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

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TABLE ND.2
CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a, b}
NONDUAL BENEFICIARIES, SOUTH DAKOTA, 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	110,258	66	8,760	20,994	80,362	76	1,015,818	553	91,746	160,584	762,265	670
Age												
5 and younger	32,974	0	697	1	32,276	0	302,923	0	6,999	1	295,923	0
6-14	34,567	0	1,406	0	33,161	0	346,625	0	15,552	0	331,073	0
15-20	17,877	0	1,118	1,870	14,889	0	160,298	0	12,069	13,230	134,999	0
21-44	20,220	0	2,595	17,566	35	24	162,008	0	27,334	134,195	269	210
45-64	4,519	0	2,912	1,555	0	52	43,102	0	29,494	13,148	0	460
65-74	42	15	26	1	0	0	372	117	246	9	0	0
75-84	27	23	4	0	0	0	232	195	37	0	0	0
85 and older	30	28	2	0	0	0	256	241	15	0	0	0
Unknown	2	0	0	1	1	0	2	0	0	1	1	0
Gender												
Female	61,111	40	4,199	17,221	39,575	76	553,423	319	44,354	132,937	375,143	670
Male	49,147	26	4,561	3,773	40,787	0	462,395	234	47,392	27,647	387,122	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	59,888	50	5,005	10,956	43,809	68	542,767	416	51,380	78,766	411,610	595
African American	3,148	2	116	631	2,399	0	27,170	14	1,080	4,449	21,627	0
Other/unknown	47,222	14	3,639	9,407	34,154	8	445,881	123	39,286	77,369	329,028	75
Use of Nursing Facilities^c												
Entire year	141	27	114	0	0	0	1,379	212	1,167	0	0	0
Part year	155	4	147	4	0	0	1,468	33	1,387	48	0	0
None	109,962	35	8,499	20,990	80,362	76	1,012,971	308	89,192	160,536	762,265	670
Maintenance Assistance Status												
Cash	34,031	35	8,058	9,906	16,032	0	329,279	324	85,526	81,845	161,584	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0
Poverty-related	52,571	0	2	4,488	48,005	76	488,291	0	12	24,909	462,700	670
Other/unknown	23,656	31	700	6,600	16,325	0	198,248	229	6,208	53,830	137,981	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	110,258	66	8,760	20,994	80,362	76	1,015,818	553	91,746	160,584	762,265	670
FFS part year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
FFS part year, no Rx claims	0	0	0	0	0	0	0	0	0	0	0	0

Source: Data for this table are from the MAX 2006 file for South Dakota, released by CMS in 7/2009. 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.

Nondual Medicaid Beneficiaries

TABLE ND.3
ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC^{a, b}
NONDUAL BENEFICIARIES, SOUTH DAKOTA, 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	5.6	\$390	\$69	\$3,389	11.5	110,258
Age							
5 and younger	59.6	3.3	166	50	2,230	7.4	32,974
6-14	52.2	3.9	306	79	1,930	15.9	34,567
15-20	53.2	4.7	323	69	4,122	7.8	17,877
21-44	59.6	8.4	585	69	5,107	11.5	20,220
45-64	63.3	26.6	2,059	77	12,182	16.9	4,519
65-74	42.9	10.6	404	38	11,196	3.6	42
75-84	55.6	27.4	1,244	46	18,259	6.8	27
85 and older	50.0	18.6	731	39	17,193	4.3	30
Unknown	0.0	0.0	0	0	3,609	0.0	2
Basis of Eligibility^e							
Aged	59.1	23.8	990	42	17,285	5.7	66
Disabled	67.1	24.1	2,130	88	16,406	13.0	8,760
Adults	58.2	6.2	340	55	3,112	10.9	20,994
Children	54.7	3.4	212	62	2,018	10.5	80,362
Unknown	81.6	25.4	2,199	87	17,283	12.7	76
Gender							
Female	58.7	6.1	394	64	3,363	11.7	61,111
Male	53.6	5.0	386	77	3,422	11.3	49,147
Unknown	0.0	0.0	0	0	0	0.0	0
Race							
White	68.4	7.5	541	73	3,399	15.9	59,888
African American	53.0	3.4	218	63	1,954	11.1	3,148
Other/unknown	41.4	3.5	210	61	3,473	6.1	47,222
Use of Nursing Facilities^f							
Entire year	89.4	76.4	5,397	71	52,804	10.2	141
Part year	94.8	55.3	3,427	62	66,080	5.2	155
None	56.3	5.5	380	69	3,238	11.7	109,962
Maintenance Assistance Status							
Cash	51.9	8.9	694	78	5,324	13.0	34,031
Medically needy	0.0	0.0	0	0	0	0.0	0
Poverty related	57.8	3.4	204	59	1,439	14.2	52,571
Other/unknown	59.8	5.7	367	64	4,940	7.4	23,656

Source: Data for this table are from the MAX 2006 file for South Dakota, released by CMS in 7/2009. 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, SOUTH DAKOTA, 2006

Beneficiary Characteristics	Number of Rx, Percentage with:										Number	
	Mean Number of Rx	Mean Rx \$	Rx \$ as a Percentage of All Medicaid FFS \$ ^c	None	More than 0, but 1 or Less	More than 1, but 2 or Less	More than 2, but 5 or Less	More than 5, but 10 or Less	More than 10	Mean \$, All Medicaid FFS \$ ^d	Beneficiaries	Benefit Months
All	0.6	\$42	11.5	43.6	46.4	4.9	3.6	1.2	0.3	\$368	110,258	1,015,818
Age												
5 and younger	0.4	18	7.4	40.4	55.4	3.0	1.0	0.1	0.0	243	32,974	302,923
6-14	0.4	31	15.9	47.8	45.5	4.0	2.4	0.3	0.0	192	34,567	346,625
15-20	0.5	36	7.8	46.8	43.5	5.5	3.6	0.6	0.1	460	17,877	160,298
21-44	1.1	73	11.5	40.4	41.3	8.0	7.3	2.6	0.6	637	20,220	162,008
45-64	2.8	216	16.9	36.7	22.1	8.0	15.8	12.4	5.0	1,277	4,519	43,102
65-74	1.2	46	3.6	57.1	21.4	2.4	14.3	2.4	2.4	1,264	42	372
75-84	3.2	145	6.8	44.4	11.1	14.8	11.1	14.8	3.7	2,125	27	232
85 and older	2.2	86	4.3	50.0	16.7	6.7	6.7	20.0	0.0	2,015	30	256
Unknown	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	3,609	2	2
Basis of Eligibility^e												
Aged	2.8	118	5.7	40.9	19.7	10.6	9.1	16.7	3.0	2,063	66	553
Disabled	2.3	203	13.0	32.9	28.0	9.7	16.3	9.7	3.5	1,566	8,760	91,746
Adults	0.8	44	10.9	41.8	42.9	7.7	5.8	1.6	0.2	407	20,994	160,584
Children	0.4	22	10.5	45.3	49.3	3.6	1.7	0.2	0.0	213	80,362	762,265
Unknown	2.9	250	12.7	18.4	30.3	17.1	21.1	9.2	3.9	1,960	76	670
Gender												
Female	0.7	44	11.7	41.3	47.8	5.2	3.8	1.5	0.4	371	61,111	553,423
Male	0.5	41	11.3	46.4	44.7	4.4	3.4	0.9	0.2	364	49,147	462,395
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	0.8	60	15.9	31.6	54.5	6.6	5.1	1.7	0.5	375	59,888	542,767
African American	0.4	25	11.1	47.0	47.2	3.4	2.0	0.3	0.1	226	3,148	27,170
Other/unknown	0.4	22	6.1	58.6	36.0	2.7	1.9	0.7	0.2	368	47,222	445,881
Use of Nursing Facilities^f												
Entire year	7.8	552	10.2	10.6	4.3	5.7	21.3	34.0	24.1	5,399	141	1,379
Part year	5.8	362	5.2	5.2	16.1	9.7	25.2	29.0	14.8	6,977	155	1,468
None	0.6	41	11.7	43.7	46.5	4.8	3.6	1.1	0.3	352	109,962	1,012,971
Maintenance Assistance Status												
Cash	0.9	72	13.0	48.1	36.6	5.3	6.0	2.9	1.0	550	34,031	329,279
Medically needy	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Poverty related	0.4	22	14.2	42.2	52.1	3.9	1.6	0.1	0.0	155	52,571	488,291
Other/unknown	0.7	44	7.4	40.2	47.7	6.2	4.7	1.1	0.1	590	23,656	198,248

