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

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TABLE ND.2
CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a, b}
NONDUAL BENEFICIARIES, MONTANA, 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	81,374	123	11,557	8,596	61,070	28	725,076	586	116,770	61,234	546,282	204
Age												
5 and younger	27,402	0	667	1	26,734	0	241,141	0	6,739	1	234,401	0
6-14	24,525	0	1,222	0	23,303	0	230,992	0	13,325	0	217,667	0
15-20	13,040	0	1,130	1,014	10,892	4	111,480	0	11,995	5,839	93,638	8
21-44	10,764	2	3,193	7,420	141	8	86,715	13	32,184	53,887	576	55
45-64	5,478	9	5,295	159	0	15	54,021	104	52,296	1,483	0	138
65-74	74	23	49	1	0	1	325	80	230	12	0	3
75-84	31	30	0	1	0	0	142	130	0	12	0	0
85 and older	60	59	1	0	0	0	260	259	1	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	44,352	65	5,788	7,984	30,487	28	387,636	317	59,407	55,256	272,452	204
Male	37,022	58	5,769	612	30,583	0	337,440	269	57,363	5,978	273,830	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	56,226	106	9,093	6,338	40,661	28	490,430	456	90,806	43,865	355,099	204
African American	913	0	105	55	753	0	8,317	0	1,041	371	6,905	0
Other/unknown	24,235	17	2,359	2,203	19,656	0	226,329	130	24,923	16,998	184,278	0
Use of Nursing Facilities^c												
Entire year	144	24	120	0	0	0	1,494	186	1,308	0	0	0
Part year	251	6	237	7	1	0	2,518	39	2,385	82	12	0
None	80,979	93	11,200	8,589	61,069	28	721,064	361	113,077	61,152	546,270	204
Maintenance Assistance Status												
Cash	29,605	30	10,312	1,977	17,286	0	284,478	201	107,423	17,551	159,303	0
Medically needy	696	71	599	21	5	0	3,999	279	3,685	30	5	0
Poverty-related	33,290	0	0	4,424	28,838	28	277,311	0	0	24,726	252,381	204
Other/unknown	17,783	22	646	2,174	14,941	0	159,288	106	5,662	18,927	134,593	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	81,373	123	11,556	8,596	61,070	28	725,074	586	116,768	61,234	546,282	204
FFS part year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
FFS part year, no Rx claims	1	0	1	0	0	0	2	0	2	0	0	0

Source: Data for this table are from the MAX 2006 file for Montana, 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.

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

TABLE ND.3
ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC^{a, b}
NONDUAL BENEFICIARIES, MONTANA, 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	56.4	7.1	\$560	\$79	\$4,359	12.8	81,374
Age							
5 and younger	54.4	2.4	106	45	2,310	4.6	27,402
6-14	49.4	3.9	352	91	3,010	11.7	24,525
15-20	55.9	5.8	482	84	4,756	10.1	13,040
21-44	69.5	12.7	1,124	89	7,393	15.2	10,764
45-64	74.7	37.9	2,836	75	13,567	20.9	5,478
65-74	47.3	9.0	817	91	8,823	9.3	74
75-84	22.6	0.9	32	37	9,732	0.3	31
85 and older	13.3	1.4	60	44	11,409	0.5	60
Unknown	0.0	0.0	0	0	0	0.0	0
Basis of Eligibility^e							
Aged	20.3	4.8	232	48	10,441	2.2	123
Disabled	72.7	28.1	2,608	93	14,119	18.5	11,557
Adults	68.3	7.3	405	56	4,907	8.2	8,596
Children	51.8	3.1	194	62	2,417	8.0	61,070
Unknown	75.0	25.4	2,304	91	14,332	16.1	28
Gender							
Female	58.6	7.9	549	69	4,306	12.7	44,352
Male	53.9	6.2	572	93	4,422	12.9	37,022
Unknown	0.0	0.0	0	0	0	0.0	0
Race							
White	62.7	8.6	677	79	4,465	15.2	56,226
African American	60.9	5.9	422	72	3,410	12.4	913
Other/unknown	41.8	3.8	292	76	4,148	7.0	24,235
Use of Nursing Facilities^f							
Entire year	87.5	64.7	4,676	72	54,005	8.7	144
Part year	94.0	65.2	5,134	79	54,957	9.3	251
None	56.3	6.8	538	79	4,113	13.1	80,979
Maintenance Assistance Status							
Cash	57.3	11.7	1,025	88	6,124	16.7	29,605
Medically needy	60.6	21.8	1,659	76	19,919	8.3	696
Poverty related	53.3	2.9	146	51	1,968	7.4	33,290
Other/unknown	60.9	6.9	517	75	5,287	9.8	17,783

Source: Data for this table are from the MAX 2006 file for Montana, 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.

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

TABLE ND.4
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a, b}
 NONDUAL BENEFICIARIES, MONTANA, 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	0.8	\$63	12.8	43.6	44.2	4.7	4.9	2.1	0.6	\$489	81,374	725,076	
Age													
5 and younger	0.3	12	4.6	45.6	52.2	1.6	0.5	0.1	0.0	263	27,402	241,141	
6-14	0.4	37	11.7	50.6	42.1	3.9	3.1	0.3	0.0	320	24,525	230,992	
15-20	0.7	56	10.1	44.1	43.7	6.2	5.0	0.9	0.1	556	13,040	111,480	
21-44	1.6	140	15.2	30.5	43.4	10.2	10.5	4.5	1.0	918	10,764	86,715	
45-64	3.8	288	20.9	25.3	17.6	9.4	22.7	18.1	6.8	1,376	5,478	54,021	
65-74	2.0	186	9.3	52.7	12.2	8.1	17.6	6.8	2.7	2,009	74	325	
75-84	0.2	7	0.3	77.4	16.1	3.2	3.2	0.0	0.0	2,125	31	142	
85 and older	0.3	14	0.5	86.7	11.7	0.0	1.7	0.0	0.0	2,633	60	260	
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	1.0	49	2.2	79.7	11.4	1.6	4.9	1.6	0.8	2,192	123	586	
Disabled	2.8	258	18.5	27.3	26.7	10.0	19.7	12.2	4.1	1,397	11,557	116,770	
Adults	1.0	57	8.2	31.7	50.1	9.7	6.6	1.8	0.1	689	8,596	61,234	
Children	0.4	22	8.0	48.2	46.7	3.0	1.8	0.2	0.0	270	61,070	546,282	
Unknown	3.5	316	16.1	25.0	32.1	10.7	10.7	14.3	7.1	1,967	28	204	
Gender													
Female	0.9	63	12.7	41.4	45.2	5.0	5.0	2.5	0.8	493	44,352	387,636	
Male	0.7	63	12.9	46.1	42.9	4.3	4.7	1.6	0.4	485	37,022	337,440	
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0	
Race													
White	1.0	78	15.2	37.3	47.7	5.6	6.0	2.7	0.8	512	56,226	490,430	
African American	0.6	46	12.4	39.1	50.2	4.9	4.4	1.0	0.4	374	913	8,317	
Other/unknown	0.4	31	7.0	58.2	35.8	2.6	2.3	0.8	0.3	444	24,235	226,329	
Use of Nursing Facilities^f													
Entire year	6.2	451	8.7	12.5	6.3	4.9	26.4	36.8	13.2	5,205	144	1,494	
Part year	6.5	512	9.3	6.0	11.6	12.7	20.3	31.1	18.3	5,478	251	2,518	
None	0.8	60	13.1	43.7	44.4	4.7	4.8	1.9	0.5	462	80,979	721,064	
Maintenance Assistance Status													
Cash	1.2	107	16.7	42.7	38.2	5.5	8.0	4.2	1.3	637	29,605	284,478	
Medically needy	3.8	289	8.3	39.4	12.4	7.3	21.4	14.5	5.0	3,467	696	3,999	
Poverty related	0.3	18	7.4	46.7	48.0	3.4	1.7	0.1	0.0	236	33,290	277,311	
Other/unknown	0.8	58	9.8	39.1	48.4	5.6	4.8	1.7	0.3	590	17,783	159,288	

