	1	5,902	27,467	18	0	264,140	12	63,548	200,511	69	0
45-64	7,540	137	5,721	1,680	2	0	73,938	1,503	58,810	13,618	7	0
65-74	231	203	16	12	0	0	2,228	2,102	98	28	0	0
75-84	89	81	0	8	0	0	777	767	0	10	0	0
85 and older	36	35	0	1	0	0	269	268	0	1	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	108,884	294	10,286	27,763	70,541	0	1,004,029	3,024	110,392	201,241	689,372	0
Male	86,551	163	10,037	4,271	72,080	0	846,084	1,628	106,943	32,476	705,037	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	185,133	392	19,330	29,649	135,762	0	1,761,109	3,967	206,617	221,345	1,329,180	0
African American	2,391	5	212	348	1,826	0	22,858	57	2,210	2,609	17,982	0
Other/unknown	7,911	60	781	2,037	5,033	0	66,146	628	8,508	9,763	47,247	0
Use of Nursing Facilities^c												
Entire year	169	20	149	0	0	0	1,634	211	1,423	0	0	0
Part year	249	19	226	3	1	0	2,566	207	2,311	36	12	0
None	195,017	418	19,948	32,031	142,620	0	1,845,913	4,234	213,601	233,681	1,394,397	0
Maintenance Assistance Status												
Cash	41,624	152	18,429	10,498	12,545	0	415,871	1,711	196,743	87,427	129,990	0
Medically needy	1	0	0	0	1	0	2	0	0	0	2	0
Poverty-related	131,435	0	1	12,288	119,146	0	1,225,693	0	3	67,174	1,158,516	0
Other/unknown	22,375	305	1,893	9,248	10,929	0	208,547	2,941	20,589	79,116	105,901	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	195,435	457	20,323	32,034	142,621	0	1,850,113	4,652	217,335	233,717	1,394,409	0
FFS part year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
FFS part year, no Rx claims	0	0	0	0	0	0	0	0	0	0	0	0

Source: Data for this table are from the MAX 2006 file for Idaho, released by CMS in 9/2009. This table was produced on 02/11/2010.

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.

Benef(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; FFS = fee-for-service pharmacy benefit; MAX = Medicaid Analytic Extract; Rx = pharmacy benefit.

TABLE ND.3
ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC^{a, b}
NONDUAL BENEFICIARIES, IDAHO, 2006

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	60.3	7.2	\$493	\$68	\$3,788	13.0	195,435
Age							
5 and younger	60.4	2.8	127	46	2,138	6.0	62,280
6-14	53.5	3.7	278	74	2,527	11.0	63,595
15-20	60.4	5.8	427	73	3,684	11.6	28,276
21-44	67.9	13.8	970	70	6,744	14.4	33,388
45-64	82.3	48.2	3,405	71	14,915	22.8	7,540
65-74	77.5	35.9	2,049	57	13,915	14.7	231
75-84	57.3	19.3	1,019	53	10,184	10.0	89
85 and older	33.3	19.3	731	38	15,760	4.6	36
Unknown	0.0	0.0	0	0	0	0.0	0
Basis of Eligibility^e							
Aged	76.6	41.5	2,443	59	15,418	15.8	457
Disabled	81.3	33.3	2,828	85	18,098	15.6	20,323
Adults	64.0	8.7	445	51	3,727	11.9	32,034
Children	56.4	3.1	165	54	1,726	9.5	142,621
Unknown	0.0	0.0	0	0	0	0.0	0
Gender							
Female	62.1	8.3	516	62	3,741	13.8	108,884
Male	58.0	5.8	464	79	3,848	12.0	86,551
Unknown	0.0	0.0	0	0	0	0.0	0
Race							
White	60.8	7.3	502	69	3,801	13.2	185,133
African American	56.7	5.4	370	69	2,959	12.5	2,391
Other/unknown	49.9	5.7	327	58	3,754	8.7	7,911
Use of Nursing Facilities^f							
Entire year	95.9	99.8	6,548	66	69,008	9.5	169
Part year	96.8	87.7	6,225	71	62,653	9.9	249
None	60.2	7.0	480	68	3,657	13.1	195,017
Maintenance Assistance Status							
Cash	72.1	20.3	1,590	78	9,832	16.2	41,624
Medically needy	0.0	0.0	0	0	78,421	0.0	1
Poverty related	55.7	2.9	145	50	1,849	7.9	131,435
Other/unknown	65.7	8.1	494	61	3,933	12.6	22,375

Source: Data for this table are from the MAX 2006 file for Idaho, released by CMS in 9/2009. This table was produced on 02/11/2010.

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 ten states (DE, IA, IL, NC, NE, NY, TN, 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 ten states (DE, IA, IL, NC, NE, NY, TN, 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.

Benef(s) = beneficiary (or beneficiaries); CMS = Centers for Medicare & Medicaid Services; FFS = fee-for-service; MAX = Medicaid Analytic Extract; OTC = over-the-counter; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE ND.4
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a, b}
 NONDUAL BENEFICIARIES, IDAHO, 2006

Beneficiary Characteristics	Number of Rx, Percentage with:										Number	
	Mean Number of Rx	Mean Rx \$	Rx \$ as a Percentage of All Medicaid FFS \$ ^c	None	More than 0, but 1 or Less	More than 1, but 2 or Less	More than 2, but 5 or Less	More than 5, but 10 or Less	More than 10	Mean \$, All Medicaid FFS \$ ^d	Beneficiaries	Benefit Months
All	0.8	\$52	13.0	39.7	48.9	4.5	4.3	1.9	0.7	\$400	195,435	1,850,113
Age												
5 and younger	0.3	13	6.0	39.6	58.1	1.8	0.6	0.0	0.0	226	62,280	589,409
6-14	0.4	27	11.0	46.5	47.5	3.3	2.4	0.3	0.0	245	63,595	655,164
15-20	0.6	46	11.6	39.6	49.3	5.9	4.3	0.8	0.1	394	28,276	264,188
21-44	1.7	123	14.4	32.1	41.4	9.5	10.7	4.9	1.5	853	33,388	264,140
45-64	4.9	347	22.8	17.7	17.9	10.0	21.9	20.9	11.6	1,521	7,540	73,938
65-74	3.7	213	14.7	22.5	21.6	9.1	24.7	15.2	6.9	1,443	231	2,228
75-84	2.2	117	10.0	42.7	24.7	6.7	14.6	10.1	1.1	1,167	89	777
85 and older	2.6	98	4.6	66.7	8.3	2.8	8.3	8.3	5.6	2,109	36	269
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	4.1	240	15.8	23.4	19.9	8.8	22.1	17.1	8.8	1,515	457	4,652
Disabled	3.1	264	15.6	18.7	31.4	11.3	19.8	12.8	5.9	1,692	20,323	217,335
Adults	1.2	61	11.9	36.0	44.2	8.7	7.9	2.7	0.5	511	32,034	233,717
Children	0.3	17	9.5	43.6	52.5	2.6	1.2	0.1	0.0	177	142,621	1,394,409
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Gender												
Female	0.9	56	13.8	37.9	49.0	5.0	4.7	2.3	1.0	406	108,884	1,004,029
Male	0.6	47	12.0	42.0	48.8	3.9	3.7	1.3	0.4	394	86,551	846,084
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	53	13.2	39.2	49.3	4.6	4.3	1.9	0.8	400	185,133	1,761,109
African American	0.6	39	12.5	43.3	46.9	4.1	4.5	1.2	0.1	310	2,391	22,858
Other/unknown	0.7	39	8.7	50.1	40.9	3.2	3.6	1.9	0.3	449	7,911	66,146
Use of Nursing Facilities^f												
Entire year	10.3	677	9.5	4.1	2.4	1.8	14.8	29.6	47.3	7,137	169	1,634
Part year	8.5	604	9.9	3.2	6.0	7.2	18.9	34.1	30.5	6,080	249	2,566
None	0.7	51	13.1	39.8	49.0	4.5	4.3	1.8	0.7	386	195,017	1,845,913
Maintenance Assistance Status												
Cash	2.0	159	16.2	27.9	40.2	8.6	12.6	7.5	3.2	984	41,624	415,871
Medically needy	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	39,211	1	2
Poverty related	0.3	16	7.9	44.3	51.7	2.7	1.2	0.1	0.0	198	131,435	1,225,693
Other/unknown	0.9	53	12.6	34.3	48.9	7.4	7.0	2.0	0.4	422	22,375	208,547

Source: Data for this table are from the MAX 2006 file for Idaho, released by CMS in 9/2009. This table was produced on 02/11/2010.

