

STATISTICAL COMPENDIUM: MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 1999 KANSAS

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TABLE 1
OVERVIEW OF BENEFICIARY SELECTION CRITERIA FOR STUDY POPULATION
KANSAS, 1999

Inclusion Criteria (1999)	No. of Dual and Non-dual Eligible Benes (Cell)	No. of Dual Eligible Benes (Cell) ^g
1. Benes who were eligible for Medicaid during at least one month ^a	256,690 (A)	51,714 (E)
2. Benes who had Medicaid pharmacy benefits during at least one month ^b	251,078 (B)	47,221 (F)
3. Benes who had fee-for-service pharmacy benefit coverage during at least one month ^{c, d, e}	234,658 (C)	44,680 (G)
4. Benes who were all-year nursing facility residents ^f	10,678 (D)	10,187 (H)

Source: Data for this table are from the MAX 1999 file for Kansas, released by CMS in 1/2004. This table was produced on 06/25/2004.

- a. MAX data element "Eligible Months Count" was used to determine an individual's Medicaid eligibility. All individuals who had a value greater than zero were considered as beneficiaries and counted in Cell A.
- b. Counts in Cell B were obtained by excluding from Cell A beneficiaries who never had pharmacy benefit coverage during their Medicaid enrollment in 1999 (based on MAX data element "Eligible Restricted Benefits Flag"). Characteristics of beneficiaries represented by Cell B are shown in Appendix Table A.1.
- c. Cell C represents the study population for Tables 2 through 7D. Cell C was obtained by excluding from Cell B beneficiaries who were under MC plans during all months of Medicaid eligibility in 1999, because the MAX files would not include separate prescription drug claims for those beneficiaries. MC plans include HMOs, PHPs, or other MC organizations that provided pharmacy benefits under capitation arrangements. Beneficiaries included are those who were in fee-for-service, PCCM, or PHP plans in selected states. Beneficiaries in PHPs were included if they were in one of 18 states where no PHP in the state provided a pharmacy benefit (see footnote e). For all other states, beneficiaries in PHPs were excluded. For example, if a beneficiary was under fee-for-service, PCCM, or PHPs in one of the 18 states for three months of the year but enrolled in an MC plan for the remaining nine months, only the three months were counted toward the number of benefit months associated with the beneficiary. Therefore, benefit months included represent the benefit months with fee-for-service pharmacy benefits. Beneficiaries and their benefit months included and excluded based on this criterion are shown in Appendix Table A.2.
- d. The total Medicaid pharmacy reimbursement for Kansas in 1999 was \$142,087,767, of which \$6,417,722 was excluded from our analysis because those claims were made for beneficiaries who were outside the study population or took place during months that were excluded from the analysis.
- e. The 18 states where no PHP provided a pharmacy benefit in 1999 were AL, AR, CO, FL, GA, IA, IL, KY, MA, MI, MT, NE, NY, NC, OR, PA, UT, and WI. This list was constructed based on consultation with CMS staff and two CMS documents, which can be found at <http://www.cms.hhs.gov/medicaid/managedcare/mmcms699.asp> and at <http://www.cms.hhs.gov/medicaid/managedcare/mmcms99.asp>.
- f. Cell D represents the study population for Tables 8 through 10D. All-year nursing facility residents are the beneficiaries who resided in nursing facilities throughout their enrollment in 1999. These beneficiaries were identified by comparing the number of months during which the MAX files contained at least one claim from nursing facilities to the number of Medicaid eligible months. If the former is greater than or equal to the latter, the beneficiary was considered an all-year resident. If the former is less than the latter but not equal to zero, the beneficiary was considered a part-year resident. Part-year residents were excluded from the analysis because they are likely to be short-term residents and the level and pattern of their pharmacy benefit use may differ substantially from longer-term residents. The number of part-year residents and their benefit months are presented in footnotes to Tables 8 through 10D. Residents of mental hospitals for the aged, inpatient psychiatric facilities for individuals under age 21, or intermediate care facilities for the mentally retarded were excluded from the analysis.
- g. Pharmacy benefit use and reimbursement among full dual eligible beneficiaries are presented in Tables 11 through 18. To determine Medicaid-Medicare dual eligibility status, two MAX data elements ("Eligible Medicare Crossover Code -- Annual New Values" and "Eligible Restricted Benefits Flag") were used in combination. Beneficiaries represented in Cell G, the dual study population, include all dual eligible beneficiaries who had a fee-for-service pharmacy benefit at least during one month in 1999. All benefit months of such dual eligible beneficiaries, of which 4.2 percent were restricted benefit months without a pharmacy benefit in Kansas, were used in the dual tables. Characteristics of dual eligible beneficiaries represented by Cell F are shown in Appendix Table A.3, and characteristics of beneficiaries and their benefit months included in Cell F but excluded from Cell G are shown in Appendix Table A.4.

Bene(s) = beneficiary (or beneficiaries); CMS = Center for Medicare and Medicaid Services; HMO = health maintenance organization; MAX = Medicaid Analytic Extract; MC = managed care; PCCM = primary care case management; PHP = prepaid health plan.

