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

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TABLE ND.2
 CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a, b}
 NONDUAL BENEFICIARIES, MINNESOTA, 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	394,545	1,393	56,402	113,846	222,439	465	1,756,585	4,976	575,277	376,557	796,375	3,400
Age												
5 and younger	87,566	0	3,383	3	84,180	0	323,909	0	32,296	8	291,605	0
6-14	97,551	0	9,339	18	88,194	0	421,273	0	101,445	65	319,763	0
15-20	65,247	0	6,916	10,485	47,826	20	291,474	0	73,796	38,277	179,284	117
21-44	112,140	0	16,771	92,888	2,231	250	480,625	0	168,648	304,683	5,699	1,595
45-64	30,498	2	19,876	10,427	0	193	233,677	13	198,535	33,459	0	1,670
65-74	1,165	1,026	114	23	0	2	4,137	3,511	548	60	0	18
75-84	251	248	2	1	0	0	905	899	3	3	0	0
85 and older	118	117	0	1	0	0	555	553	0	2	0	0
Unknown	9	0	1	0	8	0	30	0	6	0	24	0
Gender												
Female	226,209	771	27,118	88,541	109,314	465	970,435	2,679	280,367	296,481	387,508	3,400
Male	168,336	622	29,284	25,305	113,125	0	786,150	2,297	294,910	80,076	408,867	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	200,796	262	33,602	67,511	99,117	304	929,480	1,401	346,347	218,281	360,939	2,512
African American	87,461	699	11,805	23,506	51,428	23	339,783	2,055	115,378	69,270	152,906	174
Other/unknown	106,288	432	10,995	22,829	71,894	138	487,322	1,520	113,552	89,006	282,530	714
Use of Nursing Facilities^c												
Entire year	586	52	468	20	46	0	5,312	297	4,872	36	107	0
Part year	2,532	48	1,566	410	505	3	20,152	259	14,825	2,037	3,000	31
None	391,427	1,293	54,368	113,416	221,888	462	1,731,121	4,420	555,580	374,484	793,268	3,369
Maintenance Assistance Status												
Cash	285,425	899	41,762	88,151	154,613	0	1,281,764	2,931	443,007	299,001	536,825	0
Medically needy	7,515	103	1,678	4,384	1,350	0	30,171	551	11,698	15,065	2,857	0
Poverty-related	37,169	45	1,565	4,418	30,676	465	153,665	212	13,187	16,652	120,214	3,400
Other/unknown	64,436	346	11,397	16,893	35,800	0	290,985	1,282	107,385	45,839	136,479	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	135,854	323	50,462	32,802	51,819	448	1,049,484	1,853	541,793	154,807	347,719	3,312
FFS part year, with Rx claims	77,553	639	4,741	33,880	38,285	8	258,668	2,176	28,366	104,101	123,971	54
FFS part year, no Rx claims	181,138	431	1,199	47,164	132,335	9	448,433	947	5,118	117,649	324,685	34

Source: Data for this table are from the MAX 2006 file for Minnesota, released by CMS in 5/2009. 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.

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

TABLE ND.3
ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC^{a, b}
NONDUAL BENEFICIARIES, MINNESOTA, 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	37.8	5.5	\$496	\$90	\$5,742	8.6	394,545
Age							
5 and younger	27.1	1.1	92	81	3,312	2.8	87,566
6-14	28.6	2.6	253	97	4,178	6.1	97,551
15-20	35.3	3.6	386	107	5,353	7.2	65,247
21-44	45.9	5.9	578	98	6,831	8.5	112,140
45-64	73.0	29.7	2,365	80	14,213	16.6	30,498
65-74	57.5	8.2	482	59	12,030	4.0	1,165
75-84	53.4	6.6	268	41	11,933	2.2	251
85 and older	46.6	7.7	294	38	18,207	1.6	118
Unknown	77.8	4.0	321	80	5,277	6.1	9
Basis of Eligibility^e							
Aged	55.4	7.2	379	53	12,101	3.1	1,393
Disabled	82.5	29.1	2,810	97	24,159	11.6	56,402
Adults	39.5	2.2	138	64	2,854	4.8	113,846
Children	25.5	1.2	92	76	2,508	3.7	222,439
Unknown	57.4	9.9	758	76	7,257	10.4	465
Gender							
Female	39.5	5.7	454	80	5,185	8.7	226,209
Male	35.5	5.3	552	105	6,491	8.5	168,336
Unknown	0.0	0.0	0	0	0	0.0	0
Race							
White	42.5	7.4	652	89	6,806	9.6	200,796
African American	31.9	3.4	305	90	4,701	6.5	87,461
Other/unknown	33.9	3.7	358	96	4,589	7.8	106,288
Use of Nursing Facilities^f							
Entire year	92.5	79.7	6,184	78	66,243	9.3	586
Part year	86.6	41.0	3,413	83	39,395	8.7	2,532
None	37.4	5.2	468	91	5,434	8.6	391,427
Maintenance Assistance Status							
Cash	38.9	5.9	532	90	5,804	9.2	285,425
Medically needy	38.4	6.2	540	88	7,421	7.3	7,515
Poverty related	29.6	2.4	177	74	2,715	6.5	37,169
Other/unknown	37.8	5.5	512	94	7,017	7.3	64,436

Source: Data for this table are from the MAX 2006 file for Minnesota, released by CMS in 5/2009. 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.

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

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

Beneficiary Characteristics	Mean Number of Rx	Mean Rx \$	Rx \$ as a Percentage of All Medicaid FFS \$ ^c	Number of Rx, Percentage with:						Mean \$, All Medicaid FFS \$ ^d	Number	
				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	1.2	\$111	8.6	62.2	24.0	5.3	5.6	2.3	0.7	\$1,290	394,545	1,756,585
Age												
5 and younger	0.3	25	2.8	72.9	23.4	2.3	1.2	0.2	0.0	895	87,566	323,909
6-14	0.6	59	6.1	71.4	21.0	3.9	3.2	0.4	0.0	968	97,551	421,273
15-20	0.8	87	7.2	64.7	24.7	5.1	4.6	0.9	0.1	1,198	65,247	291,474
21-44	1.4	135	8.5	54.1	27.2	7.4	7.7	2.8	0.7	1,594	112,140	480,625
45-64	3.9	309	16.6	27.0	21.9	10.4	20.2	14.8	5.7	1,855	30,498	233,677
65-74	2.3	136	4.0	42.5	23.2	11.3	14.2	6.3	2.6	3,388	1,165	4,137
75-84	1.8	74	2.2	46.6	21.9	9.6	13.9	7.2	0.8	3,310	251	905
85 and older	1.6	63	1.6	53.4	17.8	3.4	16.9	5.9	2.5	3,871	118	555
Unknown	1.2	96	6.1	22.2	44.4	11.1	22.2	0.0	0.0	1,583	9	30
Basis of Eligibility^e												
Aged	2.0	106	3.1	44.6	23.0	10.6	14.1	5.9	1.9	3,388	1,393	4,976
Disabled	2.9	276	11.6	17.5	32.4	12.5	21.2	12.2	4.2	2,369	56,402	575,277
Adults	0.7	42	4.8	60.5	26.2	6.4	5.3	1.4	0.2	863	113,846	376,557
Children	0.3	26	3.7	74.5	20.7	2.9	1.8	0.2	0.0	701	222,439	796,375
Unknown	1.4	104	10.4	42.6	34.2	9.5	9.7	3.4	0.6	992	465	3,400
Gender												
Female	1.3	106	8.7	60.5	25.0	5.5	5.7	2.5	0.8	1,209	226,209	970,435
Male	1.1	118	8.5	64.5	22.6	5.0	5.4	2.0	0.5	1,390	168,336	786,150
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	1.6	141	9.6	57.5	24.7	6.3	7.3	3.2	1.0	1,470	200,796	929,480
African American	0.9	79	6.5	68.1	21.8	4.5	4.0	1.3	0.3	1,210	87,461	339,783
Other/unknown	0.8	78	7.8	66.1	24.5	4.0	3.7	1.4	0.3	1,001	106,288	487,322
Use of Nursing Facilities^f												
Entire year	8.8	682	9.3	7.5	6.7	5.5	20.0	31.6	28.8	7,308	586	5,312
Part year	5.2	429	8.7	13.4	24.8	11.3	18.9	18.7	12.9	4,950	2,532	20,152
None	1.2	106	8.6	62.6	24.0	5.2	5.5	2.1	0.5	1,229	391,427	1,731,121
Maintenance Assistance Status												
Cash	1.3	119	9.2	61.1	24.6	5.4	5.7	2.4	0.7	1,293	285,425	1,281,764
Medically needy	1.5	135	7.3	61.6	20.6	6.0	7.0	3.7	1.1	1,849	7,515	30,171
Poverty related	0.6	43	6.5	70.4	23.1	3.0	2.4	0.8	0.3	657	37,169	153,665
Other/unknown	1.2	113	7.3	62.2	22.0	6.2	6.9	2.2	0.5	1,554	64,436	290,985