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 ten states (DE, IA, IL, NC, NE, NY, TN, 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 ten states (DE, IA, IL, NC, NE, NY, TN, TX, UT, and WV) the Rx share of expenditures for all Medicaid services shown in this column is higher than it would be if all expenditures for these other services, including services provided in capitated managed care plans and long-term-care services, were included.

e. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.

f. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.

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

TABLE ND.5
 AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC^{a, b, c}
 NONDUAL BENEFICIARIES, IDAHO, 2006

Beneficiary Characteristics	All Rx			Patented Brand-Name Drugs			Off-Patent Brand-Name Drugs			Generic Drugs		
	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx
All	0.8	\$52	\$68	0.3	\$40	\$151	0.0	\$3	\$91	0.5	\$10	\$21
Age												
5 and younger	0.3	13	46	0.1	9	132	0.0	1	46	0.2	4	18
6-14	0.4	27	74	0.2	22	133	0.0	1	76	0.2	4	22
15-20	0.6	46	73	0.2	36	157	0.0	2	92	0.4	7	20
21-44	1.7	123	70	0.6	93	167	0.1	7	106	1.1	23	20
45-64	4.9	347	71	1.7	258	152	0.2	19	111	3.0	70	23
65-74	3.7	213	57	1.3	163	123	0.1	8	87	2.3	41	18
75-84	2.2	117	53	0.7	82	119	0.1	8	98	1.4	27	19
85 and older	2.6	98	38	0.9	65	76	0.2	11	64	1.6	22	14
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility^d												
Aged	4.1	240	59	1.4	177	125	0.1	14	92	2.5	49	19
Disabled	3.1	264	85	1.2	212	172	0.1	12	105	1.8	41	23
Adults	1.2	61	51	0.3	41	133	0.0	5	109	0.8	15	18
Children	0.3	17	54	0.1	12	121	0.0	1	62	0.2	4	19
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Gender												
Female	0.9	56	62	0.3	41	143	0.0	3	96	0.6	12	20
Male	0.6	47	79	0.2	38	162	0.0	2	80	0.3	8	23
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Race												
White	0.8	53	69	0.3	40	151	0.0	3	91	0.5	10	21
African American	0.6	39	69	0.2	30	147	0.0	2	85	0.3	7	20
Other/unknown	0.7	39	58	0.2	28	144	0.0	2	82	0.5	9	20
Use of Nursing Facilities^e												
Entire year	10.3	677	66	3.1	495	158	0.3	28	88	6.8	154	23
Part year	8.5	604	71	2.7	438	164	0.3	32	111	5.5	132	24
None	0.7	51	68	0.3	39	151	0.0	3	91	0.5	10	21
Maintenance Assistance Status												
Cash	2.0	159	78	0.8	125	166	0.1	8	104	1.2	27	22
Medically needy	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Poverty related	0.3	16	50	0.1	11	119	0.0	1	66	0.2	4	19
Other/unknown	0.9	53	61	0.3	40	133	0.0	3	89	0.5	10	19

Source: Data for this table are from the MAX 2006 file for Idaho, released by CMS in 9/2009. This table was produced on 02/11/2010.

a. Table ND.5 includes the beneficiaries represented by Cell K of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

b. The Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

c. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In Idaho, 0.4 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

d. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.

e. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.

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

TABLE ND.6
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d}
 NONDUAL BENEFICIARIES, IDAHO, 2006

Therapeutic Category	Number of Rx per Benefit Month												Users ^e				
	Among Users				\$ per Benefit Month Among Users				\$ per Rx				Number of Users	As a Percentage of All Benes	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				Total Number of Rx	Total Rx \$
Anti-infective Agents	0.2	0.0	0.0	0.2	\$9	\$4	\$1	\$4	\$42	\$150	\$58	\$23	190,233	\$7,915,845	79,315	40.6	858,989
Biologicals	0.2	0.2	0.0	0.0	222	221	0	0	941	964	0	34	1,555	1,462,711	640	0.3	6,599
Antineoplastic Agents	0.6	0.2	0.0	0.4	166	149	0	17	282	691	267	45	2,877	811,196	465	0.2	4,884
Endocrine/Metabolic Drugs	0.5	0.2	0.0	0.3	30	21	1	8	58	115	72	24	123,323	7,151,921	22,984	11.8	241,808
Cardiovascular Agents	1.0	0.3	0.0	0.7	42	29	3	10	41	85	91	16	111,044	4,514,348	9,947	5.1	106,756
Respiratory Agents	0.3	0.1	0.0	0.2	19	15	0	3	57	110	59	18	160,064	9,109,707	43,309	22.2	473,351
Gastrointestinal Agents	0.5	0.2	0.0	0.2	37	32	2	3	83	137	304	16	68,674	5,713,107	14,241	7.3	152,589
Genitourinary Agents	0.2	0.1	0.0	0.1	12	7	2	3	49	85	86	23	16,642	818,305	6,508	3.3	67,318
CNS Drugs	1.0	0.5	0.1	0.4	112	93	10	9	107	185	104	21	273,520	29,400,943	24,705	12.6	262,617
Stimulants/Anti-obesity/Anorexia	0.7	0.6	0.0	0.1	67	64	0	3	95	106	236	28	59,146	5,609,506	7,505	3.8	83,973
Miscellaneous Psychological/ Neurological Agents	0.5	0.4	0.0	0.0	216	215	0	1	473	486	0	49	2,735	1,293,656	542	0.3	5,989
Analgesics and Anesthetics	0.5	0.0	0.0	0.4	17	9	1	8	37	210	126	19	176,452	6,595,781	36,832	18.8	383,009
Neuromuscular Agents	0.8	0.3	0.0	0.4	70	56	1	13	93	169	104	31	100,442	9,354,948	12,283	6.3	133,751
Nutritional Products	0.2	0.0	0.0	0.2	3	0	0	3	12	11	14	12	28,617	356,720	12,492	6.4	127,331
Hematological Agents	0.7	0.2	0.0	0.5	162	153	1	9	248	984	64	18	11,166	2,763,892	1,606	0.8	17,026
Topical Products	0.2	0.0	0.0	0.1	6	4	0	2	35	81	47	17	82,071	2,866,805	41,697	21.3	457,667
Miscellaneous Products	0.6	0.3	0.0	0.3	163	132	5	26	281	457	280	95	1,907	535,984	309	0.2	3,297
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	8	0	0	0	46	0	0	0	1,080	49,738	544	0.3	5,993
TOTAL NO. OF RX AND RX \$	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	1,411,548	96,325,113	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2006 file for Idaho, released by CMS in 9/2009. This table was produced on 02/11/2010.

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.medi-span.com/master-drug-database.aspx>.

d. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In Idaho, 0.4 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.

For information about this classification method, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

e. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 2006.