Source: Data for this table are from the MAX 2006 file for Montana, 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, MONTANA, 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	\$63	\$79	0.3	\$45	\$175	0.0	\$5	\$109	0.5	\$13	\$26
Age												
5 and younger	0.3	12	45	0.1	8	135	0.0	1	46	0.2	4	19
6-14	0.4	37	91	0.2	32	157	0.0	1	69	0.2	5	23
15-20	0.7	56	84	0.3	45	172	0.0	3	83	0.4	9	24
21-44	1.6	140	89	0.4	100	227	0.1	11	127	1.0	28	27
45-64	3.8	288	75	1.1	179	165	0.2	31	141	2.5	78	31
65-74	2.0	186	91	0.5	118	221	0.1	14	105	1.4	53	39
75-84	0.2	7	37	0.1	5	62	0.0	0	0	0.1	2	17
85 and older	0.3	14	44	0.1	10	146	0.0	0	0	0.3	4	17
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility^d												
Aged	1.0	49	48	0.3	26	96	0.1	3	54	0.7	19	28
Disabled	2.8	258	93	0.9	184	209	0.2	21	137	1.7	53	31
Adults	1.0	57	56	0.2	36	152	0.1	6	102	0.7	15	21
Children	0.4	22	62	0.1	16	129	0.0	1	59	0.2	4	21
Unknown	3.5	316	91	1.1	177	166	0.2	60	287	2.2	79	36
Gender												
Female	0.9	63	69	0.3	43	161	0.0	5	106	0.6	15	25
Male	0.7	63	93	0.2	48	191	0.0	4	113	0.4	11	29
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Race												
White	1.0	78	79	0.3	55	172	0.1	6	111	0.6	16	27
African American	0.6	46	72	0.2	36	145	0.0	2	65	0.4	8	23
Other/unknown	0.4	31	76	0.1	22	194	0.0	2	99	0.3	7	25
Use of Nursing Facilities^e												
Entire year	6.2	451	72	1.7	281	163	0.5	50	104	4.0	120	30
Part year	6.5	512	79	1.7	319	188	0.4	49	139	4.4	143	32
None	0.8	60	79	0.2	43	174	0.0	4	108	0.5	13	26
Maintenance Assistance Status												
Cash	1.2	107	88	0.4	77	201	0.1	8	122	0.8	22	29
Medically needy	3.8	289	76	1.1	185	170	0.2	30	138	2.5	74	30
Poverty related	0.3	18	51	0.1	12	116	0.0	1	66	0.2	4	19
Other/unknown	0.8	58	75	0.3	42	149	0.0	4	100	0.4	11	26

Source: Data for this table are from the MAX 2006 file for Montana, 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 Montana, 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, MONTANA, 2006

