The average annual number of prescriptions per user ranged from about 10 in New Mexico to 46 in Indiana.

The average annual expenditure per user ranged from $39.35 in New Jersey to $148.95 in Florida, $155.67 in Nebraska, and $158.58 in Indiana.

The average cost per prescription ranged from $2.91 in Kentucky and $2.94 in Illinois to $4.74 in New Mexico.

Because of the diversity and complexity of the various State drug programs, the Task Force selected five for intensive study--California, because of its size; Louisiana and West Virginia, because of their approach in approving drugs used only for the treatment of specific diseases; Kentucky, because of its limited formulary; and Pennsylvania, because of its extensive formulary, which is used primarily as a guide to prescribing.

Other studies were conducted on the programs in Indiana, Nebraska, North Carolina, Oklahoma, and South Dakota.

In nearly all of these States, per capita drug costs and average prescription prices for program beneficiaries were higher than those for the total public. Whether this was the result of program abuse or of the