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, IDAHO, 2006

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	\$18,841,156	11,845	6.1	132,335	0.6	\$227	\$142	
ANTICONVULSANT	8,621,708	9,121	4.7	101,318	0.7	123	85	
ANTIDEPRESSANTS	8,606,965	25,504	13.0	274,340	0.5	62	31	
ANTIASTHMATIC	6,224,343	28,668	14.7	316,335	0.3	72	20	
STIMULANTS/ANTI-OBESITY/ANOREXIANTS	5,609,506	8,740	4.5	98,342	0.6	95	57	
ULCER DRUGS	4,396,890	12,784	6.5	138,090	0.4	83	32	
ANTIDIABETIC	3,319,760	6,298	3.2	67,836	0.7	75	49	
ANALGESICS - Narcotic	3,300,849	42,333	21.7	444,548	0.3	27	7	
ANTIHYPERTENSIVE	2,020,352	3,332	1.7	36,780	0.6	90	55	
MISC. ENDOCRINE	1,931,923	1,356	0.7	15,482	0.5	262	125	
Total	62,873,452	149,981	n.a.	1,625,406	n.a.	n.a.	n.a.	

Source: Data for this table are from the MAX 2006 file for Idaho, released by CMS in 9/2009. This table was produced on 02/11/2010.

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 2006. 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 2006. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

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; n.a. = not applicable.

Nondual Medicaid Beneficiaries

TABLE ND.7A
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS COMBINED
 AND FIRST AND SECOND GROUPS SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, IDAHO, 2006

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	688,995	\$62,873,452	11,845	6.1	132,335	0.6	\$142	9,121	4.7	101,318	0.7	\$85
Female												
All Females	422,442	35,293,928	6,149	5.6	68,160	0.6	133	5,724	5.3	63,251	0.7	79
Female, Disabled												
All Ages	230,462	22,542,878	3,553	34.5	40,424	0.7	167	3,418	33.2	38,956	0.8	98
5 and younger	2,158	248,657	12	1.7	106	0.5	69	76	11.0	865	0.7	106
6-14	11,847	1,428,297	309	20.9	3,613	0.6	118	262	17.7	3,056	0.7	115
15-20	11,636	1,265,185	358	32.4	4,096	0.6	115	272	24.6	3,190	0.8	115
21-44	83,245	8,805,148	1,667	49.4	18,908	0.7	174	1,465	43.4	16,734	0.8	109
45-64	121,505	10,786,430	1,205	33.3	13,691	0.8	184	1,342	37.0	15,106	0.8	78
65-74	71	9,161	2	25.0	10	0.8	357	1	12.5	5	1.0	146
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	191,980	12,751,050	2,596	2.6	27,736	0.4	83	2,306	2.3	24,295	0.5	49
5 and younger	9,968	583,982	14	0.0	168	0.3	31	66	0.2	743	0.3	47
6-14	32,889	2,684,312	615	2.1	6,964	0.5	93	287	1.0	3,291	0.5	56
15-20	29,404	1,983,617	621	4.3	6,730	0.4	79	352	2.4	3,820	0.4	50
21-44	101,081	6,156,542	1,212	5.1	12,496	0.4	77	1,419	5.9	14,602	0.5	47
45-64	15,257	1,081,750	110	8.9	1,090	0.5	112	160	13.0	1,580	0.6	49
65-74	2,780	218,305	23	16.1	276	0.8	145	18	12.6	211	0.9	67
75-84	457	37,466	0	0.0	0	0.0	0	3	6.0	36	0.8	71
85 and older	144	5,076	1	4.8	12	1.0	10	1	4.8	12	1.0	9
Male												
All Males	266,553	27,579,524	5,696	6.6	64,175	0.7	153	3,397	3.9	38,067	0.7	95
Male, Disabled												
All Ages	149,815	17,636,625	3,525	35.1	40,310	0.8	182	2,427	24.2	27,690	0.8	110
5 and younger	3,216	314,987	38	3.9	441	0.5	77	126	12.8	1,449	0.6	70
6-14	31,300	3,759,011	973	34.8	11,276	0.7	148	488	17.4	5,685	0.8	103
15-20	21,829	3,050,067	741	45.5	8,578	0.7	157	430	26.4	4,974	0.9	121
21-44	46,055	6,036,360	1,248	49.4	14,217	0.8	211	891	35.3	10,188	0.9	134
45-64	47,141	4,452,787	522	24.9	5,766	0.8	218	490	23.4	5,383	0.8	69
65-74	274	23,413	3	37.5	32	1.4	154	2	25.0	11	0.4	36
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 Medicaid Beneficiaries

TABLE ND.7A
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS COMBINED
 AND FIRST AND SECOND GROUPS SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, IDAHO, 2006

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	116,738	9,942,899	2,171	2.8	23,865	0.5	104	970	1.3	10,377	0.5	57	
5 and younger	15,828	955,002	55	0.2	630	0.4	54	74	0.2	824	0.3	35	
6-14	58,248	5,500,600	1,186	3.9	13,414	0.6	110	404	1.3	4,467	0.5	59	
15-20	22,683	2,071,831	676	6.1	7,300	0.5	97	233	2.1	2,478	0.6	72	
21-44	14,068	936,740	204	5.7	2,004	0.5	94	198	5.6	1,973	0.5	43	
45-64	4,807	383,355	34	5.8	350	0.7	152	49	8.3	499	0.7	65	
65-74	808	69,422	13	18.1	139	0.8	148	10	13.9	120	0.6	25	
75-84	210	18,555	2	5.1	24	1.0	171	1	2.6	12	0.2	7	
85 and older	86	7,394	1	6.7	4	0.8	127	1	6.7	4	1.0	21	
Unknown	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	

Source: Data for this table are from the MAX 2006 file for Idaho, released by CMS in 9/2009. This table was produced on 02/11/2010.

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 2006. 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 2006. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

Benef(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 Medicaid Beneficiaries

TABLE ND.7B
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY,
 BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, IDAHO, 2006

Beneficiary Characteristics	ANTIDEPRESSANTS					ANTIASTHMATIC					STIMULANTS/ANTI-OBESITY/ANOREXIANTS				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	25,504	13.0	274,340	0.5	\$31	28,668	14.7	316,335	0.3	\$20	8,740	4.5	98,342	0.6	\$57
Female															
All Females	18,215	16.7	193,975	0.5	33	15,504	14.2	169,629	0.3	20	2,759	2.5	31,071	0.6	56
Female, Disabled															
All Ages	6,983	67.9	79,008	0.6	42	4,375	42.5	49,969	0.4	34	795	7.7	9,142	0.6	66
5 and younger	4	0.6	48	0.2	2	208	30.0	2,403	0.3	28	13	1.9	146	0.5	37
6-14	338	22.9	3,945	0.6	22	335	22.7	3,922	0.3	23	350	23.7	4,053	0.7	64
15-20	484	43.8	5,541	0.5	28	206	18.6	2,417	0.3	17	143	12.9	1,628	0.6	56
21-44	2,856	84.6	32,514	0.6	42	1,468	43.5	16,775	0.4	28	188	5.6	2,156	0.6	73
45-64	3,299	91.1	36,950	0.7	46	2,153	59.4	24,433	0.5	42	101	2.8	1,159	0.6	75
65-74	2	25.0	10	0.9	15	5	62.5	19	0.4	60	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	11,232	11.4	114,967	0.4	27	11,129	11.3	119,660	0.2	15	1,964	2.0	21,929	0.5	51
5 and younger	32	0.1	371	0.2	4	3,110	10.5	34,397	0.2	10	57	0.2	658	0.4	33
6-14	1,264	4.3	14,383	0.4	16	3,102	10.6	34,895	0.2	15	1,241	4.3	14,055	0.6	51
15-20	2,297	15.9	24,618	0.3	20	1,690	11.7	18,204	0.2	13	327	2.3	3,639	0.5	54
21-44	6,853	28.6	67,742	0.4	31	2,805	11.7	27,907	0.3	17	311	1.3	3,292	0.5	52
45-64	721	58.6	7,131	0.6	39	365	29.7	3,634	0.4	34	28	2.3	285	0.7	85
65-74	51	35.7	574	0.6	33	48	33.6	552	0.5	56	0	0.0	0	0.0	0
75-84	9	18.0	88	0.5	25	9	18.0	71	0.7	62	0	0.0	0	0.0	0
85 and older	5	23.8	60	0.8	22	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male															
All Males	7,289	8.4	80,365	0.5	28	13,164	15.2	146,706	0.3	19	5,981	6.9	67,271	0.6	58
Male, Disabled															
All Ages	3,787	37.7	42,795	0.6	33	2,496	24.9	28,270	0.4	33	1,777	17.7	20,685	0.7	66
5 and younger	23	2.3	275	0.3	10	289	29.5	3,361	0.3	20	53	5.4	624	0.5	44
6-14	807	28.9	9,385	0.5	20	584	20.9	6,797	0.3	22	1,082	38.7	12,585	0.8	67
15-20	655	40.3	7,574	0.6	28	266	16.3	3,102	0.3	23	449	27.6	5,270	0.7	66
21-44	1,219	48.3	13,735	0.6	39	503	19.9	5,749	0.4	29	151	6.0	1,742	0.6	65
45-64	1,079	51.4	11,795	0.7	40	847	40.4	9,212	0.5	50	41	2.0	461	0.7	83
65-74	4	50.0	31	0.8	27	7	87.5	49	1.0	85	1	12.5	3	0.7	158
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 Medicaid Beneficiaries