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per Rx				Users ^e				
	Patented Brand-Name		Off-Patent Brand-Name		Patented Brand-Name		Off-Patent Brand-Name		Patented Brand-Name		Off-Patent Brand-Name		Total Number of Rx	Total Rx \$	Number of Users	As a Percentage of All Benes	Number of Benefit Months
	Total	Generic	Total	Generic	Total	Generic	Total	Generic	Total	Generic							
Anti-infective Agents	0.2	0.0	0.0	0.2	\$10	\$5	\$1	\$4	\$46	\$196	\$49	\$25	68,556	\$3,133,375	29,729	36.5	305,663
Biologicals	0.2	0.2	0.0	0.0	208	204	4	0	888	906	1,406	40	450	399,408	199	0.2	1,917
Antineoplastic Agents	0.6	0.2	0.0	0.4	149	128	0	21	261	830	188	50	1,370	357,646	228	0.3	2,398
Endocrine/Metabolic Drugs	0.5	0.2	0.0	0.3	30	20	1	9	54	110	45	26	48,529	2,628,723	8,736	10.7	88,308
Cardiovascular Agents	1.0	0.2	0.1	0.8	42	16	12	14	41	83	121	19	56,470	2,291,220	5,087	6.3	54,157
Respiratory Agents	0.4	0.2	0.0	0.2	25	22	0	3	65	113	50	18	59,571	3,870,640	14,530	17.9	152,040
Gastrointestinal Agents	0.4	0.2	0.0	0.3	37	27	6	5	88	171	370	20	19,516	1,717,179	4,452	5.5	46,026
Genitourinary Agents	0.3	0.1	0.0	0.2	16	11	2	4	56	88	77	28	7,195	402,378	2,461	3.0	24,665
CNS Drugs	1.0	0.4	0.1	0.5	119	96	8	15	117	213	99	32	109,360	12,809,180	10,287	12.6	107,256
Stimulants/Anti-obesity/Anorexia	0.7	0.6	0.0	0.1	76	72	1	4	103	115	73	36	30,141	3,092,429	3,787	4.7	40,426
Miscellaneous Psychological/Neurological Agents	0.4	0.3	0.0	0.0	201	196	0	4	538	585	0	118	1,275	686,497	321	0.4	3,423
Analgesics and Anesthetics	0.5	0.0	0.0	0.5	30	10	6	14	56	244	342	29	70,880	3,951,542	13,187	16.2	131,536
Neuromuscular Agents	0.8	0.4	0.0	0.5	83	60	2	21	98	167	86	45	51,009	4,992,338	5,614	6.9	60,191
Nutritional Products	0.3	0.0	0.0	0.3	4	0	0	3	14	24	17	13	18,432	256,613	6,644	8.2	67,103
Hematological Agents	0.6	0.1	0.0	0.4	325	314	1	9	584	2,344	26	24	5,841	3,413,787	1,061	1.3	10,519
Topical Products	0.2	0.1	0.0	0.1	7	4	0	3	39	84	49	20	29,919	1,154,130	15,332	18.8	159,255
Miscellaneous Products	0.6	0.2	0.1	0.3	181	131	14	36	300	573	248	114	1,162	348,999	184	0.2	1,924
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	9	0	0	0	54	0	0	0	455	24,479	260	0.3	2,715
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.	580,131	45,530,563	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2006 file for Montana, 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 Montana, 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, MONTANA, 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	\$9,072,750	5,263	6.5	57,955	0.6	\$242	\$157
ANTICONVULSANT	4,439,191	4,623	5.7	50,426	0.7	121	88
ANTIDEPRESSANTS	3,247,424	9,456	11.6	99,980	0.5	63	32
STIMULANTS/ANTI-OBESITY/ANOREXIANTS	3,092,429	4,356	5.4	46,785	0.6	103	66
ANTIASTHMATIC	2,888,363	12,812	15.7	135,696	0.3	73	21
ANALGESICS - Narcotic	2,672,747	15,985	19.6	161,256	0.3	49	17
MISC. HEMATOLOGICAL	2,377,620	218	0.3	2,222	0.6	1,938	1,070
ANTIDIABETIC	1,204,412	2,254	2.8	23,851	0.7	75	50
ULCER DRUGS	1,096,486	4,884	6.0	51,513	0.4	50	21
ANTHYPERLIPIDEMIC	1,060,820	1,654	2.0	18,213	0.6	98	58
Total	31,152,242	61,505	n.a.	647,897	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2006 file for Montana, 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, MONTANA, 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	299,634	\$31,152,242	5,263	6.5	57,955	0.6	\$157	4,623	5.7	50,426	0.7	\$88			
Female															
All Females	171,797	14,914,756	2,555	5.8	27,890	0.6	141	2,714	6.1	29,434	0.7	83			
Female, Disabled															
All Ages	113,475	10,765,103	1,592	27.5	17,726	0.7	167	1,886	32.6	20,793	0.7	83			
5 and younger	675	60,740	3	1.1	27	0.7	100	32	11.5	359	0.7	81			
6-14	2,947	387,771	77	19.6	897	0.8	185	89	22.7	1,040	0.8	109			
15-20	4,426	498,972	149	35.2	1,725	0.6	132	99	23.4	1,135	0.7	81			
21-44	30,556	3,148,753	576	34.9	6,278	0.6	164	655	39.6	7,096	0.7	92			
45-64	74,728	6,657,151	786	26.1	8,797	0.7	173	1,008	33.5	11,152	0.7	75			
65-74	143	11,716	1	3.3	2	0.5	18	3	10.0	11	0.4	23			
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0			
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0			
Female, Other Eligibles															
All Ages	58,322	4,149,653	963	2.5	10,164	0.5	97	828	2.1	8,641	0.6	84			
5 and younger	4,138	282,165	13	0.1	145	0.7	177	43	0.3	455	0.6	101			
6-14	15,824	1,444,358	293	2.6	3,258	0.6	114	173	1.5	1,876	0.7	104			
15-20	15,812	1,152,087	388	5.6	4,060	0.5	86	242	3.5	2,516	0.6	71			
21-44	21,030	1,148,155	238	3.4	2,364	0.5	86	351	5.0	3,578	0.6	82			
45-64	1,405	116,141	29	27.1	313	0.6	109	18	16.8	204	0.7	42			
65-74	41	2,959	0	0.0	0	0.0	0	1	8.3	12	2.3	222			
75-84	2	19	0	0.0	0	0.0	0	0	0.0	0	0.0	0			
85 and older	70	3,769	2	5.9	24	0.5	84	0	0.0	0	0.0	0			
Male															
All Males	127,837	16,237,486	2,708	7.3	30,065	0.7	171	1,909	5.2	20,992	0.8	95			
Male, Disabled															
All Ages	69,558	10,156,969	1,544	26.8	17,166	0.7	193	1,194	20.7	13,061	0.7	85			
5 and younger	1,001	151,992	5	1.3	60	0.3	81	30	7.7	355	0.8	122			
6-14	8,212	2,006,535	331	39.9	3,764	0.6	153	158	19.0	1,778	0.7	96			
15-20	7,582	1,547,942	267	37.8	3,011	0.7	173	128	18.1	1,446	0.9	138			
21-44	17,450	2,864,613	522	33.9	5,777	0.7	225	395	25.6	4,190	0.7	85			
45-64	35,199	3,572,199	418	18.3	4,547	0.7	201	480	21.0	5,276	0.7	65			
65-74	114	13,688	1	5.3	7	0.6	9	3	15.8	16	0.6	80			
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, MONTANA, 2006

Beneficiary Characteristics	All Top 10 Drug Groups			ANTIPSYCHOTICS					ANTICONVULSANT				
	Number of Rx	Rx \$	Number of Users	Users	Number of	Mean	Mean Rx \$	Number of Users	Users	Number of	Mean	Mean Rx \$	
				as %		Benefit Months			Rx per		as %		Benefit Months
				of All	Among Users	Benefit	per Benefit		of All	Among Users	Benefit	per Benefit	
				Benes		Month	Month		Benes		Month	Month	
Male, Other Eligibles													
All Ages	58,279	6,080,517	1,164	3.7	12,899	0.7	141	715	2.3	7,931	0.8	111	
5 and younger	7,130	465,180	24	0.2	278	0.5	105	69	0.5	764	0.5	60	
6-14	29,922	3,030,661	617	5.2	6,861	0.6	129	277	2.3	3,040	0.7	93	
15-20	13,723	1,627,551	400	8.0	4,315	0.7	130	179	3.6	1,888	0.7	87	
21-44	6,170	792,176	110	19.1	1,289	0.9	227	169	29.4	1,996	1.1	164	
45-64	1,306	164,033	13	17.1	156	1.1	323	20	26.3	231	1.3	244	
65-74	1	9	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
75-84	15	655	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
85 and older	12	252	0	0.0	0	0.0	0	1	4.0	12	0.5	10	
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 Montana, 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>.