Source: Data for this table are from the MAX 2006 file for Minnesota, released by CMS in 5/2009. 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, MINNESOTA, 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	1.2	\$111	\$90	0.4	\$85	\$189	0.1	\$8	\$121	0.7	\$19	\$26
Age												
5 and younger	0.3	25	81	0.1	18	197	0.0	1	73	0.2	6	28
6-14	0.6	59	97	0.3	48	161	0.0	2	91	0.3	8	29
15-20	0.8	87	107	0.4	71	196	0.0	4	105	0.4	11	27
21-44	1.4	135	98	0.5	103	219	0.1	9	132	0.8	23	27
45-64	3.9	309	80	1.3	222	176	0.2	28	131	2.4	58	24
65-74	2.3	136	59	0.7	91	129	0.1	15	113	1.5	30	21
75-84	1.8	74	41	0.5	50	97	0.1	8	72	1.2	16	13
85 and older	1.6	63	38	0.5	40	75	0.1	12	114	1.0	10	10
Unknown	1.2	96	80	0.7	90	122	0.0	0	0	0.5	7	15
Basis of Eligibility^d												
Aged	2.0	106	53	0.6	71	116	0.1	13	108	1.3	23	18
Disabled	2.9	276	97	1.1	217	204	0.1	19	125	1.6	40	24
Adults	0.7	42	64	0.2	22	142	0.0	4	143	0.5	15	32
Children	0.3	26	76	0.1	19	135	0.0	1	83	0.2	6	31
Unknown	1.4	104	76	0.5	74	153	0.1	10	139	0.8	20	24
Gender												
Female	1.3	106	80	0.4	77	171	0.1	9	127	0.8	20	25
Male	1.1	118	105	0.4	95	212	0.1	7	113	0.6	17	27
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Race												
White	1.6	141	89	0.6	110	185	0.1	10	119	0.9	21	23
African American	0.9	79	90	0.3	63	218	0.0	5	122	0.5	11	20
Other/unknown	0.8	78	96	0.3	51	187	0.0	6	130	0.5	21	42
Use of Nursing Facilities^e												
Entire year	8.8	682	78	2.8	499	181	0.5	57	122	5.6	126	23
Part year	5.2	429	83	1.6	318	196	0.2	27	122	3.3	84	25
None	1.2	106	91	0.4	81	189	0.1	7	121	0.7	18	26
Maintenance Assistance Status												
Cash	1.3	119	90	0.5	89	194	0.1	8	125	0.8	21	27
Medically needy	1.5	135	88	0.5	100	196	0.1	10	130	0.9	24	25
Poverty related	0.6	43	74	0.2	31	157	0.0	4	124	0.3	8	22
Other/unknown	1.2	113	94	0.5	93	178	0.1	6	101	0.6	14	23

Source: Data for this table are from the MAX 2006 file for Minnesota, released by CMS in 5/2009. 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 Minnesota, 0.5 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, MINNESOTA, 2006

Therapeutic Category	Number of Rx per Benefit Month Among Users			\$ per Benefit Month Among Users			\$ per Rx			Users ^e							
	Total	Patented Brand-Name	Off-Patent Brand-Name Generic	Total	Patented Brand-Name	Off-Patent Brand-Name Generic	Total	Patented Brand-Name	Off-Patent Brand-Name Generic	Total Number of Rx	Total Rx \$	Number of Users	As a Percentage of All Benes	Number of Benefit Months			
Anti-infective Agents	0.3	0.0	0.0	0.3	\$25	\$16	\$1	\$8	\$79	\$325	\$76	\$33	181,754	\$14,431,802	75,682	19.2	577,428
Biologicals	0.2	0.2	0.0	0.0	367	360	7	1	1482	1,611	1,055	55	2,425	3,593,963	1,047	0.3	9,782
Antineoplastic Agents	0.6	0.2	0.0	0.4	150	129	0	21	260	784	107	50	5,965	1,548,704	1,113	0.3	10,350
Endocrine/Metabolic Drugs	0.7	0.2	0.0	0.4	47	34	2	11	69	140	88	26	185,417	12,752,106	35,045	8.9	272,660
Cardiovascular Agents	1.2	0.3	0.2	0.8	53	22	21	11	44	80	129	14	268,280	11,879,975	24,896	6.3	224,392
Respiratory Agents	0.6	0.3	0.0	0.3	43	36	0	7	74	115	58	25	160,776	11,903,959	34,363	8.7	275,485
Gastrointestinal Agents	0.6	0.3	0.0	0.3	62	48	8	6	105	154	374	23	138,508	14,545,847	26,553	6.7	233,512
Genitourinary Agents	0.4	0.1	0.1	0.2	24	14	5	5	59	91	90	27	27,826	1,647,065	8,191	2.1	69,349
CNS Drugs	1.2	0.5	0.1	0.6	141	119	9	12	119	223	97	22	482,091	57,355,837	48,804	12.4	408,199
Stimulants/Anti-obesity/Anorexia	0.8	0.6	0.0	0.2	75	69	1	6	98	112	141	37	91,429	8,922,233	14,351	3.6	118,458
Miscellaneous Psychological/Neurological Agents	0.3	0.2	0.0	0.1	106	100	0	6	343	443	95	69	7,256	2,485,902	2,606	0.7	23,529
Analgesics and Anesthetics	0.6	0.1	0.0	0.6	34	15	1	18	54	203	274	32	240,498	12,980,680	48,025	12.2	381,155
Neuromuscular Agents	0.9	0.4	0.0	0.5	93	76	3	15	103	181	121	32	201,010	20,651,767	23,848	6.0	221,124
Nutritional Products	0.5	0.0	0.0	0.5	14	4	0	9	28	122	26	20	42,547	1,178,203	11,217	2.8	83,307
Hematological Agents	0.7	0.2	0.0	0.5	298	291	1	6	431	1,449	87	13	29,364	12,665,526	4,678	1.2	42,491
Topical Products	0.3	0.1	0.0	0.2	14	8	1	5	48	99	68	27	94,136	4,553,213	39,825	10.1	332,510
Miscellaneous Products	0.8	0.3	0.1	0.5	186	145	14	27	231	558	244	55	10,006	2,308,179	1,263	0.3	12,400
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	14	0	0	0	65	0	0	0	2,421	156,181	1,054	0.3	10,815
TOTAL NO. OF RX AND RX \$	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	2,171,709	195,561,142	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2006 file for Minnesota, released by CMS in 5/2009. 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 Minnesota, 0.5 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.
 Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; CNS = Central Nervous System; MAX = Medicaid Analytic Extract; n.a. = not applicable; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE ND.7
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP^{a, b, c}
 NONDUAL BENEFICIARIES, MINNESOTA, 2006