TABLE ND.7B
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY,
 BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, IDAHO, 2006

Beneficiary Characteristics	ANTIDEPRESSANTS						ANTIASTHMATIC					STIMULANTS/ANTI-OBESITY/ANOREXIANTS				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	
Male, Other Eligibles																
All Ages	3,502	4.6	37,570	0.4	21	10,668	13.9	118,436	0.2	16	4,204	5.5	46,586	0.6	54	
5 and younger	48	0.2	547	0.3	5	4,783	15.4	52,998	0.2	12	162	0.5	1,863	0.4	33	
6-14	1,541	5.1	17,472	0.4	18	4,317	14.3	48,652	0.3	19	3,219	10.7	35,956	0.6	54	
15-20	1,073	9.7	11,312	0.4	22	1,157	10.4	12,690	0.2	15	745	6.7	8,036	0.5	57	
21-44	674	18.9	6,550	0.4	28	285	8.0	2,776	0.3	22	73	2.0	684	0.5	52	
45-64	144	24.5	1,438	0.5	35	98	16.7	1,011	0.4	40	5	0.9	47	0.4	57	
65-74	16	22.2	181	0.5	38	18	25.0	191	0.4	54	0	0.0	0	0.0	0	
75-84	5	12.8	58	0.3	12	5	12.8	58	0.2	22	0	0.0	0	0.0	0	
85 and older	1	6.7	12	0.9	114	5	33.3	60	0.8	70	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 2006 file for Idaho, released by CMS in 9/2009. This table was produced on 02/11/2010.

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 2006. 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 2006. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

Benef(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 Medicaid Beneficiaries

TABLE ND.7C
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY,
 BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, IDAHO, 2006

Beneficiary Characteristics	ULCER DRUGS					ANTIDIABETIC					ANALGESICS - Narcotic				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	12,784	6.5	138,090	0.4	\$32	6,298	3.2	67,836	0.7	\$49	42,333	21.7	444,548	0.3	\$7
Female															
All Females	8,526	7.8	92,292	0.4	33	4,584	4.2	49,580	0.6	46	30,122	27.7	311,576	0.3	7
Female, Disabled															
All Ages	3,465	33.7	39,613	0.6	48	2,538	24.7	28,872	0.7	52	7,212	70.1	81,532	0.5	17
5 and younger	139	20.0	1,527	0.4	25	0	0.0	0	0.0	0	85	12.2	973	0.1	1
6-14	101	6.8	1,205	0.4	32	25	1.7	300	0.6	25	189	12.8	2,194	0.1	1
15-20	135	12.2	1,585	0.3	25	68	6.1	804	0.7	50	372	33.6	4,270	0.2	1
21-44	1,202	35.6	13,897	0.5	45	762	22.6	8,753	0.7	46	3,005	89.0	34,143	0.4	11
45-64	1,887	52.1	21,394	0.6	55	1,679	46.3	18,995	0.7	55	3,557	98.2	39,934	0.6	25
65-74	1	12.5	5	0.8	115	4	50.0	20	1.0	86	4	50.0	18	0.4	4
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	5,061	5.1	52,679	0.3	21	2,046	2.1	20,708	0.5	37	22,910	23.2	230,044	0.2	4
5 and younger	883	3.0	8,618	0.2	12	19	0.1	218	0.6	52	1,349	4.6	15,338	0.1	1
6-14	763	2.6	8,672	0.2	14	194	0.7	2,147	0.6	53	2,471	8.5	28,159	0.1	1
15-20	863	6.0	9,365	0.2	12	280	1.9	3,013	0.4	35	4,772	33.0	49,797	0.2	1
21-44	2,213	9.2	22,388	0.3	26	1,229	5.1	11,977	0.5	32	13,439	56.2	127,526	0.3	5
45-64	273	22.2	2,875	0.5	48	252	20.5	2,576	0.7	47	777	63.1	8,090	0.4	11
65-74	48	33.6	554	0.5	53	61	42.7	653	0.8	49	83	58.0	934	0.3	6
75-84	16	32.0	183	0.5	61	10	20.0	112	0.6	14	17	34.0	176	0.4	9
85 and older	2	9.5	24	0.8	15	1	4.8	12	0.8	12	2	9.5	24	0.3	2
Male															
All Males	4,258	4.9	45,798	0.4	30	1,714	2.0	18,256	0.7	58	12,211	14.1	132,972	0.2	8
Male, Disabled															
All Ages	1,796	17.9	20,310	0.5	45	1,065	10.6	11,750	0.7	57	3,662	36.5	40,508	0.4	19
5 and younger	155	15.8	1,724	0.4	28	7	0.7	84	0.6	33	150	15.3	1,719	0.1	1
6-14	173	6.2	2,023	0.5	33	25	0.9	286	0.7	40	321	11.5	3,761	0.1	2
15-20	186	11.4	2,126	0.5	38	47	2.9	564	0.7	57	428	26.3	4,957	0.2	2
21-44	571	22.6	6,601	0.5	44	267	10.6	3,008	0.7	54	1,230	48.7	13,514	0.4	14
45-64	706	33.7	7,791	0.6	55	715	34.1	7,769	0.7	58	1,524	72.6	16,484	0.6	34
65-74	5	62.5	45	0.6	63	4	50.0	39	1.1	91	9	112.5	73	0.6	11
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 Medicaid Beneficiaries

TABLE ND.7C
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY,
 BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, IDAHO, 2006

Beneficiary Characteristics	ULCER DRUGS						ANTIDIABETIC					ANALGESICS - Narcotic				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	
Male, Other Eligibles																
All Ages	2,462	3.2	25,488	0.2	19	649	0.8	6,506	0.7	59	8,549	11.2	92,464	0.2	3	
5 and younger	1,105	3.6	10,783	0.2	13	17	0.1	185	0.7	44	1,789	5.8	20,314	0.1	1	
6-14	555	1.8	6,375	0.2	16	171	0.6	1,880	0.7	68	2,330	7.7	26,565	0.1	1	
15-20	371	3.3	4,106	0.2	17	105	0.9	1,095	0.7	64	2,482	22.4	27,097	0.1	1	
21-44	312	8.8	3,034	0.3	33	199	5.6	1,875	0.6	60	1,624	45.6	15,351	0.4	9	
45-64	97	16.5	948	0.5	50	124	21.1	1,145	0.6	50	286	48.6	2,750	0.5	14	
65-74	18	25.0	194	0.5	28	24	33.3	239	0.6	36	27	37.5	278	0.5	19	
75-84	4	10.3	48	0.5	76	8	20.5	83	0.6	27	8	20.5	92	0.2	12	
85 and older	0	0.0	0	0.0	0	1	6.7	4	0.5	30	3	20.0	17	0.2	9	
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	

Source: Data for this table are from the MAX 2006 file for Idaho, released by CMS in 9/2009. This table was produced on 02/11/2010.