Source: Data for this table are from the MAX 2006 file for South Dakota, released by CMS in 7/2009. 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, SOUTH DAKOTA, 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	0.6	\$42	\$69	0.2	\$31	\$139	0.0	\$3	\$95	0.4	\$9	\$24
Age												
5 and younger	0.4	18	50	0.1	12	108	0.0	1	45	0.2	5	21
6-14	0.4	31	79	0.2	25	129	0.0	1	65	0.2	4	25
15-20	0.5	36	69	0.2	26	133	0.0	2	103	0.3	7	24
21-44	1.1	73	69	0.3	49	156	0.1	8	143	0.7	16	23
45-64	2.8	216	77	1.0	154	161	0.1	15	116	1.7	47	27
65-74	1.2	46	38	0.3	27	101	0.0	1	25	0.9	18	20
75-84	3.2	145	46	0.8	82	100	0.1	16	147	2.3	47	21
85 and older	2.2	86	39	0.6	54	91	0.0	3	89	1.6	29	19
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility^d												
Aged	2.8	118	42	0.7	70	96	0.1	9	101	2.0	40	20
Disabled	2.3	203	88	0.9	155	171	0.1	12	111	1.3	36	28
Adults	0.8	44	55	0.2	26	126	0.0	6	150	0.6	12	21
Children	0.4	22	62	0.1	17	117	0.0	1	59	0.2	5	23
Unknown	2.9	250	87	1.0	188	180	0.2	24	125	1.6	38	23
Gender												
Female	0.7	44	64	0.2	30	135	0.0	4	105	0.4	10	23
Male	0.5	41	77	0.2	32	143	0.0	2	79	0.3	7	25
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Race												
White	0.8	60	73	0.3	44	140	0.0	4	102	0.5	11	25
African American	0.4	25	63	0.1	18	134	0.0	2	121	0.2	5	22
Other/unknown	0.4	22	61	0.1	16	135	0.0	1	76	0.2	5	23
Use of Nursing Facilities^e												
Entire year	7.8	552	71	2.4	371	155	0.4	39	110	5.1	141	28
Part year	5.8	362	62	1.6	232	144	0.2	27	132	4.0	102	26
None	0.6	41	69	0.2	30	138	0.0	3	95	0.3	8	24
Maintenance Assistance Status												
Cash	0.9	72	78	0.3	53	160	0.0	5	110	0.5	14	26
Medically needy	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Poverty related	0.4	22	59	0.1	16	114	0.0	2	75	0.2	5	22
Other/unknown	0.7	44	64	0.3	32	124	0.0	3	92	0.4	9	22

Source: Data for this table are from the MAX 2006 file for South Dakota, released by CMS in 7/2009. 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 South Dakota, 1.6 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, SOUTH DAKOTA, 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	0.2	0.0	0.0	0.2	\$10	\$4	\$1	\$5	\$40	\$123	\$45	\$25	114,369	\$4,612,893	44,877	40.7	466,407
Biologicals	0.2	0.2	0.0	0.0	110	110	0	0	667	673	0	35	1,427	951,186	815	0.7	8,664
Antineoplastic Agents	0.6	0.2	0.0	0.4	136	116	0	20	213	589	38	45	1,120	238,774	174	0.2	1,759
Endocrine/Metabolic Drugs	0.4	0.1	0.0	0.2	26	18	2	7	64	140	47	28	50,231	3,222,931	11,995	10.9	122,351
Cardiovascular Agents	0.9	0.3	0.0	0.6	35	23	2	10	38	79	73	16	41,585	1,585,488	4,438	4.0	45,461
Respiratory Agents	0.4	0.2	0.0	0.2	23	19	0	4	64	98	59	22	91,555	5,872,997	24,345	22.1	256,561
Gastrointestinal Agents	0.4	0.2	0.0	0.2	36	22	10	4	96	129	406	21	29,760	2,852,131	7,890	7.2	79,776
Genitourinary Agents	0.3	0.1	0.0	0.1	17	11	3	4	67	116	87	28	7,443	496,454	2,897	2.6	28,676
CNS Drugs	0.8	0.4	0.1	0.4	85	67	8	10	101	177	107	26	85,761	8,695,104	10,176	9.2	102,249
Stimulants/Anti-obesity/Anorexia	0.8	0.7	0.0	0.1	88	85	0	2	115	124	84	31	38,059	4,391,093	4,720	4.3	50,160
Miscellaneous Psychological/ Neurological Agents	0.3	0.2	0.0	0.0	129	126	1	2	455	507	132	72	860	391,248	301	0.3	3,043
Analgesics and Anesthetics	0.4	0.0	0.0	0.3	18	8	2	8	45	200	245	23	61,091	2,759,949	15,687	14.2	157,220
Neuromuscular Agents	0.7	0.3	0.0	0.4	76	61	3	12	103	185	99	33	37,499	3,875,556	4,863	4.4	50,766
Nutritional Products	0.3	0.0	0.0	0.3	5	1	0	3	17	53	15	13	8,722	147,972	3,419	3.1	31,161
Hematological Agents	0.5	0.1	0.0	0.4	79	71	1	8	147	597	33	20	5,242	768,559	974	0.9	9,677
Topical Products	0.2	0.1	0.0	0.1	8	5	0	3	43	91	43	21	43,567	1,862,406	21,847	19.8	231,119
Miscellaneous Products	0.2	0.1	0.0	0.0	28	24	2	3	156	180	253	62	1,786	278,795	912	0.8	9,824
Unknown Therapeutic Category	0.1	0.0	0.0	0.0	9	0	0	0	60	0	0	0	482	29,032	309	0.3	3,339
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.	620,559	43,032,568	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2006 file for South Dakota, released by CMS in 7/2009. 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 South Dakota, 1.6 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, SOUTH DAKOTA, 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	\$5,270,292	3,758	3.4	39,738	0.6	\$213	\$133	
STIMULANTS/ANTI-OBESITY/ANOREXIANTS	4,391,093	5,570	5.1	59,756	0.6	115	73	
ANTIASTHMATIC	3,910,042	18,457	16.7	196,186	0.3	77	20	
ANTICONVULSANT	3,411,736	3,557	3.2	37,977	0.7	124	90	
ANTIDEPRESSANTS	2,852,494	9,538	8.7	96,695	0.5	62	29	
ULCER DRUGS	1,737,308	6,559	5.9	66,147	0.3	76	26	
ANALGESICS - Narcotic	1,449,588	16,797	15.2	168,778	0.2	34	9	
MISC. ENDOCRINE	1,267,615	665	0.6	7,323	0.5	332	173	
DERMATOLOGICAL	1,251,782	16,259	14.7	174,113	0.1	50	7	
CEPHALOSPORINS	1,057,460	17,023	15.4	183,319	0.1	46	6	
Total	26,599,410	98,183	n.a.	1,030,032	n.a.	n.a.	n.a.	