Top 10 Drug Groups	Total Medicaid Rx \$	Users		Among Users			
		Number of Users	As a Percentage of All Beneficiaries	Number of Benefit Months	Number of Rx per Benefit Month	\$ per Rx	Rx \$ per Benefit Month
ANTIPSYCHOTICS	\$40,481,855	24,368	6.2	242,818	0.7	\$242	\$167
ANTICONVULSANT	19,156,192	20,638	5.2	203,933	0.8	125	94
ANTIDEPRESSANTS	13,163,858	48,907	12.4	418,750	0.5	58	31
ULCER DRUGS	10,326,859	23,553	6.0	211,443	0.5	99	49
MISC. HEMATOLOGICAL	10,156,649	1,199	0.3	11,109	0.6	1,539	914
STIMULANTS/ANTI-OBESITY/ANOREXIANTS	8,911,772	16,168	4.1	137,448	0.7	98	65
ANTIASTHMATIC	8,833,408	38,438	9.7	317,471	0.4	77	28
ANALGESICS - Narcotic	6,290,970	50,027	12.7	420,127	0.4	40	15
ANTIDIABETIC	6,211,906	13,086	3.3	118,326	0.7	80	52
ANTIHYPERLIPIDEMIC	6,116,959	9,484	2.4	93,519	0.6	107	65
Total	129,650,428	245,868	n.a.	2,174,944	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2006 file for Minnesota, released by CMS in 5/2009. 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, MINNESOTA, 2016

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	1,160,393	\$129,650,428	24,368	6.2	242,818	0.7	\$167	20,638	5.2	203,933	0.8	\$94
Female												
All Females	655,110	63,247,725	12,148	5.4	118,817	0.6	151	11,865	5.2	114,669	0.7	86
Female, Disabled												
All Ages	504,253	51,991,535	8,789	32.4	95,473	0.7	166	8,564	31.6	94,105	0.8	91
5 and younger	6,256	790,746	25	1.9	266	0.5	113	245	19.1	2,748	0.6	78
6-14	23,933	2,474,948	469	16.1	5,372	0.6	116	777	26.6	8,998	0.7	98
15-20	27,969	3,195,996	772	29.7	8,650	0.6	130	773	29.7	8,860	0.8	113
21-44	152,415	17,302,556	3,723	43.2	39,488	0.7	166	3,125	36.3	33,721	0.8	113
45-64	292,854	28,148,705	3,779	32.5	41,527	0.7	180	3,637	31.3	39,721	0.7	67
65-74	826	78,584	21	27.3	170	0.7	162	7	9.1	57	0.4	14
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles												
All Ages	150,838	11,254,929	3,359	1.7	23,344	0.5	92	3,301	1.7	20,564	0.6	65
5 and younger	5,145	338,021	33	0.1	252	0.4	53	97	0.2	687	0.5	60
6-14	24,169	2,058,544	551	1.3	5,124	0.6	110	339	0.8	2,794	0.7	82
15-20	29,153	2,498,937	871	2.6	7,505	0.5	104	564	1.7	4,649	0.6	82
21-44	72,423	4,756,844	1,638	2.2	8,597	0.4	72	1,936	2.6	10,183	0.5	56
45-64	17,532	1,425,912	235	3.6	1,614	0.4	88	333	5.1	2,060	0.5	53
65-74	1,838	141,719	22	3.8	177	0.6	88	25	4.3	121	0.6	38
75-84	338	19,185	4	3.3	35	0.9	74	4	3.3	48	0.5	35
85 and older	240	15,767	5	6.1	40	0.9	154	3	3.7	22	0.4	2
Male												
All Males	505,283	66,402,703	12,220	7.3	124,001	0.7	182	8,773	5.2	89,264	0.8	104
Male, Disabled												
All Ages	396,004	56,190,058	9,441	32.2	100,741	0.8	194	7,065	24.1	77,165	0.8	108
5 and younger	8,739	1,282,511	70	3.3	774	0.5	68	279	13.3	3,016	0.6	91
6-14	61,500	8,690,532	1,637	25.5	18,543	0.6	133	1,233	19.2	14,175	0.7	97
15-20	49,183	9,313,059	1,507	34.9	16,957	0.7	160	1,060	24.6	12,232	0.8	110
21-44	119,316	20,707,813	3,848	47.2	39,442	0.8	228	2,596	31.8	27,870	0.9	145
45-64	157,131	16,182,754	2,376	28.8	25,014	0.8	213	1,894	22.9	19,863	0.7	67
65-74	126	13,055	3	8.1	11	0.5	139	3	8.1	9	1.1	82
75-84	9	334	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, MINNESOTA, 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	109,272	10,211,483	2,779	2.0	23,260	0.6	128	1,708	1.2	12,099	0.6	74
5 and younger	8,187	740,872	44	0.1	405	0.5	61	131	0.3	880	0.6	59
6-14	43,945	4,286,554	1,138	2.5	10,274	0.6	132	512	1.1	4,354	0.7	83
15-20	31,775	3,378,778	1,165	4.7	10,313	0.7	134	497	2.0	3,993	0.7	91
21-44	16,748	1,164,082	323	1.5	1,591	0.5	102	417	1.9	2,045	0.5	43
45-64	6,631	502,146	80	2.0	468	0.4	67	119	2.9	612	0.5	43
65-74	1,579	115,582	24	5.1	175	0.6	97	29	6.1	197	0.7	42
75-84	281	17,408	0	0.0	0	0.0	0	2	1.6	6	0.7	10
85 and older	126	6,061	5	13.9	34	0.3	11	1	2.8	12	0.1	1
Unknown	26	2,423	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 Minnesota, released by CMS in 5/2009. 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>.