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 2006. 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 2006. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

Benef(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 Medicaid Beneficiaries

TABLE ND.7D
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR NINTH AND TENTH TOP DRUG GROUPS
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, IDAHO, 2006

Beneficiary Characteristics	ANTIHYPERTENSIVE					MISC. ENDOCRINE						
	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	3,332	1.7	36,780	0.6	\$55	1,356	0.7	15,482	0.5	\$125	195,435	1,850,113
Female												
All Females	2,213	2.0	24,638	0.6	55	698	0.6	7,976	0.5	99	108,884	1,004,029
Female, Disabled												
All Ages	1,611	15.7	18,355	0.6	59	455	4.4	5,231	0.6	102	10,286	110,392
5 and younger	2	0.3	23	0.1	4	15	2.2	173	0.5	222	694	7,122
6-14	3	0.2	36	0.4	20	42	2.8	482	0.4	335	1,479	16,546
15-20	9	0.8	108	0.8	50	32	2.9	345	0.5	141	1,106	12,029
21-44	361	10.7	4,170	0.6	50	64	1.9	761	0.6	96	3,376	36,594
45-64	1,234	34.1	14,008	0.7	62	302	8.3	3,470	0.6	61	3,623	38,072
65-74	2	25.0	10	1.0	122	0	0.0	0	0.0	0	8	29
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	602	0.6	6,283	0.5	42	243	0.2	2,745	0.4	93	98,598	893,637
5 and younger	10	0.0	116	0.1	3	19	0.1	213	0.5	236	29,598	279,724
6-14	1	0.0	12	0.5	11	128	0.4	1,482	0.3	72	29,172	298,806
15-20	18	0.1	189	0.3	19	16	0.1	165	0.4	302	14,458	129,190
21-44	321	1.3	3,251	0.4	37	28	0.1	285	0.3	38	23,925	173,410
45-64	181	14.7	1,916	0.6	49	31	2.5	350	0.6	55	1,231	10,501
65-74	60	42.0	679	0.7	57	13	9.1	154	0.7	60	143	1,424
75-84	10	20.0	108	0.8	63	5	10.0	60	0.6	119	50	407
85 and older	1	4.8	12	0.8	64	3	14.3	36	0.8	61	21	175
Male												
All Males	1,119	1.3	12,142	0.6	55	658	0.8	7,506	0.5	152	86,551	846,084
Male, Disabled												
All Ages	872	8.7	9,619	0.7	58	260	2.6	2,992	0.6	227	10,037	106,943
5 and younger	0	0.0	0	0.0	0	11	1.1	124	0.5	252	981	9,982
6-14	2	0.1	15	0.6	32	107	3.8	1,241	0.5	189	2,797	31,229
15-20	14	0.9	168	0.5	29	57	3.5	683	0.7	493	1,627	17,971
21-44	240	9.5	2,752	0.6	53	42	1.7	488	0.7	110	2,526	26,954
45-64	610	29.1	6,633	0.7	61	42	2.0	453	0.6	54	2,098	20,738
65-74	6	75.0	51	0.8	101	1	12.5	3	0.7	87	8	69
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 Medicaid Beneficiaries

TABLE ND.7D
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR NINTH AND TENTH TOP DRUG GROUPS
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, IDAHO, 2006

Beneficiary Characteristics	ANTIHYPERTENSIVE						MISC. ENDOCRINE						
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Month	Mean Rx \$ per Benefit		Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Month	Mean Rx \$ per Benefit	Number of Beneficiaries	Number of Benefit Months
Male, Other Eligibles													
All Ages	247	0.3	2,523	0.5	44	398	0.5	4,514	0.4	102	76,514	739,141	
5 and younger	10	0.0	115	0.2	7	17	0.1	197	0.4	134	31,007	292,581	
6-14	7	0.0	84	0.2	13	332	1.1	3,781	0.3	85	30,147	308,583	
15-20	8	0.1	94	0.4	32	41	0.4	453	0.4	227	11,085	104,998	
21-44	103	2.9	1,033	0.4	37	4	0.1	35	0.5	53	3,561	27,182	
45-64	98	16.7	971	0.6	54	4	0.7	48	0.7	164	588	4,627	
65-74	15	20.8	159	0.6	61	0	0.0	0	0.0	0	72	706	
75-84	5	12.8	55	1.0	99	0	0.0	0	0.0	0	39	370	
85 and older	1	6.7	12	1.0	81	0	0.0	0	0.0	0	15	94	
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 2006 file for Idaho, released by CMS in 9/2009. This table was produced on 02/11/2010.

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 2006. 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 2006. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

Benef(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 Medicaid Beneficiaries

TABLE ND.8
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BENEFICIARY CHARACTERISTIC^{a, b}
 NONDUAL BENEFICIARIES, IDAHO, 2006

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	\$677	10.3	169	1,634
Age				
0-64	721	10.9	153	1,465
65-74	532	8.5	6	63
75-84	275	4.9	3	36
85 and older	99	2.6	7	70
Unknown	0	0.0	0	0
Gender				
Female	726	10.1	106	1,070
Male	586	10.7	63	564
Unknown	0	0.0	0	0
Race				
White	698	10.4	159	1,526
African American	329	6.5	1	12
Other/unknown	391	9.7	9	96
Basis of Eligibility^c				
Aged	409	7.1	20	211
Disabled	717	10.8	149	1,423
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 2006 file for Idaho, released by CMS in 9/2009. This table was produced on 02/11/2010.

a. Table ND.8 includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their 2006 Medicaid enrollment. A total of 249 beneficiaries who were in nursing facilities for part of their enrollment and their 2,566 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.

Benef(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 Medicaid Beneficiaries

TABLE ND.9
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d, e}
 NONDUAL BENEFICIARIES, IDAHO, 2006

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per Rx				Users				
	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total Number of Rx	Total Rx \$	Number of Users	As a Percentage of All-Year Nursing Facility Residents	Number of Benefit Months
Anti-infective Agents	0.8	0.2	0.0	0.5	\$49	\$36	\$0	\$12	\$64	\$170	\$107	\$23	929	\$59,635	118	69.8	1,227
Biologicals	0.1	0.0	0.0	0.1	3	0	0	3	34	0	0	34	12	405	12	7.1	120
Antineoplastic Agents	0.9	0.3	0.0	0.6	392	316	0	76	458	1,093	0	134	71	32,532	11	6.5	83
Endocrine/Metabolic Drugs	1.6	0.7	0.1	0.9	73	56	4	13	45	83	54	15	1,622	72,703	98	58.0	1,001
Cardiovascular Agents	2.0	0.6	0.0	1.4	54	34	3	17	27	60	66	12	2,211	60,268	113	66.9	1,118
Respiratory Agents	0.9	0.4	0.0	0.5	48	38	1	9	55	100	75	20	673	37,328	75	44.4	778
Gastrointestinal Agents	1.2	0.4	0.0	0.8	62	47	1	13	52	111	253	17	1,275	65,677	105	62.1	1,062
Genitourinary Agents	0.8	0.4	0.1	0.3	52	34	9	9	66	84	97	31	483	32,084	55	32.5	616
CNS Drugs	2.3	1.0	0.1	1.2	223	183	16	25	96	186	107	21	3,273	315,552	141	83.4	1,412
Stimulants/Anti-obesity/Anorexia	0.5	0.4	0.0	0.0	67	67	0	0	145	153	0	4	18	2,613	4	2.4	39
Miscellaneous Psychological/Neurological Agents	1.0	1.0	0.0	0.0	887	887	0	0	870	870	0	0	156	135,680	13	7.7	153
Analgesics and Anesthetics	2.2	0.2	0.0	1.9	81	26	3	52	37	109	97	27	2,415	89,865	115	68.0	1,116
Neuromuscular Agents	1.7	0.4	0.0	1.3	118	64	2	52	68	151	47	41	1,871	126,483	106	62.7	1,076
Nutritional Products	0.8	0.0	0.0	0.8	14	0	0	13	17	25	0	16	481	7,977	59	34.9	584
Hematological Agents	1.4	0.2	0.0	1.1	80	68	0	12	59	315	69	10	695	40,691	52	30.8	509
Topical Products	0.6	0.1	0.0	0.4	20	11	2	7	37	86	74	18	621	22,711	105	62.1	1,111
Miscellaneous Products	0.2	0.2	0.0	0.1	44	43	0	1	177	260	24	9	18	3,191	8	4.7	73
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	8	0	0	0	27	0	0	0	46	1,244	14	8.3	156
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.	16,870	1,106,639	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2006 file for Idaho, released by CMS in 9/2009. This table was produced on 02/11/2010.