Source: Data for this table are from the MAX 2006 file for South Dakota, released by CMS in 7/2009. 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, SOUTH DAKOTA, 2006

Beneficiary Characteristics	All Top 10 Drug Groups							ANTIPSYCHOTICS							STIMULANTS/ANTI-OBESITY/ANOREXIANTS						
	Number of Rx	Rx \$	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean 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	303,145	\$26,599,410	3,758	3.4	39,738	0.6	\$133	5,570	5.1	59,756	0.6	\$74	5,570	5.1	59,756	0.6	\$74				
Female																					
All Females	170,657	13,515,695	1,887	3.1	19,633	0.6	117	1,718	2.8	18,413	0.6	71	1,718	2.8	18,413	0.6	71				
Female, Disabled																					
All Ages	60,713	6,232,180	831	19.8	9,113	0.7	174	222	5.3	2,564	0.7	85	222	5.3	2,564	0.7	85				
5 and younger	1,610	161,227	0	0.0	0	0.0	0	2	0.7	24	0.5	47	2	0.7	24	0.5	47				
6-14	4,977	562,381	52	10.5	552	0.6	117	83	16.8	934	0.7	73	83	16.8	934	0.7	73				
15-20	3,428	345,503	62	14.5	707	0.6	93	41	9.6	488	0.7	93	41	9.6	488	0.7	93				
21-44	20,505	2,231,217	355	26.9	3,877	0.7	166	58	4.4	668	0.6	100	58	4.4	668	0.6	100				
45-64	30,146	2,929,813	362	22.0	3,977	0.8	203	38	2.3	450	0.6	81	38	2.3	450	0.6	81				
65-74	47	2,039	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	0.0	0				
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0				
Female, Other Eligibles																					
All Ages	109,944	7,283,515	1,056	1.9	10,520	0.4	67	1,496	2.6	15,849	0.6	69	1,496	2.6	15,849	0.6	69				
5 and younger	16,950	913,099	8	0.1	88	0.4	61	37	0.2	370	0.4	34	37	0.2	370	0.4	34				
6-14	24,194	2,183,245	224	1.4	2,411	0.5	86	943	5.8	10,213	0.6	70	943	5.8	10,213	0.6	70				
15-20	18,422	1,211,786	326	3.5	3,194	0.5	74	284	3.1	2,941	0.6	71	284	3.1	2,941	0.6	71				
21-44	42,635	2,472,203	452	3.1	4,339	0.3	54	204	1.4	2,037	0.5	61	204	1.4	2,037	0.5	61				
45-64	7,309	482,202	43	3.8	453	0.4	61	28	2.5	288	0.6	115	28	2.5	288	0.6	115				
65-74	64	2,658	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0				
75-84	220	11,070	2	20.0	24	0.5	18	0	0.0	0	0.0	0	0	0.0	0	0.0	0				
85 and older	150	7,252	1	5.0	11	1.1	17	0	0.0	0	0.0	0	0	0.0	0	0.0	0				
Male																					
All Males	132,488	13,083,715	1,871	3.8	20,105	0.7	148	3,852	7.8	41,343	0.7	74	3,852	7.8	41,343	0.7	74				
Male, Disabled																					
All Ages	46,067	5,536,319	928	20.3	10,280	0.8	181	569	12.5	6,418	0.7	85	569	12.5	6,418	0.7	85				
5 and younger	3,160	257,078	8	2.0	88	0.9	97	27	6.8	294	0.4	54	27	6.8	294	0.4	54				
6-14	8,682	1,215,102	204	22.3	2,321	0.7	120	329	36.0	3,720	0.8	84	329	36.0	3,720	0.8	84				
15-20	6,275	746,336	146	21.1	1,651	0.7	146	129	18.7	1,488	0.7	86	129	18.7	1,488	0.7	86				
21-44	13,600	1,709,401	335	26.3	3,685	0.8	200	65	5.1	739	0.8	88	65	5.1	739	0.8	88				
45-64	14,333	1,607,712	235	18.5	2,535	0.8	234	19	1.5	177	0.7	126	19	1.5	177	0.7	126				
65-74	17	690	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	0.0	0				
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	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, SOUTH DAKOTA, 2006

Beneficiary Characteristics	All Top 10 Drug Groups			ANTIPSYCHOTICS				STIMULANTS/ANTI-OBESITY/ANOREXIANTS				
	Number of Rx	Rx \$	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean 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	86,421	7,547,396	943	2.1	9,825	0.6	114	3,283	7.4	34,925	0.6	73
5 and younger	22,506	1,391,256	29	0.2	321	0.4	71	152	0.9	1,654	0.5	47
6-14	39,787	4,003,684	440	2.6	4,769	0.6	105	2,468	14.5	26,590	0.7	73
15-20	17,190	1,686,434	398	5.3	4,035	0.7	133	620	8.3	6,347	0.6	76
21-44	5,633	371,013	61	1.9	579	0.4	75	43	1.3	334	0.7	88
45-64	1,196	84,749	10	2.1	91	0.6	190	0	0.0	0	0.0	0
65-74	37	3,533	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	28	2,575	4	30.8	18	0.5	96	0	0.0	0	0.0	0
85 and older	44	4,152	1	12.5	12	1.1	146	0	0.0	0	0.0	0
Unknown	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2006 file for South Dakota, released by CMS in 7/2009. 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, SOUTH DAKOTA, 2006