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 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, MINNESOTA, 2006

Beneficiary Characteristics	ANTIDEPRESSANTS					ULCER DRUGS					MISC. HEMATOLOGICAL				
	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	48,907	12.4	418,750	0.5	\$31	23,553	6.0	211,443	0.5	\$49	1,199	0.3	11,109	0.6	\$914
Female															
All Females	32,890	14.5	269,741	0.5	33	15,077	6.7	134,184	0.5	49	564	0.2	5,311	0.6	104
Female, Disabled															
All Ages	17,096	63.0	184,423	0.6	36	9,281	34.2	102,019	0.5	55	462	1.7	4,777	0.6	110
5 and younger	33	2.6	359	0.4	5	278	21.6	2,872	0.5	35	3	0.2	36	0.9	5,433
6-14	503	17.2	5,739	0.5	15	338	11.6	3,832	0.5	39	5	0.2	58	0.6	26
15-20	940	36.2	10,410	0.6	27	398	15.3	4,496	0.4	45	3	0.1	29	0.9	88
21-44	6,186	71.8	66,087	0.5	36	2,604	30.2	28,658	0.5	51	52	0.6	521	0.5	79
45-64	9,407	81.0	101,629	0.6	38	5,642	48.6	62,019	0.6	60	396	3.4	4,097	0.6	68
65-74	27	35.1	199	0.5	26	21	27.3	142	0.7	69	3	3.9	36	0.5	73
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	15,794	7.9	85,318	0.4	26	5,796	2.9	32,165	0.3	28	102	0.1	534	0.5	56
5 and younger	18	0.0	150	0.4	5	556	1.3	3,098	0.4	19	0	0.0	0	0.0	0
6-14	990	2.3	8,042	0.5	17	349	0.8	2,498	0.3	26	0	0.0	0	0.0	0
15-20	2,754	8.2	19,948	0.4	22	843	2.5	5,613	0.3	21	2	0.0	12	0.8	21
21-44	10,255	14.0	47,738	0.4	29	3,122	4.2	15,974	0.3	28	42	0.1	187	0.4	50
45-64	1,656	25.1	8,729	0.5	34	749	11.4	4,137	0.4	42	46	0.7	256	0.5	61
65-74	91	15.8	502	0.5	22	139	24.1	637	0.5	45	10	1.7	65	0.5	63
75-84	16	13.3	117	0.5	11	28	23.3	152	0.5	43	2	1.7	14	0.9	35
85 and older	14	17.1	92	0.6	26	10	12.2	56	0.4	12	0	0.0	0	0.0	0
Male															
All Males	16,017	9.5	149,009	0.6	29	8,476	5.0	77,259	0.5	49	635	0.4	5,798	0.6	1,656
Male, Disabled															
All Ages	10,712	36.6	113,331	0.6	31	5,911	20.2	63,253	0.5	53	522	1.8	5,240	0.6	1,774
5 and younger	55	2.6	604	0.4	5	394	18.8	4,132	0.5	36	4	0.2	36	0.8	11,927
6-14	1,425	22.2	16,181	0.6	17	548	8.5	6,391	0.5	42	15	0.2	166	0.6	11,804
15-20	1,374	31.8	15,478	0.6	27	483	11.2	5,533	0.5	45	15	0.3	172	0.8	18,648
21-44	3,636	44.6	37,038	0.6	36	1,628	20.0	17,239	0.6	54	59	0.7	589	0.5	5,763
45-64	4,211	51.0	43,967	0.6	33	2,852	34.5	29,930	0.6	60	429	5.2	4,277	0.6	71
65-74	11	29.7	63	0.4	24	6	16.2	28	0.8	57	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Nondual 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, MINNESOTA, 2006

Beneficiary Characteristics	ANTIDEPRESSANTS						ULCER DRUGS					MISC. HEMATOLOGICAL			
	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	5,305	3.8	35,678	0.5	23	2,565	1.8	14,006	0.4	29	113	0.1	558	0.5	553
5 and younger	42	0.1	317	0.4	5	654	1.5	3,515	0.4	18	3	0.0	24	0.8	7,508
6-14	1,439	3.2	11,655	0.6	21	281	0.6	2,077	0.4	29	6	0.0	38	0.4	1,560
15-20	1,829	7.4	14,226	0.5	24	371	1.5	2,600	0.4	25	4	0.0	7	0.7	5,519
21-44	1,480	6.8	6,802	0.4	26	771	3.5	3,444	0.4	38	31	0.1	130	0.4	41
45-64	449	11.1	2,285	0.5	25	337	8.4	1,663	0.4	39	56	1.4	254	0.6	66
65-74	41	8.6	266	0.6	20	112	23.6	517	0.5	38	8	1.7	72	0.6	78
75-84	16	12.4	79	0.6	25	28	21.7	138	0.5	39	4	3.1	32	0.7	79
85 and older	9	25.0	48	0.6	23	11	30.6	52	0.5	35	1	2.8	1	1.0	132
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 Minnesota, released by CMS in 5/2009. 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>.
 Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription (s) or pharmacy benefit; \$ = Medicaid reimbursement.

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

Beneficiary Characteristics	STIMULANTS/ANTI-OBESITY/ANOREXIANTS					ANTI-ASTHMATIC					ANALGESICS - Narcotic				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	16,168	4.1	137,448	0.7	\$65	38,438	9.7	317,471	0.4	\$28	50,027	12.7	420,127	0.4	\$15
Female															
All Females	5,592	2.5	46,499	0.6	63	21,560	9.5	177,998	0.4	28	34,166	15.1	282,658	0.4	14
Female, Disabled															
All Ages	1,999	7.4	22,149	0.6	69	10,645	39.3	117,047	0.4	32	16,027	59.1	175,376	0.4	16
5 and younger	36	2.8	403	0.5	36	642	49.9	6,769	0.3	33	91	7.1	956	0.2	3
6-14	695	23.8	7,853	0.6	56	912	31.3	10,491	0.3	25	249	8.5	2,903	0.1	2
15-20	438	16.8	5,005	0.7	66	649	25.0	7,378	0.3	27	633	24.3	7,126	0.2	2
21-44	460	5.3	4,943	0.6	80	2,956	34.3	32,641	0.3	25	5,681	65.9	61,820	0.4	12
45-64	370	3.2	3,945	0.6	88	5,476	47.1	59,722	0.4	38	9,349	80.5	102,404	0.5	19
65-74	0	0.0	0	0.0	0	10	13.0	46	0.5	29	24	31.2	167	0.3	20
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	3,593	1.8	24,350	0.6	58	10,915	5.5	60,951	0.3	19	18,139	9.1	107,282	0.3	11
5 and younger	53	0.1	447	0.3	27	2,009	4.9	11,839	0.3	17	229	0.6	1,458	0.2	3
6-14	1,795	4.1	12,955	0.7	55	2,376	5.5	13,725	0.3	20	562	1.3	4,143	0.2	4
15-20	879	2.6	7,156	0.6	60	1,833	5.5	11,956	0.3	17	2,693	8.0	18,252	0.2	5
21-44	768	1.0	3,299	0.6	65	3,871	5.3	18,651	0.3	19	12,971	17.6	73,031	0.3	11
45-64	97	1.5	487	0.6	67	748	11.4	4,379	0.4	28	1,564	23.7	9,723	0.5	25
65-74	1	0.2	6	0.2	3	58	10.1	316	0.4	31	89	15.4	504	0.4	18
75-84	0	0.0	0	0.0	0	14	11.7	53	0.4	29	21	17.5	114	0.4	5
85 and older	0	0.0	0	0.0	0	6	7.3	32	0.6	52	10	12.2	57	0.5	5
Male															
All Males	10,576	6.3	90,949	0.7	66	16,878	10.0	139,473	0.4	28	15,861	9.4	137,469	0.4	18
Male, Disabled															
All Ages	4,238	14.5	47,217	0.7	67	7,999	27.3	87,451	0.4	33	9,510	32.5	100,274	0.4	19
5 and younger	95	4.5	994	0.4	26	1,050	50.1	11,188	0.3	30	194	9.3	2,137	0.1	1
6-14	2,431	37.9	27,234	0.7	63	2,109	32.8	24,301	0.3	26	508	7.9	5,930	0.1	2
15-20	1,134	26.3	12,903	0.7	75	989	22.9	11,334	0.4	28	696	16.1	7,859	0.2	3
21-44	454	5.6	4,797	0.7	82	1,306	16.0	13,946	0.4	30	3,006	36.9	30,845	0.4	13
45-64	124	1.5	1,289	0.6	63	2,535	30.7	26,640	0.5	43	5,094	61.7	53,431	0.5	28
65-74	0	0.0	0	0.0	0	8	21.6	38	0.4	35	11	29.7	70	0.4	45
75-84	0	0.0	0	0.0	0	2	100.0	4	1.0	69	1	50.0	2	1.5	18
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, MINNESOTA, 2006