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, MONTANA, 2006

Beneficiary Characteristics	ANTIDEPRESSANTS					STIMULANTS/ANTI-OBESITY/ANOREXIANTS					ANTIASTHMATIC				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month		Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of 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	
				Rx per Month	Mean Rx \$ Benefit				Rx per Month	Mean Rx \$ Benefit				Rx per Month	Mean Rx \$ Benefit
All	9,456	11.6	99,980	0.5	\$33	4,356	5.4	46,785	0.6	\$66	12,812	15.7	135,696	0.3	\$21
Female															
All Females	6,485	14.6	67,851	0.5	32	1,377	3.1	14,916	0.6	63	6,670	15.0	70,302	0.3	22
Female, Disabled															
All Ages	3,366	58.2	37,498	0.6	40	323	5.6	3,658	0.7	83	2,415	41.7	26,834	0.4	36
5 and younger	1	0.4	12	0.2	3	1	0.4	3	1.3	159	102	36.6	1,106	0.3	20
6-14	67	17.1	771	0.5	21	71	18.1	835	0.7	72	66	16.8	753	0.3	26
15-20	181	42.8	2,098	0.5	33	62	14.7	683	0.7	61	85	20.1	928	0.3	30
21-44	1,070	64.8	11,902	0.5	37	82	5.0	933	0.6	86	639	38.7	7,156	0.4	27
45-64	2,040	67.8	22,661	0.6	44	107	3.6	1,204	0.7	100	1,508	50.1	16,823	0.5	41
65-74	7	23.3	54	0.4	27	0	0.0	0	0.0	0	15	50.0	68	0.5	63
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	3,119	8.1	30,353	0.4	23	1,054	2.7	11,258	0.6	57	4,255	11.0	43,468	0.2	14
5 and younger	13	0.1	155	0.4	12	28	0.2	306	0.5	39	1,375	10.5	14,478	0.2	11
6-14	533	4.7	5,864	0.4	17	729	6.4	7,865	0.6	57	1,294	11.4	13,704	0.3	18
15-20	1,162	16.8	11,651	0.4	22	240	3.5	2,575	0.6	58	901	13.0	9,240	0.2	14
21-44	1,355	19.4	12,141	0.4	25	54	0.8	496	0.4	48	657	9.4	5,756	0.3	11
45-64	55	51.4	530	0.6	37	3	2.8	16	0.5	72	27	25.2	283	0.5	39
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	1	2.9	12	0.9	22	0	0.0	0	0.0	0	1	2.9	7	0.1	2
Male															
All Males	2,971	8.0	32,129	0.5	33	2,979	8.0	31,869	0.7	68	6,142	16.6	65,394	0.3	20
Male, Disabled															
All Ages	1,660	28.8	18,108	0.5	35	595	10.3	6,694	0.7	77	1,424	24.7	15,773	0.4	33
5 and younger	7	1.8	84	0.2	4	11	2.8	131	0.7	59	148	38.1	1,685	0.2	16
6-14	178	21.4	1,993	0.5	25	300	36.1	3,390	0.7	73	219	26.4	2,443	0.3	24
15-20	223	31.5	2,531	0.6	41	165	23.3	1,864	0.7	84	119	16.8	1,345	0.3	31
21-44	503	32.6	5,450	0.5	36	70	4.5	770	0.6	78	262	17.0	2,906	0.3	25
45-64	746	32.7	8,038	0.6	36	49	2.1	539	0.8	89	673	29.5	7,368	0.5	44
65-74	3	15.8	12	0.8	108	0	0.0	0	0.0	0	3	15.8	26	0.4	148
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, MONTANA, 2006

Beneficiary Characteristics	ANTIDEPRESSANTS					STIMULANTS/ANTI-OBESITY/ANOREXIANTS					ANTIASTHMATIC					
	Number of Users	Users	Number of	Mean		Number of Users	Users	Number of	Mean		Number of Users	Users	Number of	Mean		
		as %		Benefit Months	Rx per		Benefit per		as %	Benefit Months		Rx per		Benefit per	as %	Benefit Months
		of All	Among Users	Benefit	Mean Rx \$		of All	Among Users	Benefit	Mean Rx \$		of All	Among Users	Benefit	Mean Rx \$	
Male, Other Eligibles																
All Ages	1,311	4.2	14,021	0.5	30	2,384	7.6	25,175	0.7	65	4,718	15.1	49,621	0.2	16	
5 and younger	17	0.1	195	0.4	15	122	0.9	1,384	0.4	37	2,218	16.3	23,550	0.2	12	
6-14	683	5.7	7,400	0.5	22	1,818	15.2	19,092	0.7	65	1,865	15.6	19,605	0.3	19	
15-20	487	9.8	5,081	0.6	33	422	8.5	4,445	0.7	72	572	11.5	5,826	0.3	18	
21-44	107	18.6	1,167	0.8	50	20	3.5	230	0.8	78	52	9.0	530	0.3	29	
45-64	17	22.4	178	0.9	93	2	2.6	24	0.2	3	9	11.8	98	0.4	16	
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	7.7	2	0.5	5	
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	6.3	10	0.2	26	
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 Montana, 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>.