Beneficiary Characteristics	ANTIASTHMATIC					ANTICONVULSANT					ANTIDEPRESSANTS				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	18,457	16.7	196,186	0.3	\$20	3,557	3.2	37,977	0.7	\$90	9,538	8.7	96,695	0.5	\$30
Female															
All Females	9,235	15.1	97,077	0.3	19	2,227	3.6	23,528	0.7	87	6,941	11.4	69,681	0.5	30
Female, Disabled															
All Ages	1,498	35.7	16,717	0.4	39	1,172	27.9	13,064	0.9	111	1,651	39.3	18,436	0.6	44
5 and younger	147	48.7	1,628	0.3	24	52	17.2	579	0.6	73	1	0.3	12	0.1	1
6-14	165	33.5	1,941	0.5	32	143	29.0	1,624	0.9	121	50	10.1	558	0.6	21
15-20	83	19.4	940	0.3	22	88	20.6	984	0.9	125	110	25.8	1,263	0.5	26
21-44	390	29.6	4,335	0.4	33	453	34.3	5,057	0.9	129	628	47.6	7,046	0.6	44
45-64	712	43.3	7,866	0.5	49	435	26.5	4,818	0.8	90	860	52.3	9,533	0.7	48
65-74	1	12.5	7	0.1	2	1	12.5	2	0.5	10	2	25.0	24	0.8	14
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	7,737	13.6	80,360	0.2	15	1,055	1.9	10,464	0.5	58	5,290	9.3	51,245	0.4	26
5 and younger	2,946	18.6	31,187	0.2	11	47	0.3	506	0.6	43	10	0.1	104	0.3	4
6-14	2,048	12.6	22,306	0.3	19	139	0.9	1,477	0.6	119	519	3.2	5,603	0.4	15
15-20	955	10.3	9,673	0.2	15	129	1.4	1,291	0.5	69	1,292	13.9	12,816	0.4	19
21-44	1,555	10.8	14,754	0.2	14	637	4.4	6,122	0.5	45	3,115	21.6	29,292	0.4	29
45-64	223	19.8	2,330	0.3	26	102	9.1	1,056	0.5	38	343	30.5	3,324	0.5	40
65-74	2	18.2	18	0.9	44	0	0.0	0	0.0	0	3	27.3	30	0.9	44
75-84	3	30.0	36	1.8	114	1	10.0	12	0.2	2	4	40.0	44	0.4	17
85 and older	5	25.0	56	0.6	42	0	0.0	0	0.0	0	4	20.0	32	0.7	42
Male															
All Males	9,222	18.8	99,109	0.3	21	1,330	2.7	14,449	0.8	94	2,597	5.3	27,014	0.5	27
Male, Disabled															
All Ages	1,083	23.7	12,205	0.5	43	858	18.8	9,649	0.9	110	981	21.5	10,842	0.6	35
5 and younger	260	65.8	2,943	0.5	39	56	14.2	655	0.7	71	5	1.3	60	0.5	6
6-14	279	30.6	3,224	0.4	40	119	13.0	1,370	0.8	116	121	13.3	1,407	0.6	18
15-20	111	16.1	1,313	0.4	33	141	20.4	1,611	0.9	140	125	18.1	1,447	0.6	29
21-44	159	12.5	1,755	0.4	35	307	24.1	3,421	0.9	119	353	27.7	3,839	0.7	41
45-64	274	21.6	2,970	0.5	62	234	18.5	2,580	0.9	89	377	29.7	4,089	0.6	36
65-74	0	0.0	0	0.0	0	1	5.6	12	0.1	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	0.0	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, SOUTH DAKOTA, 2006

Beneficiary Characteristics	ANTIASTHMATIC						ANTICONVULSANT					ANTIDEPRESSANTS				
	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	
Male, Other Eligibles																
All Ages	8,139	18.3	86,904	0.2	18	472	1.1	4,800	0.5	62	1,616	3.6	16,172	0.5	22	
5 and younger	4,314	26.2	45,865	0.2	14	54	0.3	590	0.4	54	14	0.1	154	0.3	8	
6-14	2,836	16.7	30,891	0.3	22	171	1.0	1,895	0.6	63	628	3.7	6,770	0.5	16	
15-20	784	10.5	8,276	0.3	19	125	1.7	1,221	0.6	73	647	8.7	6,480	0.5	27	
21-44	159	5.0	1,441	0.3	20	101	3.2	919	0.5	59	270	8.4	2,262	0.4	27	
45-64	43	8.9	401	0.4	36	19	3.9	159	0.4	22	55	11.4	484	0.5	34	
65-74	3	60.0	30	0.4	41	1	20.0	12	0.4	55	1	20.0	10	1.0	65	
75-84	0	0.0	0	0.0	0	1	7.7	4	0.3	36	1	7.7	12	0.1	1	
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 South Dakota, released by CMS in 7/2009. 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, SOUTH DAKOTA, 2006

Beneficiary Characteristics	ULCER DRUGS					ANALGESICS - Narcotic					MISC. ENDOCRINE				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of 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	6,559	5.9	66,147	0.3	\$26	16,797	15.2	168,778	0.2	\$9	665	0.6	7,323	0.5	\$173
Female															
All Females	4,252	7.0	42,932	0.3	27	12,614	20.6	125,483	0.3	8	317	0.5	3,525	0.6	138
Female, Disabled															
All Ages	1,143	27.2	12,762	0.5	42	2,116	50.4	23,733	0.4	20	183	4.4	2,121	0.6	130
5 and younger	62	20.5	638	0.4	24	21	7.0	242	0.1	1	14	4.6	165	0.8	294
6-14	67	13.6	787	0.7	47	36	7.3	407	0.1	2	17	3.4	183	0.7	512
15-20	70	16.4	771	0.4	33	81	19.0	917	0.1	1	4	0.9	46	0.7	256
21-44	350	26.5	3,949	0.5	37	790	59.9	8,896	0.4	16	43	3.3	489	0.7	89
45-64	591	35.9	6,581	0.6	48	1,185	72.1	13,250	0.5	25	105	6.4	1,238	0.6	63
65-74	3	37.5	36	0.5	40	3	37.5	21	0.3	11	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	3,109	5.5	30,170	0.3	20	10,498	18.4	101,750	0.2	5	134	0.2	1,404	0.5	151
5 and younger	734	4.6	6,637	0.2	16	354	2.2	3,921	0.1	1	9	0.1	94	0.4	64
6-14	396	2.4	4,299	0.2	21	719	4.4	7,978	0.1	1	76	0.5	810	0.5	220
15-20	511	5.5	5,136	0.2	15	1,926	20.7	19,401	0.1	1	13	0.1	137	0.5	101
21-44	1,241	8.6	11,772	0.3	21	6,885	47.7	64,229	0.2	6	19	0.1	170	0.4	34
45-64	214	19.0	2,194	0.4	34	602	53.5	6,109	0.4	14	16	1.4	185	0.5	40
65-74	1	9.1	9	0.8	44	3	27.3	22	0.3	3	0	0.0	0	0.0	0
75-84	6	60.0	68	0.8	35	6	60.0	64	1.0	48	1	10.0	8	0.4	30
85 and older	6	30.0	55	0.9	26	3	15.0	26	0.8	64	0	0.0	0	0.0	0
Male															
All Males	2,307	4.7	23,215	0.3	26	4,183	8.5	43,295	0.2	11	348	0.7	3,798	0.5	206
Male, Disabled															
All Ages	697	15.3	7,620	0.5	40	1,110	24.3	11,750	0.4	31	93	2.0	1,029	0.7	321
5 and younger	107	27.1	1,180	0.5	37	19	4.8	224	0.1	1	4	1.0	48	0.9	197
6-14	56	6.1	662	0.5	41	60	6.6	695	0.1	1	35	3.8	389	0.5	667
15-20	51	7.4	574	0.5	36	111	16.1	1,272	0.2	6	11	1.6	129	0.6	49
21-44	192	15.0	2,129	0.6	40	339	26.6	3,509	0.4	31	21	1.6	225	0.9	165
45-64	288	22.7	3,050	0.5	43	579	45.7	6,037	0.5	41	22	1.7	238	0.5	75
65-74	3	16.7	25	0.6	27	2	11.1	13	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	0.0	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, SOUTH DAKOTA, 2006