Beneficiary Characteristics	STIMULANTS/ANTI-OBESITY/ANOREXIANTS						ANTI-ASTHMATIC					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	6,338	4.6	43,732	0.7	64	8,879	6.4	52,022	0.3	20	6,351	4.6	37,195	0.3	13	
5 and younger	178	0.4	1,291	0.5	51	3,208	7.5	18,640	0.3	19	336	0.8	2,177	0.2	2	
6-14	4,258	9.5	28,410	0.7	61	3,364	7.5	20,314	0.3	21	623	1.4	4,576	0.2	4	
15-20	1,657	6.7	13,045	0.7	72	1,268	5.1	8,168	0.3	19	1,499	6.0	10,296	0.2	5	
21-44	213	1.0	836	0.6	64	780	3.6	3,479	0.4	24	3,158	14.4	16,064	0.4	18	
45-64	32	0.8	150	0.7	69	187	4.6	1,013	0.4	28	618	15.3	3,382	0.5	29	
65-74	0	0.0	0	0.0	0	47	9.9	249	0.6	55	92	19.4	552	0.5	19	
75-84	0	0.0	0	0.0	0	21	16.3	119	0.4	20	17	13.2	92	0.3	3	
85 and older	0	0.0	0	0.0	0	4	11.1	40	0.2	16	8	22.2	56	0.4	8	
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	

Source: Data for this table are from the MAX 2006 file for Minnesota, released by CMS in 5/2009. 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>.

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 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, MINNESOTA, 2006

Beneficiary Characteristics	ANTIDIABETIC					ANTIHYPERLIPIDEMIC						
	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	13,086	3.3	118,326	0.7	\$53	9,484	2.4	93,519	0.6	\$65	394,545	1,756,585
Female												
All Females	8,343	3.7	76,585	0.7	53	5,614	2.5	56,278	0.6	65	226,204	970,420
Female, Disabled												
All Ages	5,780	21.3	63,352	0.7	54	4,604	17.0	50,923	0.6	67	27,117	280,361
5 and younger	10	0.8	118	0.7	66	1	0.1	5	0.2	10	1,286	12,169
6-14	53	1.8	634	0.7	51	1	0.0	12	0.1	5	2,917	31,767
15-20	81	3.1	885	0.7	46	11	0.4	124	0.6	29	2,600	27,852
21-44	1,143	13.3	12,527	0.6	51	715	8.3	7,909	0.5	58	8,620	88,600
45-64	4,445	38.3	48,812	0.7	55	3,852	33.2	42,735	0.6	69	11,617	119,603
65-74	48	62.3	376	0.8	50	24	31.2	138	0.8	66	77	370
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	2,563	1.3	13,233	0.5	46	1,010	0.5	5,355	0.5	49	199,087	690,059
5 and younger	22	0.1	121	0.6	54	0	0.0	0	0.0	0	41,187	142,576
6-14	131	0.3	664	0.7	70	5	0.0	50	0.6	40	43,577	155,049
15-20	199	0.6	1,125	0.6	56	7	0.0	37	0.6	63	33,461	123,639
21-44	1,394	1.9	6,873	0.5	42	483	0.7	2,434	0.4	43	73,495	243,267
45-64	681	10.3	3,729	0.5	46	417	6.3	2,335	0.5	51	6,588	22,810
65-74	113	19.6	620	0.6	48	82	14.2	409	0.7	71	577	1,929
75-84	16	13.3	40	0.7	48	13	10.8	65	0.7	41	120	424
85 and older	7	8.5	61	0.7	16	3	3.7	25	1.0	142	82	365
Male												
All Males	4,743	2.8	41,741	0.7	52	3,870	2.3	37,241	0.6	66	168,332	786,135
Male, Disabled												
All Ages	3,410	11.6	35,825	0.7	53	3,155	10.8	33,674	0.6	68	29,284	294,910
5 and younger	9	0.4	108	0.7	60	3	0.1	36	0.5	13	2,097	20,127
6-14	44	0.7	528	0.7	44	2	0.0	24	0.5	28	6,422	69,678
15-20	83	1.9	913	0.7	63	28	0.6	329	0.5	36	4,316	45,944
21-44	653	8.0	6,579	0.7	53	683	8.4	7,283	0.6	59	8,151	80,048
45-64	2,615	31.7	27,666	0.7	52	2,435	29.5	25,979	0.7	70	8,259	78,932
65-74	4	10.8	27	0.3	49	4	10.8	23	0.5	80	37	178
75-84	2	100.0	4	0.5	6	0	0.0	0	0.0	0	2	3
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, MINNESOTA, 2006

Beneficiary Characteristics	ANTIDIABETIC					ANTIHYPERLIPIDEMIC					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			
Male, Other Eligibles													
All Ages	1,333	1.0	5,916	0.6	48	715	0.5	3,567	0.5	51	139,048	491,225	
5 and younger	14	0.0	44	0.9	90	0	0.0	0	0.0	0	42,996	149,037	
6-14	109	0.2	522	0.7	63	3	0.0	31	0.6	58	44,635	164,779	
15-20	103	0.4	533	0.7	70	13	0.1	105	0.5	40	24,870	94,039	
21-44	588	2.7	2,522	0.5	44	302	1.4	1,466	0.4	40	21,874	68,710	
45-64	419	10.4	1,810	0.6	43	338	8.4	1,597	0.6	58	4,034	12,332	
65-74	77	16.2	377	0.8	44	49	10.3	302	0.6	63	474	1,660	
75-84	16	12.4	60	0.6	22	7	5.4	38	0.9	91	129	478	
85 and older	7	19.4	48	0.3	7	3	8.3	28	0.5	44	36	190	
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	9	30	

Source: Data for this table are from the MAX 2006 file for Minnesota, released by CMS in 5/2009. 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>.