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

Beneficiary Characteristics	ANALGESICS - Narcotic					MISC. HEMATOLOGICAL					ANTIDIABETIC				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean		Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean		Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean	
				Rx per Benefit Month	Mean Rx \$ per Benefit Month				Rx per Benefit Month	Mean Rx \$ per Benefit Month				Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	15,985	19.6	161,256	0.3	\$17	218	0.3	2,222	0.6	\$1,070	2,254	2.8	23,851	0.7	\$51
Female															
All Females	11,372	25.6	112,331	0.3	14	109	0.2	1,153	0.6	61	1,493	3.4	15,908	0.7	49
Female, Disabled															
All Ages	4,047	69.9	44,694	0.5	31	107	1.8	1,132	0.6	61	1,182	20.4	13,074	0.7	52
5 and younger	18	6.5	186	0.1	2	0	0.0	0	0.0	0	1	0.4	11	0.1	7
6-14	41	10.5	487	0.1	2	1	0.3	9	0.4	7	5	1.3	60	0.8	78
15-20	108	25.5	1,235	0.2	6	0	0.0	0	0.0	0	20	4.7	239	0.7	90
21-44	1,329	80.4	14,669	0.5	30	7	0.4	72	0.4	47	239	14.5	2,664	0.6	43
45-64	2,538	84.3	28,051	0.6	33	99	3.3	1,051	0.6	62	906	30.1	10,053	0.7	53
65-74	13	43.3	66	0.5	32	0	0.0	0	0.0	0	11	36.7	47	0.4	35
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	7,325	19.0	67,637	0.2	3	2	0.0	21	0.7	71	311	0.8	2,834	0.6	38
5 and younger	310	2.4	3,301	0.1	1	0	0.0	0	0.0	0	6	0.0	71	0.9	57
6-14	654	5.8	7,104	0.1	1	0	0.0	0	0.0	0	45	0.4	460	0.7	70
15-20	2,125	30.6	20,395	0.2	2	0	0.0	0	0.0	0	56	0.8	552	0.4	37
21-44	4,163	59.5	36,129	0.2	4	1	0.0	9	0.3	20	184	2.6	1,589	0.5	26
45-64	69	64.5	687	0.4	19	1	0.9	12	0.9	109	18	16.8	138	0.7	65
65-74	2	16.7	15	0.1	2	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	2	13.3	6	0.3	3	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	2	5.9	24	1.8	55
Male															
All Males	4,613	12.5	48,925	0.3	22	109	0.3	1,069	0.5	2,158	761	2.1	7,943	0.7	53
Male, Disabled															
All Ages	2,383	41.3	25,775	0.5	40	105	1.8	1,026	0.5	2,006	638	11.1	6,731	0.7	51
5 and younger	37	9.5	431	0.2	2	1	0.3	4	2.3	14,100	0	0.0	0	0.0	0
6-14	79	9.5	940	0.1	1	1	0.1	12	1.2	73,821	16	1.9	176	0.6	56
15-20	158	22.3	1,796	0.2	5	2	0.3	23	0.5	21,283	15	2.1	170	0.8	51
21-44	694	45.0	7,450	0.4	23	9	0.6	105	0.6	4,833	111	7.2	1,195	0.7	51
45-64	1,408	61.6	15,108	0.6	56	91	4.0	878	0.5	135	492	21.5	5,163	0.7	51
65-74	7	36.8	50	0.5	30	1	5.3	4	0.5	61	4	21.1	27	1.1	98
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, MONTANA, 2006

Beneficiary Characteristics	ANALGESICS - Narcotic					MISC. HEMATOLOGICAL					ANTIDIABETIC				
	Number of Users	Users	Number of Benefit Months Among Users	Mean		Number of Users	Users	Number of Benefit Months Among Users	Mean		Number of Users	Users	Number of Benefit Months Among Users	Mean	
		as % of All Benes		Rx per Benefit Month	Mean Rx \$ per Benefit Month		as % of All Benes		Rx per Benefit Month	Mean Rx \$ per Benefit Month		as % of All Benes		Rx per Benefit Month	Mean Rx \$ per Benefit Month
Male, Other Eligibles															
All Ages	2,230	7.1	23,150	0.1	3	4	0.0	43	0.6	5,790	123	0.4	1,212	0.8	61
5 and younger	457	3.4	4,941	0.1	1	0	0.0	0	0.0	0	11	0.1	108	0.6	38
6-14	681	5.7	7,362	0.1	1	0	0.0	0	0.0	0	49	0.4	511	0.7	57
15-20	901	18.1	8,999	0.2	2	2	0.0	23	0.7	10,781	34	0.7	314	0.8	81
21-44	170	29.6	1,631	0.3	11	1	0.2	12	0.4	56	12	2.1	111	1.0	60
45-64	21	27.6	217	0.5	34	1	1.3	8	0.4	41	17	22.4	168	0.9	50
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
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 Montana, 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>.

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, MONTANA, 2006

Beneficiary Characteristics	ULCER DRUGS					ANTHYPERLIPIDEMIC					Number of Beneficiaries	Number of Benefit Months
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean		Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean			
				Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month				Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month		
All	4,884	6.0	51,513	0.4	\$21	1,654	2.0	18,213	0.6	\$58	81,374	725,076
Female												
All Females	3,222	7.3	33,839	0.4	21	1,036	2.3	11,553	0.6	59	44,352	387,636
Female, Disabled												
All Ages	1,782	30.8	19,904	0.5	27	937	16.2	10,587	0.6	62	5,788	59,407
5 and younger	28	10.0	314	0.3	18	3	1.1	30	0.1	1	279	2,784
6-14	25	6.4	292	0.3	24	1	0.3	12	0.3	3	392	4,366
15-20	51	12.1	596	0.4	17	5	1.2	60	0.7	45	423	4,493
21-44	471	28.5	5,268	0.5	20	144	8.7	1,659	0.5	53	1,652	16,924
45-64	1,201	39.9	13,393	0.6	31	780	25.9	8,802	0.6	64	3,011	30,703
65-74	6	20.0	41	0.3	15	4	13.3	24	0.5	59	30	136
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	1
Female, Other Eligibles												
All Ages	1,440	3.7	13,935	0.2	12	99	0.3	966	0.3	22	38,564	328,229
5 and younger	243	1.9	2,206	0.2	13	50	0.4	456	0.1	2	13,129	115,150
6-14	217	1.9	2,385	0.2	14	3	0.0	34	0.2	11	11,334	105,946
15-20	345	5.0	3,529	0.2	8	5	0.1	55	0.2	8	6,937	56,771
21-44	608	8.7	5,531	0.3	12	24	0.3	238	0.5	44	6,996	49,132
45-64	25	23.4	263	0.6	36	17	15.9	183	0.5	51	107	957
65-74	1	8.3	12	1.0	22	0	0.0	0	0.0	0	12	70
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	15	58
85 and older	1	2.9	9	0.4	18	0	0.0	0	0.0	0	34	145
Male												
All Males	1,662	4.5	17,674	0.5	22	618	1.7	6,660	0.6	58	37,022	337,440
Male, Disabled												
All Ages	962	16.7	10,497	0.5	26	488	8.5	5,273	0.7	64	5,769	57,363
5 and younger	39	10.1	418	0.4	27	1	0.3	12	0.1	0	388	3,955
6-14	34	4.1	396	0.4	27	1	0.1	12	0.1	2	830	8,959
15-20	63	8.9	687	0.5	20	10	1.4	112	0.4	42	707	7,502
21-44	248	16.1	2,700	0.5	28	88	5.7	980	0.7	62	1,541	15,260
45-64	577	25.3	6,289	0.5	25	384	16.8	4,136	0.7	66	2,284	21,593
65-74	1	5.3	7	0.4	49	4	21.1	21	0.9	117	19	94
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, MONTANA, 2006

Beneficiary Characteristics	ULCER DRUGS						ANTIHYPERTENSIVE						
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean		Number of Benefit Months	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean		Number of Beneficiaries	Number of Benefit Months
				Rx per Month	Mean Rx \$ per Benefit Month					Rx per Month	Mean Rx \$ per Benefit Month		
Male, Other Eligibles													
All Ages	700	2.2	7,177	0.3	17	130	0.4	1,387	0.4	32	31,253	280,077	
5 and younger	289	2.1	2,670	0.2	13	71	0.5	711	0.1	3	13,606	119,252	
6-14	176	1.5	1,982	0.3	14	7	0.1	84	0.4	40	11,969	111,721	
15-20	135	2.7	1,409	0.3	12	4	0.1	41	0.5	27	4,973	42,714	
21-44	79	13.7	900	0.8	38	29	5.0	336	0.6	62	575	5,399	
45-64	16	21.1	175	1.0	28	19	25.0	215	0.8	83	76	768	
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	13	25	
75-84	4	25.0	29	0.4	14	0	0.0	0	0.0	0	16	84	
85 and older	1	4.0	12	0.5	11	0	0.0	0	0.0	0	25	114	
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 Montana, 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>.