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 2006. A total of 249 beneficiaries who were in nursing facilities for part of their enrollment and their 2,566 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 2006. 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.medi-span.com/master-drug-database.aspx>.

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.medi-span.com/master-drug-database.aspx>.

In Idaho, 0.4 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.

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

Nondual Medicaid Beneficiaries

TABLE ND.10
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS,
 BY TOP-10 DRUG GROUP^{a, b, c, d}
 NONDUAL BENEFICIARIES, IDAHO, 2006

Top 10 Drug Groups in Nursing Facilities	Users				Among Users			
	Total Medicaid Rx \$	Number of Users	As a Percentage of All-Year Nursing Facility Residents	Number of Benefit Months	Number of Rx per Benefit Month	\$ per Rx	Rx \$ per Benefit Month	
ANTIPSYCHOTICS	\$212,555	99	58.6	997	1.0	\$211	\$213	
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	135,680	17	10.1	198	0.8	870	685	
ANTICONVULSANT	101,220	105	62.1	1,081	1.1	84	94	
ANTIDEPRESSANTS	85,685	171	101.2	1,811	0.9	53	47	
ANALGESICS - Narcotic	67,833	135	79.9	1,304	1.5	34	52	
ULCER DRUGS	50,665	86	50.9	876	0.8	69	58	
ANTIDIABETIC	48,245	95	56.2	956	1.0	52	50	
ANTINEOPLASTICS	32,532	12	7.1	95	0.7	458	342	
MISC. ANTI-INFECTIVES	30,354	72	42.6	791	0.3	135	38	
ANTIASTHMATIC	28,002	67	39.6	696	0.6	73	40	
Total	792,771	859	n.a.	8,805	n.a.	n.a.	n.a.	

Source: Data for this table are from the MAX 2006 file for Idaho, released by CMS in 9/2009. This table was produced on 02/11/2010.

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 2006. A total of 249 beneficiaries who were in nursing facilities for part of their enrollment and their 2,566 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 2006. 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 2006 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

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; n.a. = not applicable.

Nondual Medicaid Beneficiaries

TABLE ND.10A
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR TOP 10 DRUG GROUPS COMBINED AND FIRST
 AND SECOND TOP DRUG GROUPS SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c, d}
 NONDUAL BENEFICIARIES, IDAHO, 2006

Beneficiary Characteristics	All Top 10 Drug Groups							ANTIPSYCHOTICS					MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL				
	Number of Rx	Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
All	8,330	\$792,771	99	58.6	997	1.0	\$213	17	10.1	198	0.8	\$685					
Female																	
All Females	5,293	563,015	66	62.3	719	1.0	208	15	14.2	174	0.8	771					
Female, Disabled																	
All Ages	5,013	551,116	61	65.6	659	1.0	218	14	15.1	162	0.9	823					
64 or younger	5,013	551,116	61	65.6	659	1.0	218	14	15.1	162	0.9	823					
65-74	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
Female, Other Eligibles																	
All Ages	280	11,899	5	38.5	60	0.9	97	1	7.7	12	0.5	74					
64 or younger	16	947	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
65-74	181	8,298	5	125.0	60	0.9	97	0	0.0	0	0.0	0					
75-84	45	1,275	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
85 and older	38	1,379	0	0.0	0	0.0	0	1	20.0	12	0.5	74					
Male																	
All Males	3,037	229,756	33	52.4	278	1.1	226	2	3.2	24	0.4	63					
Male, Disabled																	
All Ages	2,676	184,537	27	48.2	218	1.1	207	2	3.6	24	0.4	63					
64 or younger	2,676	184,537	27	48.2	218	1.1	207	2	3.6	24	0.4	63					
65-74	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
Male, Other Eligibles																	
All Ages	361	45,219	6	85.7	60	1.1	297	0	0.0	0	0.0	0					
64 or younger	276	26,307	4	133.3	44	1.2	293	0	0.0	0	0.0	0					
65-74	73	18,057	1	50.0	12	1.0	369	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	12	855	1	50.0	4	0.8	127	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 2006 file for Idaho, released by CMS in 9/2009. This table was produced on 02/11/2010.
 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 2006. A total of 249 beneficiaries who were in nursing facilities for part of their enrollment and their 2,566 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 2006. 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 2006 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.
 Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE ND.10B
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY
 AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c, d}
 NONDUAL BENEFICIARIES, IDAHO, 2006

Beneficiary Characteristics	ANTICONVULSANT					ANTIDEPRESSANTS					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	105	62.1	1,081	1.1	\$94	171	101.2	1,811	0.9	\$47	135	79.9	1,304	1.5	\$52
Female															
All Females	71	67.0	742	1.1	81	111	104.7	1,170	0.9	48	90	84.9	879	1.3	48
Female, Disabled															
All Ages	70	75.3	730	1.1	82	104	111.8	1,099	0.9	49	80	86.0	761	1.4	52
64 or younger	70	75.3	730	1.1	82	104	111.8	1,099	0.9	49	80	86.0	761	1.4	52
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	1	7.7	12	0.3	5	7	53.8	71	0.7	29	10	76.9	118	0.9	17
64 or younger	0	0.0	0	0.0	0	2	200.0	20	0.6	45	1	100.0	10	0.5	4
65-74	0	0.0	0	0.0	0	2	50.0	15	1.0	48	4	100.0	48	1.4	17
75-84	1	33.3	12	0.3	5	0	0.0	0	0.0	0	4	133.3	48	0.6	23
85 and older	0	0.0	0	0.0	0	3	60.0	36	0.7	13	1	20.0	12	0.5	3
Male															
All Males	34	54.0	339	1.2	122	60	95.2	641	0.9	46	45	71.4	425	2.0	61
Male, Disabled															
All Ages	29	51.8	291	1.3	131	56	100.0	597	0.9	43	40	71.4	381	2.0	65
64 or younger	29	51.8	291	1.3	131	56	100.0	597	0.9	43	40	71.4	381	2.0	65
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	5	71.4	48	1.1	66	4	57.1	44	1.0	91	5	71.4	44	1.8	27
64 or younger	3	100.0	32	1.1	90	2	66.7	20	1.0	88	4	133.3	40	2.0	26
65-74	1	50.0	12	1.0	17	2	100.0	24	1.0	93	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	1	50.0	4	1.0	21	0	0.0	0	0.0	0	1	50.0	4	0.5	35
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2006 file for Idaho, released by CMS in 9/2009. This table was produced on 02/11/2010.