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 Medicaid Beneficiaries

TABLE ND.8
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BENEFICIARY CHARACTERISTIC^{a, b}
 NONDUAL BENEFICIARIES, MINNESOTA, 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	\$682	8.8	586	5,312
Age				
0-64	708	9.0	525	4,974
65-74	523	8.9	32	181
75-84	120	6.1	11	53
85 and older	30	1.4	18	104
Unknown	0	0.0	0	0
Gender				
Female	701	9.2	271	2,513
Male	665	8.4	315	2,799
Unknown	0	0.0	0	0
Race				
White	670	8.7	426	3,838
African American	741	9.8	69	661
Other/unknown	695	8.4	91	813
Basis of Eligibility^c				
Aged	297	5.9	52	297
Disabled	724	9.2	468	4,872
Adults	100	1.6	20	36
Children	66	1.2	46	107
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 2006 file for Minnesota, released by CMS in 5/2009. 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 2,532 beneficiaries who were in nursing facilities for part of their enrollment and their 20,152 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 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, MINNESOTA, 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	0.7	0.2	0.0	0.4	\$74	\$61	\$1	\$12	\$114	\$291	\$99	\$28	2,100	\$239,382	318	54.3	3,226
Biologicals	0.1	0.0	0.0	0.1	4	1	0	3	35	40	0	33	64	2,211	56	9.6	579
Antineoplastic Agents	0.9	0.2	0.0	0.7	76	52	0	24	84	244	0	34	126	10,620	15	2.6	140
Endocrine/Metabolic Drugs	1.5	0.6	0.1	0.8	93	68	9	16	60	105	164	19	4,039	242,382	254	43.3	2,614
Cardiovascular Agents	2.1	0.3	0.3	1.4	94	28	48	18	45	86	140	13	7,084	316,320	330	56.3	3,372
Respiratory Agents	1.1	0.7	0.0	0.4	90	80	0	9	83	117	31	24	2,153	179,000	195	33.3	1,990
Gastrointestinal Agents	1.2	0.6	0.0	0.6	99	84	4	11	82	140	278	18	3,844	314,275	310	52.9	3,166
Genitourinary Agents	0.9	0.2	0.1	0.6	45	20	11	14	50	87	145	24	1,171	58,954	126	21.5	1,305
CNS Drugs	2.1	0.9	0.1	1.1	284	242	14	29	133	256	120	27	9,647	1,285,303	449	76.6	4,518
Stimulants/Anti-obesity/Anorexia	0.6	0.1	0.0	0.5	26	20	0	7	42	177	0	13	91	3,816	15	2.6	145
Miscellaneous Psychological/Neurological Agents	0.6	0.6	0.0	0.0	284	281	2	1	440	472	70	61	215	94,560	33	5.6	333
Analgesics and Anesthetics	1.6	0.2	0.0	1.4	70	29	0	41	44	135	27	30	4,634	202,158	293	50.0	2,876
Neuromuscular Agents	1.7	0.5	0.0	1.2	118	79	1	38	70	172	70	32	5,504	387,123	318	54.3	3,285
Nutritional Products	0.9	0.0	0.1	0.8	16	1	1	14	17	74	14	16	1,656	27,808	172	29.4	1,778
Hematological Agents	1.3	0.3	0.1	0.9	93	85	1	7	73	252	14	8	1,849	134,249	142	24.2	1,441
Topical Products	0.7	0.1	0.0	0.5	27	12	4	10	41	103	126	20	2,172	88,717	313	53.4	3,328
Miscellaneous Products	0.7	0.1	0.0	0.6	95	71	0	24	145	854	0	42	244	35,420	38	6.5	374
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	6	0	0	0	20	0	0	0	89	1,741	25	4.3	275
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.	46,682	3,624,039	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2006 file for Minnesota, released by CMS in 5/2009. 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 2,532 beneficiaries who were in nursing facilities for part of their enrollment and their 20,152 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 Minnesota, 0.5 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.
 Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; CNS = Central Nervous System; MAX = Medicaid Analytic Extract; n.a. = not applicable; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE ND.10
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS,
 BY TOP-10 DRUG GROUP^{a, b, c, d}
 NONDUAL BENEFICIARIES, MINNESOTA, 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	\$1,043,424	370	63.1	4,011	1.1	\$244	\$260	
ANTICONVULSANT	334,622	329	56.1	3,442	1.1	85	97	
ULCER DRUGS	226,126	297	50.7	3,054	0.8	89	74	
ANTIDEPRESSANTS	196,801	449	76.6	4,393	0.9	52	45	
ANTIHYPERLIPIDEMIC	185,537	162	27.6	1,792	0.9	116	104	
ANTI DIABETIC	177,038	259	44.2	2,815	1.0	60	63	
ANTI ASTHMATIC	159,752	254	43.3	2,607	0.7	90	61	
ANALGESICS - Narcotic	114,390	302	51.5	3,013	1.2	32	38	
ANTIVIRAL	99,417	62	10.6	674	0.3	502	148	
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	97,130	55	9.4	568	0.5	325	171	
Total	2,634,237	2,539	n.a.	26,369	n.a.	n.a.	n.a.	

Source: Data for this table are from the MAX 2006 file for Minnesota, released by CMS in 5/2009. 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 2,532 beneficiaries who were in nursing facilities for part of their enrollment and their 20,152 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, MINNESOTA, 2006

Beneficiary Characteristics	All Top 10 Drug Groups			ANTIPSYCHOTICS				ANTICONVULSANT				
	Number of Rx	Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
All	24,881	\$2,634,237	370	63.1	4,011	1.1	\$260	329	56.1	3,442	1.1	\$97
Female												
All Females	11,881	1,268,361	186	68.6	2,021	1.1	255	156	57.6	1,632	1.2	94
Female, Disabled												
All Ages	11,404	1,233,033	174	79.8	1,963	1.1	257	149	68.3	1,604	1.2	94
64 or younger	11,275	1,225,854	173	80.8	1,951	1.1	259	149	69.6	1,604	1.2	94
65-74	129	7,179	1	25.0	12	0.2	1	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	477	35,328	12	22.6	58	1.0	172	7	13.2	28	1.3	62
64 or younger	48	4,420	5	20.0	12	1.0	228	2	8.0	3	1.0	74
65-74	328	27,573	6	60.0	34	0.9	192	5	50.0	25	1.4	61
75-84	63	1,857	1	16.7	12	1.1	57	0	0.0	0	0.0	0
85 and older	38	1,478	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male												
All Males	13,000	1,365,876	184	58.4	1,990	1.0	266	173	54.9	1,810	1.1	101
Male, Disabled												
All Ages	12,451	1,333,597	172	68.8	1,921	1.0	272	163	65.2	1,720	1.1	102
64 or younger	12,429	1,332,475	171	69.8	1,918	1.0	272	161	65.7	1,718	1.1	102
65-74	22	1,122	1	20.0	3	1.0	33	2	40.0	2	2.5	155
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	549	32,279	12	18.5	69	0.8	91	10	15.4	90	1.0	67
64 or younger	59	2,886	6	14.6	17	0.6	77	1	2.4	2	0.5	15
65-74	413	27,129	5	38.5	40	1.1	123	8	61.5	76	1.2	78
75-84	54	1,398	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	23	866	1	16.7	12	0.2	2	1	16.7	12	0.1	1
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 Minnesota, released by CMS in 5/2009. 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 2,532 beneficiaries who were in nursing facilities for part of their enrollment and their 20,152 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, MINNESOTA, 2006