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, MONTANA, 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	\$451	6.2	144	1,494
Age				
0-64	507	7.0	121	1,320
65-74	0	0.0	0	0
75-84	6	0.3	10	64
85 and older	30	0.6	13	110
Unknown	0	0.0	0	0
Gender				
Female	557	7.3	81	887
Male	295	4.6	63	607
Unknown	0	0.0	0	0
Race				
White	452	6.2	114	1,155
African American	0	0	0	0
Other/unknown	446	6.3	30	339
Basis of Eligibility^c				
Aged	89	1.6	24	186
Disabled	502	6.9	120	1,308
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 Montana, 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 251 beneficiaries who were in nursing facilities for part of their enrollment and their 2,518 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.

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

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users								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
Anti-infective Agents	0.5	0.1	0.0	0.4	\$18	\$5	\$1	\$12	\$35	\$63	\$65	\$29	449	\$15,552	78	54.2	880
Biologicals	0.1	0.0	0.0	0.0	2	1	0	1	28	18	0	42	7	198	7	4.9	84
Antineoplastic Agents	1.1	0.0	0.0	1.1	21	0	0	21	19	0	0	19	13	247	1	0.7	12
Endocrine/Metabolic Drugs	1.3	0.6	0.1	0.6	76	59	3	14	58	93	55	23	860	50,051	61	42.4	661
Cardiovascular Agents	1.6	0.1	0.2	1.3	59	8	28	23	36	67	120	18	1,010	36,408	58	40.3	614
Respiratory Agents	0.8	0.5	0.0	0.3	61	55	1	5	77	104	91	20	440	33,792	50	34.7	554
Gastrointestinal Agents	1.2	0.3	0.0	0.9	58	33	6	19	50	130	145	22	828	41,729	67	46.5	718
Genitourinary Agents	0.9	0.4	0.0	0.5	55	33	1	21	59	87	34	41	365	21,607	34	23.6	394
CNS Drugs	1.8	0.8	0.1	0.9	215	168	17	30	120	222	130	33	1,922	230,712	99	68.8	1,071
Stimulants/Anti-obesity/Anorexia	0.7	0.3	0.0	0.4	87	78	0	9	125	233	0	25	25	3,115	3	2.1	36
Miscellaneous Psychological/Neurological Agents	1.0	1.0	0.0	0.1	603	598	0	5	597	627	0	92	106	63,297	10	6.9	105
Analgesics and Anesthetics	1.1	0.1	0.2	0.9	61	9	27	26	56	97	163	30	809	44,934	69	47.9	731
Neuromuscular Agents	1.7	0.3	0.1	1.2	114	45	9	59	67	143	63	48	1,503	101,156	78	54.2	888
Nutritional Products	0.9	0.0	0.0	0.8	19	0	1	18	22	15	28	22	399	8,796	39	27.1	453
Hematological Agents	1.1	0.1	0.1	0.8	39	23	2	15	37	188	13	18	217	7,974	20	13.9	202
Topical Products	0.5	0.1	0.0	0.3	19	10	2	7	39	75	48	21	334	12,876	61	42.4	682
Miscellaneous Products	0.3	0.0	0.0	0.3	4	0	0	4	18	0	0	18	9	159	3	2.1	36
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	9	0	0	0	50	0	0	0	14	698	8	5.6	79
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.	9,310	673,301	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2006 file for Montana, 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 251 beneficiaries who were in nursing facilities for part of their enrollment and their 2,518 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 Montana, 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.

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, MONTANA, 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	\$160,524	57	39.6	617	1.0	\$264	\$260	
ANTICONVULSANT	69,364	73	50.7	855	1.2	69	81	
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	63,609	12	8.3	129	0.9	568	493	
ANTIDEPRESSANTS	59,552	91	63.2	1,035	0.9	67	58	
ANALGESICS - Narcotic	35,610	82	56.9	877	0.7	57	41	
ANTIDIABETIC	34,331	53	36.8	601	0.9	64	57	
ANTIASTHMATIC	28,431	63	43.8	661	0.5	84	43	
ULCER DRUGS	27,702	74	51.4	818	0.7	49	34	
MUSCULOSKELETAL THERAPY AGENTS	24,611	26	18.1	305	1.0	85	81	
ANTIHYPERLIPIDEMIC	21,251	22	15.3	246	0.8	114	86	
Total	524,985	553	n.a.	6,144	n.a.	n.a.	n.a.	

Source: Data for this table are from the MAX 2006 file for Montana, 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 251 beneficiaries who were in nursing facilities for part of their enrollment and their 2,518 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, MONTANA, 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	5,168	\$524,985	57	39.6	617	1.0	\$260	73	50.7	855	1.2	\$81	
Female													
All Females	3,533	383,066	41	50.6	468	1.0	281	41	50.6	492	1.1	56	
Female, Disabled													
All Ages	3,362	368,899	37	50.7	420	1.0	303	41	56.2	492	1.1	56	
64 or younger	3,362	368,899	37	50.7	420	1.0	303	41	56.2	492	1.1	56	
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	171	14,167	4	50.0	48	0.8	90	0	0.0	0	0.0	0	
64 or younger	105	10,558	2	200.0	24	1.0	96	0	0.0	0	0.0	0	
65-74	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
75-84	1	14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
85 and older	65	3,595	2	40.0	24	0.5	84	0	0.0	0	0.0	0	
Male													
All Males	1,635	141,919	16	25.4	149	0.9	194	32	50.8	363	1.3	116	
Male, Disabled													
All Ages	1,610	141,267	16	34.0	149	0.9	194	31	66.0	351	1.3	119	
64 or younger	1,610	141,267	16	34.0	149	0.9	194	31	66.0	351	1.3	119	
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	25	652	0	0.0	0	0.0	0	1	6.3	12	0.5	10	
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
65-74	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
75-84	13	400	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
85 and older	12	252	0	0.0	0	0.0	0	1	12.5	12	0.5	10	
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 Montana, 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 251 beneficiaries who were in nursing facilities for part of their enrollment and their 2,518 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, MONTANA, 2006