Beneficiary Characteristics	ULCER DRUGS					ANALGESICS - Narcotic					MISC. ENDOCRINE				
	Number of Users	Users as %	Number of Benefit Months Among Users	Mean		Number of Users	Users as %	Number of Benefit Months Among Users	Mean		Number of Users	Users as %	Number of Benefit Months Among Users	Mean	
		of All Benes		Rx per Benefit	Month		Month		of All Benes	Rx per Benefit		Month		Month	of All Benes
Male, Other Eligibles															
All Ages	1,610	3.6	15,595	0.3	19	3,073	6.9	31,545	0.2	4	255	0.6	2,769	0.4	163
5 and younger	874	5.3	7,963	0.2	16	482	2.9	5,361	0.1	1	15	0.1	167	0.4	209
6-14	336	2.0	3,701	0.2	19	742	4.4	8,257	0.1	1	202	1.2	2,192	0.4	162
15-20	179	2.4	1,855	0.3	17	831	11.1	8,714	0.1	1	29	0.4	308	0.6	192
21-44	168	5.2	1,531	0.3	27	861	26.9	7,873	0.3	12	5	0.2	60	0.1	9
45-64	48	10.0	487	0.3	30	150	31.1	1,270	0.4	12	4	0.8	42	0.2	16
65-74	1	20.0	10	0.9	93	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	1	7.7	12	0.3	38	7	53.8	70	0.2	3	0	0.0	0	0.0	0
85 and older	3	37.5	36	0.7	65	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 South Dakota, released by CMS in 7/2009. 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.

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

Beneficiary Characteristics	DERMATOLOGICAL					CEPHALOSPORINS					Number of Beneficiaries	Number of Benefit Months
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month		
All	16,259	14.7	174,113	0.1	\$7	17,023	15.4	183,319	0.1	\$6	110,258	1,015,818
Female												
All Females	9,546	15.6	101,856	0.1	7	9,676	15.8	103,299	0.1	5	61,110	553,422
Female, Disabled												
All Ages	1,302	31.0	15,124	0.2	11	896	21.3	10,367	0.1	6	4,199	44,354
5 and younger	85	28.1	964	0.1	4	111	36.8	1,286	0.2	9	302	3,029
6-14	155	31.4	1,816	0.2	7	140	28.4	1,632	0.1	9	493	5,438
15-20	129	30.2	1,504	0.2	8	92	21.5	1,084	0.1	8	427	4,604
21-44	429	32.5	5,017	0.2	12	250	19.0	2,870	0.1	6	1,319	14,049
45-64	504	30.7	5,823	0.2	13	303	18.4	3,495	0.1	5	1,644	17,101
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	8	81
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	4	37
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	15
Female, Other Eligibles												
All Ages	8,244	14.5	86,732	0.1	7	8,780	15.4	92,932	0.1	5	56,911	509,068
5 and younger	3,006	19.0	31,884	0.1	4	3,552	22.4	38,505	0.1	7	15,839	144,680
6-14	2,090	12.9	23,295	0.1	7	2,015	12.4	22,482	0.1	6	16,194	161,816
15-20	1,426	15.4	14,631	0.2	10	1,177	12.7	12,075	0.1	3	9,289	81,053
21-44	1,565	10.9	15,338	0.1	8	1,873	13.0	18,126	0.1	3	14,423	111,375
45-64	150	13.3	1,519	0.2	11	158	14.0	1,694	0.1	3	1,125	9,816
65-74	2	18.2	18	0.3	4	0	0.0	0	0.0	0	11	78
75-84	1	10.0	12	0.1	4	2	20.0	20	0.1	1	10	96
85 and older	4	20.0	35	0.2	4	3	15.0	30	0.2	3	20	154
Male												
All Males	6,713	13.7	72,257	0.1	7	7,347	14.9	80,020	0.1	6	49,146	462,394
Male, Disabled												
All Ages	944	20.7	10,846	0.2	11	699	15.3	7,966	0.1	6	4,561	47,392
5 and younger	117	29.6	1,343	0.2	4	158	40.0	1,798	0.1	7	395	3,970
6-14	158	17.3	1,823	0.1	5	164	18.0	1,900	0.1	8	913	10,114
15-20	168	24.3	1,938	0.2	14	91	13.2	1,069	0.1	5	691	7,465
21-44	292	22.9	3,385	0.2	13	150	11.8	1,720	0.1	6	1,276	13,285
45-64	209	16.5	2,357	0.2	14	136	10.7	1,479	0.1	5	1,268	12,393
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	18	165
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, SOUTH DAKOTA, 2006

Beneficiary Characteristics	DERMATOLOGICAL					CEPHALOSPORINS						
	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
Male, Other Eligibles												
All Ages	5,769	12.9	61,411	0.1	6	6,648	14.9	72,054	0.1	6	44,585	415,002
5 and younger	3,016	18.3	32,003	0.1	4	3,976	24.2	42,881	0.1	7	16,438	151,244
6-14	1,495	8.8	16,496	0.1	6	1,803	10.6	20,161	0.1	5	16,967	169,257
15-20	1,058	14.2	11,017	0.2	12	651	8.7	6,997	0.1	3	7,470	67,176
21-44	166	5.2	1,593	0.2	9	190	5.9	1,782	0.1	3	3,202	23,299
45-64	30	6.2	256	0.2	9	27	5.6	223	0.1	3	482	3,792
65-74	1	20.0	10	0.1	5	1	20.0	10	0.1	2	5	48
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	13	99
85 and older	3	37.5	36	0.2	1	0	0.0	0	0.0	0	8	87
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	2