Beneficiary Characteristics	ULCER DRUGS					ANTIDEPRESSANTS					ANTHYPERLIPIDEMIC				
	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	297	50.7	3,054	0.8	\$74	449	76.6	4,393	0.9	\$45	162	27.6	1,792	0.9	\$104
Female															
All Females	139	51.3	1,424	0.8	67	205	75.6	1,975	0.9	47	79	29.2	850	0.9	114
Female, Disabled															
All Ages	129	59.2	1,354	0.8	70	175	80.3	1,843	0.9	49	73	33.5	800	0.9	119
64 or younger	128	59.8	1,342	0.8	69	173	80.8	1,839	0.9	49	72	33.6	788	0.9	120
65-74	1	25.0	12	1.0	98	2	50.0	4	0.8	30	1	25.0	12	1.6	61
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	10	18.9	70	0.8	25	30	56.6	132	0.8	22	6	11.3	50	1.0	43
64 or younger	1	4.0	2	0.5	3	16	64.0	38	0.6	30	0	0.0	0	0.0	0
65-74	6	60.0	41	0.9	23	10	100.0	53	0.8	17	4	40.0	26	0.9	62
75-84	1	16.7	12	1.0	46	1	16.7	12	1.1	8	2	33.3	24	1.0	22
85 and older	2	16.7	15	0.4	19	3	25.0	29	0.9	29	0	0.0	0	0.0	0
Male															
All Males	158	50.2	1,630	0.8	80	244	77.5	2,418	0.8	43	83	26.3	942	0.8	94
Male, Disabled															
All Ages	150	60.0	1,560	0.8	81	217	86.8	2,299	0.8	43	80	32.0	909	0.8	96
64 or younger	149	60.8	1,559	0.8	81	215	87.8	2,290	0.8	43	80	32.7	909	0.8	96
65-74	1	20.0	1	1.0	13	2	40.0	9	0.9	54	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	12.3	70	0.7	63	27	41.5	119	0.8	34	3	4.6	33	0.5	34
64 or younger	0	0.0	0	0.0	0	17	41.5	41	0.8	27	0	0.0	0	0.0	0
65-74	6	46.2	46	0.8	86	6	46.2	53	0.7	35	3	23.1	33	0.5	34
75-84	1	20.0	12	0.9	38	2	40.0	16	1.0	31	0	0.0	0	0.0	0
85 and older	1	16.7	12	0.3	2	2	33.3	9	1.0	61	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 Minnesota, released by CMS in 5/2009. 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 2,532 beneficiaries who were in nursing facilities for part of their enrollment and their 20,152 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, MINNESOTA, 2006

Beneficiary Characteristics	ANTIDIABETIC					ANTIASTHMATIC					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	259	44.2	2,815	1.0	\$63	254	43.3	2,607	0.7	\$61	302	51.5	3,013	1.2	\$38
Female															
All Females	132	48.7	1,385	1.1	64	117	43.2	1,186	0.7	76	129	47.6	1,265	1.1	41
Female, Disabled															
All Ages	124	56.9	1,328	1.1	59	108	49.5	1,145	0.7	77	118	54.1	1,228	1.1	39
64 or younger	118	55.1	1,256	1.1	59	107	50.0	1,143	0.7	77	117	54.7	1,227	1.1	39
65-74	6	150.0	72	1.2	68	1	25.0	2	1.5	95	1	25.0	1	2.0	34
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	8	15.1	57	1.3	173	9	17.0	41	0.8	51	11	20.8	37	1.8	122
64 or younger	0	0.0	0	0.0	0	1	4.0	2	0.5	60	4	16.0	8	0.5	3
65-74	7	70.0	52	1.3	183	8	80.0	39	0.8	51	7	70.0	29	2.2	155
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	8.3	5	1.4	73	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male															
All Males	127	40.3	1,430	1.0	62	137	43.5	1,421	0.6	49	173	54.9	1,748	1.2	36
Male, Disabled															
All Ages	120	48.0	1,349	1.0	63	131	52.4	1,388	0.6	50	158	63.2	1,638	1.2	35
64 or younger	119	48.6	1,348	1.0	63	131	53.5	1,388	0.6	50	156	63.7	1,634	1.2	35
65-74	1	20.0	1	2.0	145	0	0.0	0	0.0	0	2	40.0	4	0.8	17
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	7	10.8	81	1.0	46	6	9.2	33	0.6	13	15	23.1	110	1.1	48
64 or younger	0	0.0	0	0.0	0	4	9.8	9	0.9	35	6	14.6	20	0.4	2
65-74	5	38.5	57	1.2	60	0	0.0	0	0.0	0	7	53.8	74	1.5	70
75-84	2	40.0	24	0.4	12	2	40.0	24	0.5	5	2	40.0	16	0.3	3
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2006 file for Minnesota, released by CMS in 5/2009. 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 2,532 beneficiaries who were in nursing facilities for part of their enrollment and their 20,152 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, MINNESOTA, 2006

Beneficiary Characteristics	ANTIVIRAL					MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL					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	62	10.6	674	0.3	\$148	55	9.4	568	0.5	\$171	586	5,312
Female												
All Females	30	11.1	319	0.1	7	26	9.6	255	0.6	316	271	2,513
Female, Disabled												
All Ages	30	13.8	319	0.1	7	23	10.6	242	0.6	332	218	2,327
64 or younger	30	14.0	319	0.1	7	23	10.7	242	0.6	332	214	2,300
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	4	27
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Female, Other Eligibles												
All Ages	0	0.0	0	0.0	0	3	5.7	13	0.5	19	53	186
64 or younger	0	0.0	0	0.0	0	2	8.0	7	0.6	27	25	52
65-74	0	0.0	0	0.0	0	1	10.0	6	0.3	11	10	48
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	6	18
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	12	68
Male												
All Males	32	10.2	355	0.5	274	29	9.2	313	0.5	53	315	2,799
Male, Disabled												
All Ages	27	10.8	311	0.5	310	26	10.4	294	0.5	56	250	2,545
64 or younger	27	11.0	311	0.5	310	26	10.6	294	0.5	56	245	2,531
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	5	14
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Male, Other Eligibles												
All Ages	5	7.7	44	0.2	17	3	4.6	19	0.4	16	65	254
64 or younger	0	0.0	0	0.0	0	1	2.4	1	1.0	66	41	91
65-74	4	30.8	38	0.2	19	0	0.0	0	0.0	0	13	92
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	5	35
85 and older	1	16.7	6	0.2	3	2	33.3	18	0.3	13	6	36
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 Minnesota, released by CMS in 5/2009. 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 2,532 beneficiaries who were in nursing facilities for part of their enrollment and their 20,152 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}
 MINNESOTA, 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	53,029	13.4	0.8	314,449	\$14	\$5,507,082	\$18	2.8	394,545
Age									
5 and younger	8,283	9.5	0.2	21,772	8	735,029	34	9.1	87,566
6-14	7,240	7.4	0.3	25,877	8	787,745	30	3.2	97,551
15-20	6,077	9.3	0.4	24,123	7	477,654	20	1.9	65,247
21-44	16,962	15.1	0.9	96,604	14	1,564,583	16	2.4	112,140
45-64	13,945	45.7	4.7	143,251	63	1,915,749	13	2.7	30,498
65-74	384	33.0	1.7	1,989	17	20,151	10	3.6	1,165
75-84	76	30.3	1.5	370	9	2,275	6	3.4	251
85 and older	58	49.2	3.9	459	33	3,877	8	11.2	118
Unknown	4	44.4	0.4	4	2	19	5	0.7	9
Basis of Eligibility^c									
Aged	459	33.0	1.7	2,372	14	19,367	8	3.7	1,393
Disabled	26,283	46.6	4.6	257,638	63	3,569,482	14	2.3	56,402
Adults	11,208	9.8	0.2	24,224	7	812,992	34	5.2	113,846
Children	14,980	6.7	0.1	29,852	5	1,098,644	37	5.4	222,439
Unknown	99	21.3	0.8	363	14	6,597	18	1.9	465
Gender									
Female	32,639	14.4	0.9	194,900	15	3,460,257	18	3.4	226,209
Male	20,390	12.1	0.7	119,549	12	2,046,825	17	2.2	168,336
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Race									
White	26,568	13.2	1.0	202,217	14	2,748,252	14	2.1	200,796
African American	11,123	12.7	0.5	48,066	5	469,073	10	1.8	87,461
Other/unknown	15,338	14.4	0.6	64,166	22	2,289,757	36	6.0	106,288
Use of Nursing Facilities^d									
Entire year	492	84.0	20.2	11,810	201	117,721	10	3.2	586
Part year	1,550	61.2	7.5	18,946	101	255,411	13	3.0	2,532
None	50,987	13.0	0.7	283,693	13	5,133,950	18	2.8	391,427
Maintenance Assistance Status									
Cash	41,887	14.7	0.9	257,219	16	4,530,511	18	3.0	285,425
Medically needy	1,093	14.5	0.9	7,017	12	87,982	13	2.2	7,515
Poverty related	2,849	7.7	0.3	10,543	5	201,430	19	3.1	37,169
Other/unknown	7,200	11.2	0.6	39,670	11	687,159	17	2.1	64,436

Source: Data for this table are from the MAX 2006 file for Minnesota, released by CMS in 5/2009. 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.