Beneficiary Characteristics	MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL					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	12	8.3	129	0.9	\$493	91	63.2	1,035	0.9	\$58	82	56.9	877	0.7	\$41
Female															
All Females	6	7.4	62	1.0	923	61	75.3	718	0.9	58	54	66.7	602	0.8	46
Female, Disabled															
All Ages	6	8.2	62	1.0	923	60	82.2	706	0.9	59	52	71.2	589	0.8	46
64 or younger	6	8.2	62	1.0	923	60	82.2	706	0.9	59	52	71.2	589	0.8	46
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	0	0.0	0	0.0	0	1	12.5	12	0.9	22	2	25.0	13	1.1	73
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	100.0	12	1.1	78
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	1	50.0	1	1.0	14
85 and older	0	0.0	0	0.0	0	1	20.0	12	0.9	22	0	0.0	0	0.0	0
Male															
All Males	6	9.5	67	0.7	96	30	47.6	317	0.8	56	28	44.4	275	0.6	28
Male, Disabled															
All Ages	6	12.8	67	0.7	96	30	63.8	317	0.8	56	28	59.6	275	0.6	28
64 or younger	6	12.8	67	0.7	96	30	63.8	317	0.8	56	28	59.6	275	0.6	28
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	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	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
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 Montana, 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 251 beneficiaries who were in nursing facilities for part of their enrollment and their 2,518 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, MONTANA, 2006

Beneficiary Characteristics	ANTIDIABETIC						ANTIASTHMATIC					ULCER DRUGS				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$		Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
All	53	36.8	601	0.9	\$57		63	43.8	661	0.5	\$43	74	51.4	818	0.7	\$34
Female																
All Females	38	46.9	436	1.0	63		48	59.3	528	0.5	45	44	54.3	493	0.7	24
Female, Disabled																
All Ages	34	46.6	388	0.9	58		46	63.0	504	0.5	43	43	58.9	481	0.7	24
64 or younger	34	46.6	388	0.9	58		46	63.0	504	0.5	43	43	58.9	481	0.7	24
65-74	0	0.0	0	0.0	0		0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0		0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0		0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles																
All Ages	4	50.0	48	1.6	105		2	25.0	24	0.8	75	1	12.5	12	0.4	19
64 or younger	2	200.0	24	1.4	155		2	200.0	24	0.8	75	1	100.0	12	0.4	19
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	2	40.0	24	1.8	55		0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male																
All Males	15	23.8	165	0.7	42		15	23.8	133	0.4	36	30	47.6	325	0.8	49
Male, Disabled																
All Ages	15	31.9	165	0.7	42		15	31.9	133	0.4	36	25	53.2	284	0.8	54
64 or younger	15	31.9	165	0.7	42		15	31.9	133	0.4	36	25	53.2	284	0.8	54
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	0	0.0	0	0.0	0		0	0.0	0	0.0	0	5	31.3	41	0.5	13
64 or younger	0	0.0	0	0.0	0		0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	0	0.0	0	0.0	0		0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0		0	0.0	0	0.0	0	4	50.0	29	0.4	14
85 and older	0	0.0	0	0.0	0		0	0.0	0	0.0	0	1	12.5	12	0.5	11
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 Montana, 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 251 beneficiaries who were in nursing facilities for part of their enrollment and their 2,518 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, MONTANA, 2006

Beneficiary Characteristics	MUSCULOSKELETAL THERAPY AGENTS					ANTIHYPERTENSIVE					All-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$		
All	26	18.1	305	1.0	\$81	22	15.3	246	0.8	\$86	144	1,494
Female												
All Females	18	22.2	216	0.9	76	17	21.0	204	0.8	86	81	887
Female, Disabled												
All Ages	18	24.7	216	0.9	76	16	21.9	192	0.8	83	73	820
64 or younger	18	24.7	216	0.9	76	16	21.9	192	0.8	83	73	820
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	0	0.0	0	0.0	0	1	12.5	12	0.9	132	8	67
64 or younger	0	0.0	0	0.0	0	1	100.0	12	0.9	132	1	12
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	2	13
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	5	42
Male												
All Males	8	12.7	89	1.1	92	5	7.9	42	0.7	90	63	607
Male, Disabled												
All Ages	8	17.0	89	1.1	92	5	10.6	42	0.7	90	47	488
64 or younger	8	17.0	89	1.1	92	5	10.6	42	0.7	90	47	488
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	0	0.0	0	0.0	0	0	0.0	0	0.0	0	16	119
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	8	51
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	8	68
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 Montana, 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 251 beneficiaries who were in nursing facilities for part of their enrollment and their 2,518 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}
MONTANA, 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	14,662	18.0	0.8	66,201	\$16	\$1,295,187	\$20	2.8	81,374	
Age										
5 and younger	3,802	13.9	0.3	7,142	3	87,814	12	3.0	27,402	
6-14	3,355	13.7	0.3	8,198	5	134,684	16	1.6	24,525	
15-20	2,040	15.6	0.4	5,653	8	103,494	18	1.6	13,040	
21-44	2,807	26.1	1.6	17,292	33	354,722	21	2.9	10,764	
45-64	2,625	47.9	5.1	27,731	111	608,944	22	3.9	5,478	
65-74	19	25.7	1.3	99	60	4,407	45	7.3	74	
75-84	7	22.6	1.0	31	16	506	16	50.9	31	
85 and older	7	11.7	0.9	55	10	616	11	17.1	60	
Unknown	0	0.0	0.0	0	0	0	0	0.0	0	
Basis of Eligibility^c										
Aged	18	14.6	1.1	135	25	3,067	23	10.8	123	
Disabled	4,529	39.2	3.5	40,979	78	896,658	22	3.0	11,557	
Adults	1,720	20.0	0.9	7,339	16	136,081	19	3.9	8,596	
Children	8,383	13.7	0.3	17,666	4	255,878	14	2.2	61,070	
Unknown	12	42.9	2.9	82	125	3,503	43	5.4	28	
Gender										
Female	8,746	19.7	0.9	41,800	19	827,364	20	3.4	44,352	
Male	5,916	16.0	0.7	24,401	13	467,823	19	2.2	37,022	
Unknown	0	0.0	0.0	0	0	0	0	0.0	0	
Race										
White	11,571	20.6	1.0	55,240	20	1,099,068	20	2.9	56,226	
African American	173	18.9	0.7	658	10	9,488	14	2.5	913	
Other/unknown	2,918	12.0	0.4	10,303	8	186,631	18	2.6	24,235	
Use of Nursing Facilities^d										
Entire year	90	62.5	8.7	1,252	202	29,067	23	4.3	144	
Part year	202	80.5	8.9	2,240	239	60,036	27	4.7	251	
None	14,370	17.7	0.8	62,709	15	1,206,084	19	2.8	80,979	
Maintenance Assistance Status										
Cash	6,669	22.5	1.4	41,790	29	872,362	21	2.9	29,605	
Medically needy	275	39.5	2.7	1,885	66	45,950	24	4.0	696	
Poverty related	4,581	13.8	0.3	8,964	4	126,793	14	2.6	33,290	
Other/unknown	3,137	17.6	0.8	13,562	14	250,082	18	2.7	17,783	

Source: Data for this table are from the MAX 2006 file for Montana, 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.