Source: Data for this table are from the MAX 2006 file for South Dakota, released by CMS in 7/2009. 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, SOUTH DAKOTA, 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	\$552	7.8	141	1,379
Age				
0-64	630	8.6	114	1,167
65-74	427	10.9	2	19
75-84	179	4.3	6	30
85 and older	78	2.4	19	163
Unknown	0	0.0	0	0
Gender				
Female	585	8.0	73	716
Male	516	7.6	68	663
Unknown	0	0.0	0	0
Race				
White	531	7.8	83	769
African American	0	0	0	0
Other/unknown	578	7.8	58	610
Basis of Eligibility^c				
Aged	124	3.4	27	212
Disabled	630	8.6	114	1,167
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 South Dakota, released by CMS in 7/2009. 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 155 beneficiaries who were in nursing facilities for part of their enrollment and their 1,468 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, SOUTH DAKOTA, 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	0.5	0.1	0.0	0.4	\$31	\$21	\$0	\$9	\$60	\$194	\$0	\$23	401	\$23,949	74	52.5	783
Biologicals	0.1	0.1	0.0	0.0	2	2	0	0	19	18	0	31	15	284	14	9.9	156
Antineoplastic Agents	0.9	0.4	0.0	0.5	131	115	0	16	144	261	0	34	31	4,451	4	2.8	34
Endocrine/Metabolic Drugs	1.3	0.4	0.1	0.8	74	32	16	26	57	82	147	33	872	49,813	63	44.7	676
Cardiovascular Agents	2.0	0.4	0.0	1.5	77	37	6	34	39	82	120	24	1,542	60,711	78	55.3	787
Respiratory Agents	1.3	0.7	0.0	0.6	99	82	1	16	77	119	80	28	566	43,444	41	29.1	437
Gastrointestinal Agents	1.2	0.3	0.1	0.8	78	50	12	17	68	156	176	22	840	57,043	68	48.2	729
Genitourinary Agents	0.8	0.5	0.1	0.2	57	39	13	5	71	84	96	27	287	20,504	36	25.5	357
CNS Drugs	2.1	0.9	0.2	1.0	184	136	19	29	89	155	102	29	2,315	206,082	106	75.2	1,122
Stimulants/Anti-obesity/Anorexia	0.6	0.0	0.0	0.6	22	0	0	21	36	21	0	37	27	979	5	3.5	45
Miscellaneous Psychological/Neurological Agents	1.1	1.1	0.0	0.0	894	894	0	0	793	793	0	0	89	70,619	10	7.1	79
Analgesics and Anesthetics	1.5	0.2	0.0	1.3	65	24	1	40	45	133	78	32	1,123	50,061	76	53.9	769
Neuromuscular Agents	1.7	0.5	0.0	1.2	122	71	2	50	72	156	48	41	1,244	89,190	67	47.5	730
Nutritional Products	0.9	0.0	0.0	0.9	18	0	1	17	19	6	71	19	316	6,144	37	26.2	342
Hematological Agents	1.5	0.5	0.0	1.0	134	119	1	15	90	251	20	15	587	52,746	38	27.0	393
Topical Products	0.6	0.2	0.0	0.4	29	17	2	10	48	110	79	24	481	23,180	73	51.8	789
Miscellaneous Products	0.4	0.2	0.0	0.2	26	24	0	1	70	150	0	5	18	1,254	5	3.5	49
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	12	0	0	0	37	0	0	0	12	448	4	2.8	38
TOTAL NO. OF RX AND RX \$	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	10,766	760,902	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2006 file for South Dakota, released by CMS in 7/2009. 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 155 beneficiaries who were in nursing facilities for part of their enrollment and their 1,468 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 South Dakota, 1.6 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, SOUTH DAKOTA, 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	\$116,914	66	46.8	718	0.9	\$173	\$163
ANTIDEPRESSANTS	75,945	109	77.3	1,203	0.9	68	63
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	70,619	11	7.8	80	1.1	793	883
ANTICONVULSANT	63,372	61	43.3	678	1.2	79	93
ANTIASTHMATIC	38,001	52	36.9	574	0.8	80	66
ULCER DRUGS	32,616	72	51.1	760	0.8	55	43
ANALGESICS - Narcotic	28,400	82	58.2	826	1.0	34	34
ANTICOAGULANTS	28,285	25	17.7	265	1.6	66	107
ANTIDIABETIC	26,325	48	34.0	517	1.0	49	51
ANTIHYPERLIPIDEMIC	25,632	30	21.3	316	0.9	94	81
Total	506,109	556	n.a.	5,937	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2006 file for South Dakota, released by CMS in 7/2009. 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 155 beneficiaries who were in nursing facilities for part of their enrollment and their 1,468 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, SOUTH DAKOTA, 2006

Beneficiary Characteristics	All Top 10 Drug Groups							ANTIPSYCHOTICS			ANTIDEPRESSANTS		
	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	5,823	\$506,109	66	46.8	718	0.9	\$163	109	77.3	1,203	0.9	\$63	
Female													
All Females	2,942	290,342	30	41.1	335	1.0	176	61	83.6	674	0.9	62	
Female, Disabled													
All Ages	2,724	281,261	29	50.9	324	1.0	181	54	94.7	616	0.9	64	
64 or younger	2,724	281,261	29	50.9	324	1.0	181	54	94.7	616	0.9	64	
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	218	9,081	1	6.3	11	1.1	17	7	43.8	58	0.7	45	
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
65-74	54	2,564	0	0.0	0	0.0	0	2	200.0	18	1.0	69	
75-84	22	516	0	0.0	0	0.0	0	1	33.3	8	0.3	4	
85 and older	142	6,001	1	8.3	11	1.1	17	4	33.3	32	0.7	42	
Male													
All Males	2,881	215,767	36	52.9	383	0.9	152	48	70.6	529	0.9	64	
Male, Disabled													
All Ages	2,769	205,934	33	57.9	361	0.9	154	47	82.5	519	0.9	64	
64 or younger	2,769	205,934	33	57.9	361	0.9	154	47	82.5	519	0.9	64	
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	112	9,833	3	27.3	22	0.9	111	1	9.1	10	1.0	65	
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
65-74	51	3,223	0	0.0	0	0.0	0	1	100.0	10	1.0	65	
75-84	23	2,502	2	66.7	10	0.7	68	0	0.0	0	0.0	0	
85 and older	38	4,108	1	14.3	12	1.1	146	0	0.0	0	0.0	0	
Unknown	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	

Source: Data for this table are from the MAX 2006 file for South Dakota, released by CMS in 7/2009. 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 155 beneficiaries who were in nursing facilities for part of their enrollment and their 1,468 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, SOUTH DAKOTA, 2006