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 2006. A total of 249 beneficiaries who were in nursing facilities for part of their enrollment and their 2,566 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 2006. 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 2006 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

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

TABLE ND.10C
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY
 AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c, d}
 NONDUAL BENEFICIARIES, IDAHO, 2006

Beneficiary Characteristics	ULCER DRUGS						ANTIDIABETIC					ANTINEOPLASTICS				
	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		Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents		Mean Number of Rx	Mean Rx \$
		Residents	Benefit Months					Residents	Benefit Months				Residents	Benefit Months		
All	86	50.9	876	0.8	\$58	95	56.2	956	1.0	\$51	12	7.1	95	0.7	\$342	
Female																
All Females	50	47.2	521	0.9	52	66	62.3	674	0.9	48	6	5.7	56	0.6	361	
Female, Disabled																
All Ages	48	51.6	497	0.9	54	63	67.7	647	0.9	49	6	6.5	56	0.6	361	
64 or younger	48	51.6	497	0.9	54	63	67.7	647	0.9	49	6	6.5	56	0.6	361	
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
Female, Other Eligibles																
All Ages	2	15.4	24	1.1	9	3	23.1	27	0.9	20	0	0.0	0	0.0	0	
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
65-74	1	25.0	12	1.1	8	3	75.0	27	0.9	20	0	0.0	0	0.0	0	
75-84	1	33.3	12	1.1	10	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																
All Males	36	57.1	355	0.8	66	29	46.0	282	1.1	58	6	9.5	39	0.9	316	
Male, Disabled																
All Ages	32	57.1	315	0.8	64	24	42.9	242	1.0	58	4	7.1	15	0.7	74	
64 or younger	32	57.1	315	0.8	64	24	42.9	242	1.0	58	4	7.1	15	0.7	74	
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
Male, Other Eligibles																
All Ages	4	57.1	40	0.8	83	5	71.4	40	1.2	58	2	28.6	24	1.1	467	
64 or younger	4	133.3	40	0.8	83	4	133.3	36	1.2	61	0	0.0	0	0.0	0	
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	100.0	24	1.1	467	
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	50.0	4	0.5	30	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 2006 file for Idaho, released by CMS in 9/2009. This table was produced on 02/11/2010.
 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 2006. A total of 249 beneficiaries who were in nursing facilities for part of their enrollment and their 2,566 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 2006. 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 2006 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.
 Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE ND.10D
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR NINTH AND TENTH TOP DRUG GROUPS
 SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c, d}
 NONDUAL BENEFICIARIES, IDAHO, 2006

Beneficiary Characteristics	MISC. ANTI-INFECTIVES						ANTIASTHMATIC					
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	All-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents
All	72	42.6	791	0.3	\$38	67	39.6	696	0.6	\$40	169	1,634
Female												
All Females	48	45.3	519	0.3	45	39	36.8	413	0.5	44	106	1,070
Female, Disabled												
All Ages	46	49.5	495	0.3	48	36	38.7	386	0.5	46	93	931
64 or younger	46	49.5	495	0.3	48	36	38.7	386	0.5	46	93	931
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Female, Other Eligibles												
All Ages	2	15.4	24	0.1	1	3	23.1	27	0.4	14	13	139
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	10
65-74	0	0.0	0	0.0	0	3	75.0	27	0.4	14	4	39
75-84	1	33.3	12	0.1	1	0	0.0	0	0.0	0	3	36
85 and older	1	20.0	12	0.1	1	0	0.0	0	0.0	0	5	54
Male												
All Males	24	38.1	272	0.3	25	28	44.4	283	0.6	35	63	564
Male, Disabled												
All Ages	19	33.9	220	0.3	21	26	46.4	263	0.7	37	56	492
64 or younger	19	33.9	220	0.3	21	26	46.4	263	0.7	37	56	492
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	71.4	52	0.3	40	2	28.6	20	0.1	10	7	72
64 or younger	4	133.3	48	0.3	43	2	66.7	20	0.1	10	3	32
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	24
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	1	50.0	4	0.3	2	0	0.0	0	0.0	0	2	16
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 2006 file for Idaho, released by CMS in 9/2009. This table was produced on 02/11/2010.
 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 2006. A total of 249 beneficiaries who were in nursing facilities for part of their enrollment and their 2,566 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 2006. 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 2006 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.
 Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE ND.11
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
 AMONG NONDUALS, BY BENEFICIARY CHARACTERISTIC^{a,b}
 IDAHO, 2006

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	32,452	16.6	0.5	101,035	\$8	\$1,498,049	\$15	1.6	195,435	
Age										
5 and younger	9,827	15.8	0.3	17,460	5	281,475	16	3.6	62,280	
6-14	8,001	12.6	0.2	15,384	4	268,092	17	1.5	63,595	
15-20	4,057	14.3	0.3	8,317	5	148,080	18	1.2	28,276	
21-44	7,233	21.7	1.0	32,131	13	417,939	13	1.3	33,388	
45-64	3,230	42.8	3.6	27,063	50	374,477	14	1.5	7,540	
65-74	78	33.8	2.2	511	26	6,078	12	1.3	231	
75-84	20	22.5	1.2	108	13	1,152	11	1.3	89	
85 and older	6	16.7	1.7	61	21	756	12	2.9	36	
Unknown	0	0.0	0.0	0	0	0	0	0.0	0	
Basis of Eligibility^c										
Aged	171	37.4	2.5	1,164	34	15,474	13	1.4	457	
Disabled	6,838	33.6	2.3	46,919	33	672,920	14	1.2	20,323	
Adults	5,652	17.6	0.6	18,465	7	235,905	13	1.7	32,034	
Children	19,791	13.9	0.2	34,487	4	573,750	17	2.4	142,621	
Unknown	0	0.0	0.0	0	0	0	0	0.0	0	
Gender										
Female	19,619	18.0	0.6	67,707	9	978,624	14	1.7	108,884	
Male	12,833	14.8	0.4	33,328	6	519,425	16	1.3	86,551	
Unknown	0	0.0	0.0	0	0	0	0	0.0	0	
Race										
White	31,062	16.8	0.5	97,117	8	1,443,816	15	1.6	185,133	
African American	317	13.3	0.4	908	6	13,749	15	1.6	2,391	
Other/unknown	1,073	13.6	0.4	3,010	5	40,484	13	1.6	7,911	
Use of Nursing Facilities^d										
Entire year	112	66.3	7.1	1,195	93	15,779	13	1.4	169	
Part year	176	70.7	7.4	1,840	103	25,586	14	1.7	249	
None	32,164	16.5	0.5	98,000	7	1,456,684	15	1.6	195,017	
Maintenance Assistance Status										
Cash	11,017	26.5	1.4	59,603	20	844,453	14	1.3	41,624	
Medically needy	0	0.0	0.0	0	0	0	0	0.0	1	
Poverty related	17,469	13.3	0.2	30,264	4	492,253	16	2.6	131,435	
Other/unknown	3,966	17.7	0.5	11,168	7	161,343	14	1.5	22,375	

Source: Data for this table are from the MAX 2006 file for Idaho, released by CMS in 9/2009. This table was produced on 02/11/2010.

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 2006.

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.