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

TABLE ND.12
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
 AMONG NONDUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a,b}
 MONTANA, 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	\$2	\$20	\$0	\$1	725,076
Age						
5 and younger	0.0	0	12	0	0	241,141
6-14	0.0	1	16	0	0	230,992
15-20	0.1	1	18	0	0	111,480
21-44	0.2	4	21	0	2	86,715
45-64	0.5	11	22	0	4	54,021
65-74	0.3	14	45	0	1	325
75-84	0.2	4	16	0	1	142
85 and older	0.2	2	11	0	1	260
Unknown	0.0	0	0	0	0	0
Basis of Eligibility^c						
Aged	0.2	5	23	0	1	586
Disabled	0.4	8	22	0	3	116,770
Adults	0.1	2	19	0	1	61,234
Children	0.0	0	14	0	0	546,282
Unknown	0.4	17	43	0	3	204
Gender						
Female	0.1	2	20	0	1	387,636
Male	0.1	1	19	0	0	337,440
Unknown	0.0	0	0	0	0	0
Race						
White	0.1	2	20	0	1	490,430
African American	0.1	1	14	0	0	8,317
Other/unknown	0.0	1	18	0	0	226,329
Use of Nursing Facilities^d						
Entire year	0.8	19	23	1	6	1,494
Part year	0.9	24	27	1	9	2,518
None	0.1	2	19	0	1	721,064
Maintenance Assistance Status						
Cash	0.1	3	21	0	1	284,478
Medically needy	0.5	11	24	0	4	3,999
Poverty related	0.0	0	14	0	0	277,311
Other/unknown	0.1	2	18	0	1	159,288

Source: Data for this table are from the MAX 2006 file for Montana, 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}
MONTANA, 2006

Drug Category	Number of Users	Rx \$ per User	Total Rx \$	Rx \$ as a Percentage of All Part D		Number Rx as a Percentage of All Part D Excluded Rx	
				Excluded Rx \$	Total Number Rx. \$ per Rx	Excluded Rx	
All	18,703	\$69	\$1,295,187	100.0	66,201	\$20	100.0
Anorexia or weight loss/gain	1	46	46	0.0	2	23	0.0
Fertility drugs	0	0	0	0.0	0	0	0.0
Drugs for cosmetic purposes	35	14	491	0.0	46	11	0.1
Cough and cold medications	5,156	27	141,440	10.9	7,714	18	11.7
Vitamins and minerals	3,035	54	162,610	12.6	10,384	16	15.7
Non-prescription drugs	6,777	75	509,978	39.4	25,633	20	38.7
Barbiturates	138	109	15,089	1.2	1,097	14	1.7
Benzodiazepines	3,233	130	420,223	32.4	20,304	21	30.7
Other Part D Excl Rx Drugs	328	138	45,310	3.5	1,021	44	1.5

Source: Data for this table are from the MAX 2006 file for Montana, 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, MONTANA, 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	81,580	123	11,564	8,596	61,269	28	727,965	586	116,927	61,246	549,002	204
Age												
5 and younger	27,466	0	670	1	26,795	0	242,001	0	6,764	1	235,236	0
6-14	24,627	0	1,224	0	23,403	0	232,409	0	13,399	0	219,010	0
15-20	13,080	0	1,132	1,014	10,930	4	112,092	0	12,053	5,851	94,180	8
21-44	10,764	2	3,193	7,420	141	8	86,715	13	32,184	53,887	576	55
45-64	5,478	9	5,295	159	0	15	54,021	104	52,296	1,483	0	138
65-74	74	23	49	1	0	1	325	80	230	12	0	3
75-84	31	30	0	1	0	0	142	130	0	12	0	0
85 and older	60	59	1	0	0	0	260	259	1	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	44,442	65	5,790	7,984	30,575	28	389,086	317	59,447	55,268	273,850	204
Male	37,138	58	5,774	612	30,694	0	338,879	269	57,480	5,978	275,152	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	56,411	106	9,099	6,338	40,840	28	492,912	456	90,951	43,875	357,426	204
African American	916	0	105	55	756	0	8,349	0	1,041	371	6,937	0
Other/unknown	24,253	17	2,360	2,203	19,673	0	226,704	130	24,935	17,000	184,639	0
Use of Nursing Facilities^c												
Entire year	144	24	120	0	0	0	1,494	186	1,308	0	0	0
Part year	251	6	237	7	1	0	2,518	39	2,385	82	12	0
None	81,185	93	11,207	8,589	61,268	28	723,953	361	113,234	61,164	548,990	204
Maintenance Assistance Status												
Cash	29,620	30	10,319	1,977	17,294	0	284,920	201	107,580	17,551	159,588	0
Medically needy	696	71	599	21	5	0	3,999	279	3,685	30	5	0
Poverty related	33,474	0	0	4,424	29,022	28	279,576	0	0	24,738	254,634	204
Other/unknown	17,790	22	646	2,174	14,948	0	159,470	106	5,662	18,927	134,775	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	81,373	123	11,556	8,596	61,070	28	727,598	586	116,900	61,246	548,662	204
FFS part year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
FFS part year, no Rx claims	1	0	1	0	0	0	7	0	7	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	1	0	0	0	1	0	1	0	0	0	1	0

Source: Data for this table are from the MAX 2006 file for Montana, 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, MONTANA, 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	81,580	727,965	81,374	725,076	0	2,889
Fee-for-service (FFS) all year	81,373	727,598	81,373	725,074	0	2,524
FFS part year, with Rx claims	0	0	0	0	0	0
FFS part year, with no Rx claims	1	7	1	2	0	5
Managed care (MC) all year, with Rx claims	0	0	0	0	0	0
MC all year, with no Rx claims	1	1	0	0	0	1

Source: Data for this table are from the MAX 2006 file for Montana, 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