Beneficiary Characteristics	MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL					ANTICONVULSANT					ANTIASTHMATIC				
	Number of Users	Users as %	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as %	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as %	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
		of All-Year Nursing Facility Residents					of All-Year Nursing Facility Residents								
All	11	7.8	80	1.1	\$883	61	43.3	678	1.2	\$94	52	36.9	574	0.8	\$66
Female															
All Females	7	9.6	59	1.1	1,127	28	38.4	327	1.1	120	25	34.2	258	0.8	78
Female, Disabled															
All Ages	4	7.0	48	1.2	1,364	28	49.1	327	1.1	120	22	38.6	228	0.8	85
64 or younger	4	7.0	48	1.2	1,364	28	49.1	327	1.1	120	22	38.6	228	0.8	85
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	3	18.8	11	1.0	97	0	0.0	0	0.0	0	3	18.8	30	0.6	27
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	2	200.0	18	0.9	44
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	3	25.0	11	1.0	97	0	0.0	0	0.0	0	1	8.3	12	0.1	1
Male															
All Males	4	5.9	21	1.0	195	33	48.5	351	1.2	69	27	39.7	316	0.9	57
Male, Disabled															
All Ages	2	3.5	11	1.2	267	33	57.9	351	1.2	69	24	42.1	286	0.9	58
64 or younger	2	3.5	11	1.2	267	33	57.9	351	1.2	69	24	42.1	286	0.9	58
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	2	18.2	10	0.9	117	0	0.0	0	0.0	0	3	27.3	30	0.4	41
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	3	300.0	30	0.4	41
75-84	2	66.7	10	0.9	117	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 South Dakota, released by CMS in 7/2009. 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 155 beneficiaries who were in nursing facilities for part of their enrollment and their 1,468 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, SOUTH DAKOTA, 2006

Beneficiary Characteristics	ULCER DRUGS					ANALGESICS - Narcotic					ANTICOAGULANTS							
	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 \$
		Residents	Among Users					Residents	Among Users					Residents	Among Users			
All	72	51.1	760	0.8	\$43	82	58.2	826	1.0	\$34	25	17.7	265	1.6	\$107			
Female																		
All Females	36	49.3	390	0.8	41	45	61.6	465	0.8	29	12	16.4	122	1.6	20			
Female, Disabled																		
All Ages	28	49.1	318	0.8	43	39	68.4	414	0.8	28	12	21.1	122	1.6	20			
64 or younger	28	49.1	318	0.8	43	39	68.4	414	0.8	28	12	21.1	122	1.6	20			
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	8	50.0	72	0.9	31	6	37.5	51	0.7	36	0	0.0	0	0.0	0			
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0			
65-74	1	100.0	9	0.8	44	1	100.0	9	0.6	6	0	0.0	0	0.0	0			
75-84	1	33.3	8	1.0	45	2	66.7	16	0.8	8	0	0.0	0	0.0	0			
85 and older	6	50.0	55	0.9	26	3	25.0	26	0.8	64	0	0.0	0	0.0	0			
Male																		
All Males	36	52.9	370	0.7	45	37	54.4	361	1.3	42	13	19.1	143	1.7	181			
Male, Disabled																		
All Ages	32	56.1	324	0.7	42	35	61.4	351	1.3	43	12	21.1	133	1.6	192			
64 or younger	32	56.1	324	0.7	42	35	61.4	351	1.3	43	12	21.1	133	1.6	192			
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0			
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0			
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0			
Male, Other Eligibles																		
All Ages	4	36.4	46	0.7	71	2	18.2	10	0.3	7	1	9.1	10	1.9	24			
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0			
65-74	1	100.0	10	0.9	93	0	0.0	0	0.0	0	1	100.0	10	1.9	24			
75-84	0	0.0	0	0.0	0	2	66.7	10	0.3	7	0	0.0	0	0.0	0			
85 and older	3	42.9	36	0.7	65	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 South Dakota, released by CMS in 7/2009. 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 155 beneficiaries who were in nursing facilities for part of their enrollment and their 1,468 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, SOUTH DAKOTA, 2006

Beneficiary Characteristics	ANTIDIABETIC					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	48	34.0	517	1.0	\$51	30	21.3	316	0.9	\$81	141	1,379
Female												
All Females	29	39.7	330	1.0	55	14	19.2	157	0.9	89	73	716
Female, Disabled												
All Ages	25	43.9	285	1.0	63	14	24.6	157	0.9	89	57	607
64 or younger	25	43.9	285	1.0	63	14	24.6	157	0.9	89	57	607
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	4	25.0	45	0.8	8	0	0.0	0	0.0	0	16	109
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	1	100.0	9	0.9	7	0	0.0	0	0.0	0	1	9
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	12
85 and older	3	25.0	36	0.8	8	0	0.0	0	0.0	0	12	88
Male												
All Males	19	27.9	187	1.2	43	16	23.5	159	0.8	74	68	663
Male, Disabled												
All Ages	19	33.3	187	1.2	43	14	24.6	144	0.9	76	57	560
64 or younger	19	33.3	187	1.2	43	14	24.6	144	0.9	76	57	560
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	2	18.2	15	0.4	50	11	103
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	1	100.0	10	0.2	17	1	10
75-84	0	0.0	0	0.0	0	1	33.3	5	0.8	117	3	18
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	7	75
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 South Dakota, released by CMS in 7/2009. 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 155 beneficiaries who were in nursing facilities for part of their enrollment and their 1,468 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}
 SOUTH DAKOTA, 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	17,579	15.9	0.4	49,331	\$8	\$884,550	\$18	2.1	110,258	
Age										
5 and younger	5,378	16.3	0.3	9,142	5	156,703	17	2.9	32,974	
6-14	4,310	12.5	0.2	7,881	4	144,686	18	1.4	34,567	
15-20	2,588	14.5	0.3	6,132	7	118,527	19	2.1	17,877	
21-44	3,751	18.6	0.7	14,062	12	241,196	17	2.0	20,220	
45-64	1,524	33.7	2.6	11,910	49	219,595	18	2.4	4,519	
65-74	8	19.0	1.1	48	25	1,054	22	6.2	42	
75-84	9	33.3	2.2	59	36	969	16	2.9	27	
85 and older	11	36.7	3.2	97	61	1,820	19	8.3	30	
Unknown	0	0.0	0.0	0	0	0	0	0.0	2	
Basis of Eligibility^c										
Aged	23	34.8	2.9	189	50	3,312	18	5.1	66	
Disabled	2,690	30.7	2.2	19,204	41	360,660	19	1.9	8,760	
Adults	3,414	16.3	0.5	9,968	8	164,599	17	2.3	20,994	
Children	11,426	14.2	0.2	19,813	4	353,686	18	2.1	80,362	
Unknown	26	34.2	2.1	157	30	2,293	15	1.4	76	
Gender										
Female	10,431	17.1	0.5	31,828	9	563,319	18	2.3	61,111	
Male	7,148	14.5	0.4	17,503	7	321,231	18	1.7	49,147	
Unknown	0	0.0	0.0	0	0	0	0	0.0	0	
Race										
White	11,760	19.6	0.6	35,215	11	636,718	18	2.0	59,888	
African American	366	11.6	0.2	745	4	13,593	18	2.0	3,148	
Other/unknown	5,453	11.5	0.3	13,371	5	234,239	18	2.4	47,222	
Use of Nursing Facilities^d										
Entire year	86	61.0	7.4	1,038	135	19,035	18	2.5	141	
Part year	108	69.7	6.6	1,026	119	18,370	18	3.5	155	
None	17,385	15.8	0.4	47,267	8	847,145	18	2.0	109,962	
Maintenance Assistance Status										
Cash	6,334	18.6	0.8	27,061	14	488,626	18	2.1	34,031	
Medically needy	0	0.0	0.0	0	0	0	0	0.0	0	
Poverty related	7,450	14.2	0.2	12,590	4	229,011	18	2.1	52,571	
Other/unknown	3,795	16.0	0.4	9,680	7	166,913	17	1.9	23,656	

Source: Data for this table are from the MAX 2006 file for South Dakota, released by CMS in 7/2009. 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 1 on Table 1 for methodology used to determine use of nursing facilities.