Benef(s) = beneficiary (or beneficiaries); CMS = Centers for Medicare & Medicaid Services; Excl = excluded; MAX = Medicaid Analytic Extract; OTC = over-the-counter; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE ND.12
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
 AMONG NONDUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a,b}
 IDAHO, 2006

Beneficiary Characteristics	Number Rx per Benefit Month	Rx \$ per Benefit Month	\$ per Rx	Barbiturate \$ per Benefit Month	Benzodiazepine \$ per Benefit Month	Number of Benefit Months
All	0.1	\$1	\$15	\$0	\$0	1,850,113
Age						
5 and younger	0.0	0	16	0	0	589,409
6-14	0.0	0	17	0	0	655,164
15-20	0.0	1	18	0	0	264,188
21-44	0.1	2	13	0	1	264,140
45-64	0.4	5	14	0	2	73,938
65-74	0.2	3	12	0	1	2,228
75-84	0.1	1	11	0	0	777
85 and older	0.2	3	12	0	0	269
Unknown	0.0	0	0	0	0	0
Basis of Eligibility^c						
Aged	0.3	3	13	0	1	4,652
Disabled	0.2	3	14	0	1	217,335
Adults	0.1	1	13	0	0	233,717
Children	0.0	0	17	0	0	1,394,409
Unknown	0.0	0	0	0	0	0
Gender						
Female	0.1	1	14	0	0	1,004,029
Male	0.0	1	16	0	0	846,084
Unknown	0.0	0	0	0	0	0
Race						
White	0.1	1	15	0	0	1,761,109
African American	0.0	1	15	0	0	22,858
Other/unknown	0.0	1	13	0	0	66,146
Use of Nursing Facilities^d						
Entire year	0.7	10	13	0	3	1,634
Part year	0.7	10	14	0	3	2,566
None	0.1	1	15	0	0	1,845,913
Maintenance Assistance Status						
Cash	0.1	2	14	0	1	415,871
Medically needy	0.0	0	0	0	0	2
Poverty related	0.0	0	16	0	0	1,225,693
Other/unknown	0.1	1	14	0	0	208,547

Source: Data for this table are from the MAX 2006 file for Idaho, released by CMS in 9/2009. This table was produced on 02/11/2010.

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 2006.

b. The statute establishing the Medicare Part D prescription program that started in 2006 excludes several types of drugs from coverage. State Medicaid programs have been allowed to exclude these drugs since 1990, but many states have chosen to cover them, and if states cover them for any Medicaid beneficiaries they must also cover them for dual eligibles, who as of 2006 receive the remainder of their prescription drug coverage through Part D. Excluded drugs include benzodiazepines; barbiturates; nonprescription (OTC) medications; prescription vitamins and minerals (not including prenatal vitamins and fluoride preparations); and drugs used for anorexia, weight loss, or weight gain. Other excluded drugs include those that promote fertility; those used for cosmetic purposes or hair growth, for symptomatic relief of coughs and colds; or drugs for which the manufacturer requires that associated tests or monitoring services be purchased exclusively from the manufacturer.

c. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.

d. Please refer to footnote f on Table 1 for methodology used to determine use of nursing facilities.

TABLE ND.13
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D FOR SELECTED DRUG CATEGORIES AMONG NONDUALS^{a,b,c}
 IDAHO, 2006

Drug Category	Number of Users	Rx \$ per User	Total Rx \$	Rx \$ as a		Number Rx as a	
				Percentage of All Part D Excluded Rx \$	Total Number Rx. \$ per Rx	Percentage of All Part D Excluded Rx	Excluded Rx
All	38,249	\$39	\$1,498,049	100.0	101,035	\$15	100.0
Anorexia or weight loss/gain	2	22	44	0.0	2	22	0.0
Fertility drugs	5	89	445	0.0	9	49	0.0
Drugs for cosmetic purposes	115	17	1,981	0.1	179	11	0.2
Cough and cold medications	18,758	33	618,444	41.3	30,118	21	29.8
Vitamins and minerals	4,393	46	203,520	13.6	13,368	15	13.2
Non-prescription drugs	7,561	34	255,425	17.1	16,747	15	16.6
Barbiturates	184	63	11,511	0.8	1,407	8	1.4
Benzodiazepines	6,652	55	364,101	24.3	37,511	10	37.1
Other Part D Excl Rx Drugs	579	74	42,578	2.8	1,694	25	1.7

Source: Data for this table are from the MAX 2006 file for Idaho, released by CMS in 9/2009. This table was produced on 02/11/2010.

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 2006. A user is a beneficiary who had at least one prescription filled for a Part D excluded drug in 2006. 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 Medicaid Beneficiaries

APPENDIX TABLE A.1
 CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY^{a, b}
 NONDUAL BENEFICIARIES, IDAHO, 2006

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	195,435	457	20,323	32,034	142,621	0	1,850,113	4,652	217,335	233,717	1,394,409	0
Age												
5 and younger	62,280	0	1,675	27	60,578	0	589,409	0	17,104	127	572,178	0
6-14	63,595	0	4,276	16	59,303	0	655,164	0	47,775	97	607,292	0
15-20	28,276	0	2,733	2,823	22,720	0	264,188	0	30,000	19,325	214,863	0
21-44	33,388	1	5,902	27,467	18	0	264,140	12	63,548	200,511	69	0
45-64	7,540	137	5,721	1,680	2	0	73,938	1,503	58,810	13,618	7	0
65-74	231	203	16	12	0	0	2,228	2,102	98	28	0	0
75-84	89	81	0	8	0	0	777	767	0	10	0	0
85 and older	36	35	0	1	0	0	269	268	0	1	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	108,884	294	10,286	27,763	70,541	0	1,004,029	3,024	110,392	201,241	689,372	0
Male	86,551	163	10,037	4,271	72,080	0	846,084	1,628	106,943	32,476	705,037	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	185,133	392	19,330	29,649	135,762	0	1,761,109	3,967	206,617	221,345	1,329,180	0
African American	2,391	5	212	348	1,826	0	22,858	57	2,210	2,609	17,982	0
Other/unknown	7,911	60	781	2,037	5,033	0	66,146	628	8,508	9,763	47,247	0
Use of Nursing Facilities^c												
Entire year	169	20	149	0	0	0	1,634	211	1,423	0	0	0
Part year	249	19	226	3	1	0	2,566	207	2,311	36	12	0
None	195,017	418	19,948	32,031	142,620	0	1,845,913	4,234	213,601	233,681	1,394,397	0
Maintenance Assistance Status												
Cash	41,624	152	18,429	10,498	12,545	0	415,871	1,711	196,743	87,427	129,990	0
Medically needy	1	0	0	0	1	0	2	0	0	0	2	0
Poverty related	131,435	0	1	12,288	119,146	0	1,225,693	0	3	67,174	1,158,516	0
Other/unknown	22,375	305	1,893	9,248	10,929	0	208,547	2,941	20,589	79,116	105,901	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	195,435	457	20,323	32,034	142,621	0	1,850,113	4,652	217,335	233,717	1,394,409	0
FFS part year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
FFS part year, no Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
MC all year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
MC all year, no Rx claims	0	0	0	0	0	0	0	0	0	0	0	0

Source: Data for this table are from the MAX 2006 file for Idaho, released by CMS in 9/2009. This table was produced on 02/11/2010.

a. Table A.1 includes the beneficiaries represented by Cell J of Table 1. Benefit months are months during which beneficiaries had pharmacy benefit coverage.
 b. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services. The total includes some beneficiaries with unknown basis of eligibility and some whose age categories are not consistent with basis of eligibility.
 c. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.
 Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; FFS = fee-for-service pharmacy benefit; MAX = Medicaid Analytic Extract; MC = managed care; Rx = pharmacy benefit.

APPENDIX TABLE A.2
 MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS^a
 NONDUAL BENEFICIARIES, IDAHO, 2006

	Beneficiaries and		Included in Cell K of Table 1		Excluded from Cell K of Table 1	
	Benefit Months in Cell J of Table 1	Benefit Months in Cell J of Table 1	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months
All	195,435	1,850,113	195,435	1,850,113	0	0
Fee-for-service (FFS) all year	195,435	1,850,113	195,435	1,850,113	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 2006 file for Idaho, released by CMS in 9/2009. This table was produced on 02/11/2010.

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 Medicaid Beneficiaries