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

TABLE ND.12
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
 AMONG NONDUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a,b}
 MINNESOTA, 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	0.2	\$3	\$18	\$0	\$1	1,756,585
Age						
5 and younger	0.1	2	34	0	0	323,909
6-14	0.1	2	30	0	0	421,273
15-20	0.1	2	20	0	0	291,474
21-44	0.2	3	16	0	1	480,625
45-64	0.6	8	13	0	2	233,677
65-74	0.5	5	10	0	0	4,137
75-84	0.4	3	6	0	0	905
85 and older	0.8	7	8	0	0	555
Unknown	0.1	1	5	0	0	30
Basis of Eligibility^c						
Aged	0.5	4	8	0	0	4,976
Disabled	0.4	6	14	0	1	575,277
Adults	0.1	2	34	0	1	376,557
Children	0.0	1	37	0	0	796,375
Unknown	0.1	2	18	0	0	3,400
Gender						
Female	0.2	4	18	0	1	970,435
Male	0.2	3	17	0	0	786,150
Unknown	0.0	0	0	0	0	0
Race						
White	0.2	3	14	0	1	929,480
African American	0.1	1	10	0	0	339,783
Other/unknown	0.1	5	36	0	1	487,322
Use of Nursing Facilities^d						
Entire year	2.2	22	10	0	5	5,312
Part year	0.9	13	13	0	3	20,152
None	0.2	3	18	0	1	1,731,121
Maintenance Assistance Status						
Cash	0.2	4	18	0	1	1,281,764
Medically needy	0.2	3	13	0	1	30,171
Poverty related	0.1	1	19	0	0	153,665
Other/unknown	0.1	2	17	0	0	290,985

Source: Data for this table are from the MAX 2006 file for Minnesota, released by CMS in 5/2009. 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}
 MINNESOTA, 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	Total Number Rx. \$ per Rx
All	65,583	\$84	\$5,507,082	100.0	314,449	\$18	100.0
Anorexia or weight loss/gain	0	0	0	0.0	0	0	0.0
Fertility drugs	1	50	50	0.0	1	50	0.0
Drugs for cosmetic purposes	163	12	1,876	0.0	209	9	0.1
Cough and cold medications	3,060	77	237,035	4.3	5,934	40	1.9
Vitamins and minerals	4,271	104	444,436	8.1	24,145	18	7.7
Non-prescription drugs	44,282	67	2,962,500	53.8	210,852	14	67.1
Barbiturates	508	79	40,181	0.7	4,501	9	1.4
Benzodiazepines	12,005	91	1,096,068	19.9	62,664	17	19.9
Other Part D Excl Rx Drugs	1,293	561	724,936	13.2	6,143	118	2.0

Source: Data for this table are from the MAX 2006 file for Minnesota, released by CMS in 5/2009. 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, MINNESOTA, 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	623,418	2,749	57,663	174,365	388,175	466	5,671,547	28,065	612,064	1,413,561	3,614,405	3,452
Age												
5 and younger	154,726	0	3,407	3	151,316	0	1,386,532	0	36,071	32	1,350,429	0
6-14	158,215	0	9,347	22	148,846	0	1,576,635	0	104,657	201	1,471,777	0
15-20	101,268	0	6,934	12,109	82,205	20	929,512	0	75,746	90,848	762,792	126
21-44	163,872	0	17,179	140,655	5,788	250	1,358,254	0	180,346	1,146,948	29,338	1,622
45-64	42,348	3	20,623	21,528	0	194	390,526	25	213,648	175,167	0	1,686
65-74	2,133	1,917	168	46	0	2	21,697	19,776	1,553	350	0	18
75-84	586	582	3	1	0	0	6,040	5,995	36	9	0	0
85 and older	249	247	1	1	0	0	2,276	2,269	1	6	0	0
Unknown	21	0	1	0	20	0	75	0	6	0	69	0
Gender												
Female	353,603	1,533	27,740	132,830	191,034	466	3,203,296	15,777	298,789	1,102,129	1,783,149	3,452
Male	269,815	1,216	29,923	41,535	197,141	0	2,468,251	12,288	313,275	311,432	1,831,256	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	331,412	613	34,416	108,879	187,199	305	2,982,105	6,152	366,509	863,714	1,743,181	2,549
African American	122,558	1,248	12,098	32,315	76,874	23	1,149,755	12,843	125,912	281,461	729,362	177
Other/unknown	169,448	888	11,149	33,171	124,102	138	1,539,687	9,070	119,643	268,386	1,141,862	726
Use of Nursing Facilities^c												
Entire year	692	123	488	27	54	0	6,572	1,226	5,127	66	153	0
Part year	2,755	68	1,604	513	567	3	26,562	568	16,320	4,610	5,033	31
None	619,971	2,558	55,571	173,825	387,554	463	5,638,413	26,271	590,617	1,408,885	3,609,219	3,421
Maintenance Assistance Status												
Cash	397,334	1,962	42,487	120,056	232,829	0	3,714,468	21,352	467,762	1,017,004	2,208,350	0
Medically needy	8,572	150	1,766	5,304	1,352	0	56,072	1,082	13,663	37,346	3,981	0
Poverty related	51,443	71	1,641	4,664	44,601	466	470,306	677	15,644	29,279	421,254	3,452
Other/unknown	166,069	566	11,769	44,341	109,393	0	1,430,701	4,954	114,995	329,932	980,820	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	135,854	323	50,462	32,802	51,819	448	1,049,484	1,853	541,793	154,807	347,719	3,312
FFS part year, with Rx claims	77,553	639	4,741	33,880	38,285	8	776,559	6,679	49,299	328,873	391,629	79
FFS part year, no Rx claims	181,138	431	1,199	47,164	132,335	9	1,763,573	4,465	11,717	431,426	1,315,905	60
MC all year, with Rx claims	643	32	38	181	392	0	6,052	343	211	1,667	3,831	0
MC all year, no Rx claims	228,230	1,324	1,223	60,338	165,344	1	2,075,879	14,725	9,044	496,788	1,555,321	1

Source: Data for this table are from the MAX 2006 file for Minnesota, released by CMS in 5/2009. 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, MINNESOTA, 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		Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months
	Number of Beneficiaries	Number of Benefit Months				
All	623,418	5,671,547	394,545	1,756,585	0	3,914,962
Fee-for-service (FFS) all year	135,854	1,049,484	135,854	1,049,484	0	0
FFS part year, with Rx claims	77,553	776,559	77,553	258,668	0	517,891
FFS part year, with no Rx claims	181,138	1,763,573	181,138	448,433	0	1,315,140
Managed care (MC) all year, with Rx claims	643	6,052	0	0	0	6,052
MC all year, with no Rx claims	228,230	2,075,879	0	0	0	2,075,879

Source: Data for this table are from the MAX 2006 file for Minnesota, released by CMS in 5/2009. 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