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

TABLE ND.12
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
 AMONG NONDUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a,b}
 SOUTH DAKOTA, 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	0.0	\$1	\$18	\$0	\$0	1,015,818
Age						
5 and younger	0.0	1	17	0	0	302,923
6-14	0.0	0	18	0	0	346,625
15-20	0.0	1	19	0	0	160,298
21-44	0.1	1	17	0	0	162,008
45-64	0.3	5	18	0	1	43,102
65-74	0.1	3	22	0	1	372
75-84	0.3	4	16	0	1	232
85 and older	0.4	7	19	0	0	256
Unknown	0.0	0	0	0	0	2
Basis of Eligibility^c						
Aged	0.3	6	18	0	1	553
Disabled	0.2	4	19	0	1	91,746
Adults	0.1	1	17	0	0	160,584
Children	0.0	0	18	0	0	762,265
Unknown	0.2	3	15	0	1	670
Gender						
Female	0.1	1	18	0	0	553,423
Male	0.0	1	18	0	0	462,395
Unknown	0.0	0	0	0	0	0
Race						
White	0.1	1	18	0	0	542,767
African American	0.0	1	18	0	0	27,170
Other/unknown	0.0	1	18	0	0	445,881
Use of Nursing Facilities^d						
Entire year	0.8	14	18	0	4	1,379
Part year	0.7	13	18	0	2	1,468
None	0.0	1	18	0	0	1,012,971
Maintenance Assistance Status						
Cash	0.1	1	18	0	0	329,279
Medically needy	0.0	0	0	0	0	0
Poverty related	0.0	0	18	0	0	488,291
Other/unknown	0.0	1	17	0	0	198,248

Source: Data for this table are from the MAX 2006 file for South Dakota, released by CMS in 7/2009. 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}
 SOUTH DAKOTA, 2006

Drug Category	Number of Users	Rx \$ per User	Total Rx \$	Rx \$ as a		Number Rx as a	
				Percentage of All Part D Excluded Rx \$	Total Number Rx. \$ per Rx	Percentage of All Part D Excluded Rx	Excluded Rx
All	20,797	\$43	\$884,550	100.0	49,331	\$18	100.0
Anorexia or weight loss/gain	22	203	4,475	0.5	60	75	0.1
Fertility drugs	0	0	0	0.0	0	0	0.0
Drugs for cosmetic purposes	70	13	875	0.1	84	10	0.2
Cough and cold medications	9,642	34	328,068	37.1	15,064	22	30.5
Vitamins and minerals	689	81	56,141	6.3	3,274	17	6.6
Non-prescription drugs	7,771	38	294,378	33.3	16,979	17	34.4
Barbiturates	150	75	11,260	1.3	1,399	8	2.8
Benzodiazepines	2,257	73	165,355	18.7	11,820	14	24.0
Other Part D Excl Rx Drugs	196	122	23,998	2.7	651	37	1.3

Source: Data for this table are from the MAX 2006 file for South Dakota, released by CMS in 7/2009. 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 ND.11.

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, SOUTH DAKOTA, 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	110,258	66	8,760	20,994	80,362	76	1,015,818	553	91,746	160,584	762,265	670
Age												
5 and younger	32,974	0	697	1	32,276	0	302,923	0	6,999	1	295,923	0
6-14	34,567	0	1,406	0	33,161	0	346,625	0	15,552	0	331,073	0
15-20	17,877	0	1,118	1,870	14,889	0	160,298	0	12,069	13,230	134,999	0
21-44	20,220	0	2,595	17,566	35	24	162,008	0	27,334	134,195	269	210
45-64	4,519	0	2,912	1,555	0	52	43,102	0	29,494	13,148	0	460
65-74	42	15	26	1	0	0	372	117	246	9	0	0
75-84	27	23	4	0	0	0	232	195	37	0	0	0
85 and older	30	28	2	0	0	0	256	241	15	0	0	0
Unknown	2	0	0	1	1	0	2	0	0	1	1	0
Gender												
Female	61,111	40	4,199	17,221	39,575	76	553,423	319	44,354	132,937	375,143	670
Male	49,147	26	4,561	3,773	40,787	0	462,395	234	47,392	27,647	387,122	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	59,888	50	5,005	10,956	43,809	68	542,767	416	51,380	78,766	411,610	595
African American	3,148	2	116	631	2,399	0	27,170	14	1,080	4,449	21,627	0
Other/unknown	47,222	14	3,639	9,407	34,154	8	445,881	123	39,286	77,369	329,028	75
Use of Nursing Facilities^c												
Entire year	141	27	114	0	0	0	1,379	212	1,167	0	0	0
Part year	155	4	147	4	0	0	1,468	33	1,387	48	0	0
None	109,962	35	8,499	20,990	80,362	76	1,012,971	308	89,192	160,536	762,265	670
Maintenance Assistance Status												
Cash	34,031	35	8,058	9,906	16,032	0	329,279	324	85,526	81,845	161,584	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0
Poverty related	52,571	0	2	4,488	48,005	76	488,291	0	12	24,909	462,700	670
Other/unknown	23,656	31	700	6,600	16,325	0	198,248	229	6,208	53,830	137,981	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	110,258	66	8,760	20,994	80,362	76	1,015,818	553	91,746	160,584	762,265	670
FFS part year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
FFS part year, no Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
MC all year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
MC all year, no Rx claims	0	0	0	0	0	0	0	0	0	0	0	0

Source: Data for this table are from the MAX 2006 file for South Dakota, released by CMS in 7/2009. 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, SOUTH DAKOTA, 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	110,258	1,015,818	110,258	1,015,818	0	0
Fee-for-service (FFS) all year	110,258	1,015,818	110,258	1,015,818	0	0
FFS part year, with Rx claims	0	0	0	0	0	0
FFS part year, with no Rx claims	0	0	0	0	0	0
Managed care (MC) all year, with Rx claims	0	0	0	0	0	0
MC all year, with no Rx claims	0	0	0	0	0	0

Source: Data for this table are from the MAX 2006 file for South Dakota, released by CMS in 7/2009. 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