TABLE 2
 CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a,b}
 KANSAS, 1999

Beneficiary Characteristics	No. of Benefes							No. of Bene Mos						
	All	Aged	Disabled	Adults	Children	Other/Unknown	All	Aged	Disabled	Adults	Children	Other/Unknown		
All	234,688	25,803	46,402	34,081	128,372	0	1,878,483	235,414	475,521	187,156	980,392	0		
Age														
5 and younger	59,712	0	1,315	0	58,397	0	436,313	0	12,735	0	423,578	0		
6-14	56,484	0	3,626	0	52,858	0	463,393	0	38,615	0	424,778	0		
15-20	26,499	2	2,647	6,804	17,046	0	195,794	19	26,974	37,233	131,568	0		
21-44	44,463	1	18,336	26,056	70	0	331,699	3	189,156	142,073	467	0		
45-64	19,323	3	18,101	1,219	0	0	190,307	36	182,441	7,830	0	0		
65-74	8,892	6,803	2,087	2	0	0	86,715	64,150	22,545	20	0	0		
75-84	9,360	9,124	236	0	0	0	86,722	84,218	2,504	0	0	0		
85 and older	9,924	9,870	54	0	0	0	87,539	86,988	551	0	0	0		
Unknown	1	0	0	0	1	1	0	0	0	0	1	0		
Gender														
Female	137,200	19,409	24,940	29,941	62,910	0	1,087,577	180,004	259,072	167,095	481,406	0		
Male	97,435	6,394	21,462	4,140	65,439	0	790,874	55,410	216,449	20,061	498,954	0		
Unknown	23	0	0	0	23	0	32	0	0	0	32	0		
Race														
White	159,377	22,103	35,054	23,030	79,190	0	1,283,133	199,744	358,748	124,810	599,831	0		
African American	42,746	2,069	8,109	6,672	25,896	0	356,004	19,934	84,106	40,267	211,697	0		
Other/unknown	32,565	1,631	3,239	4,379	23,286	0	239,346	15,736	32,667	22,079	168,884	0		
Use of Nursing Facilities														
All year	10,678	9,474	1,204	0	0	0	100,530	87,930	12,600	0	0	0		
Part year	4,883	4,120	759	3	1	0	40,575	33,180	7,355	31	9	0		
None	219,097	12,209	44,439	34,078	128,371	0	1,737,378	114,304	455,566	187,125	980,383	0		
Maintenance Assistance Status														
Cash	77,856	4,868	34,299	15,284	23,405	0	683,411	51,089	359,955	83,510	188,857	0		
Medically needy	32,199	19,975	9,587	460	2,177	0	285,280	175,819	89,875	3,175	16,411	0		
Poverty-related	96,911	809	1,247	11,354	83,501	0	672,718	7,228	12,047	51,608	601,835	0		
Other/unknown	27,692	151	1,269	6,983	19,289	0	237,074	1,278	13,644	48,863	173,289	0		
Dual Medicare Status^c														
Full dual, all year	41,123	23,696	17,281	108	38	0	395,752	215,666	178,955	789	342	0		
Full dual, part year	3,557	1,511	2,035	8	3	0	35,108	14,523	20,458	91	36	0		
Non-dual, all year	189,978	596	27,086	33,965	128,331	0	1,447,623	5,225	276,108	186,276	980,014	0		
Managed Care Status														
FFS all year	196,310	21,831	43,631	27,371	103,477	0	1,710,857	212,933	458,901	161,377	877,646	0		
FFS part year, with Rx claims	20,033	3,630	2,234	4,129	10,040	0	103,415	20,781	13,768	17,598	51,268	0		
FFS part year, no Rx claims	18,315	342	537	2,581	14,855	0	64,211	1,700	2,852	8,181	51,478	0		

Source: Data for this table are from the MAX 1999 file for Kansas, released by CMS in 1/2004. This table was produced on 06/25/2004.

Table 2

All Medicaid Beneficiaries

a. Table 2 includes the beneficiaries represented by Cell C 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. The "Full dual, all year" group contains beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefits during all months of Medicaid enrollment in 1999. The "Full dual, part year" group contains beneficiaries who had such benefits for some, but not all, months of their enrollment. The "Non-dual, all year" group includes beneficiaries who were never dually eligible or dually eligible but never had Medicaid fee-for-service pharmacy benefits. Refer to footnote g of Table 1 for more information about how we determined dual eligibility status.

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

TABLE 3
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC^{a,b}
 KANSAS, 1999

Beneficiary Characteristics	% with at Least One Rx	Mean No. of Rx	Mean Rx \$	\$ per Rx	Mean \$, All Services	Rx \$ as % of All Services	Mean OTC Drug \$ ^c	No. of Beneficiaries
All	63.3 %	12.7	\$578	\$45	\$4,555	12.7 %	\$23	234,658
Age								
5 and younger	56.0	2.7	71	26	1,215	5.9	3	59,712
6-14	51.3	3.8	168	44	1,214	13.8	4	56,484
15-20	58.5	5.1	238	47	2,740	8.7	6	26,499
21-44	67.6	12.4	734	59	6,287	11.7	20	44,463
45-64	80.7	35.9	1,877	52	11,199	16.8	85	19,323
65-74	82.4	40.5	1,732	43	9,342	18.5	94	8,892
75-84	88.7	45.2	1,740	39	12,196	14.3	86	9,360
85 and older	93.9	45.3	1,517	34	15,848	9.6	76	9,924
Unknown	0.0	0.0	0	0	0	0.0	0	1
Basis of Eligibility								
Aged	88.5	44.3	1,660	38	13,046	12.7	84	25,803
Disabled	79.7	28.1	1,603	57	11,329	14.1	57	46,402
Adults	60.3	4.2	139	34	1,665	8.3	7	34,081
Children	53.1	3.1	107	34	1,130	9.5	3	128,372
Unknown	0.0	0.0	0	0	0	0.0	0	0
Gender								
Female	66.5	15.1	641	43	4,667	13.7	29	137,200
Male	58.8	9.5	489	52	4,350	11.2	15	97,435
Unknown	0.0	0.0	0	0	1,167	0.0	0	23
Race								
White	67.8	15.7	718	46	5,505	13.0	28	159,377
African American	55.5	7.5	334	45	2,910	11.5	16	42,746
Other/unknown	51.4	5.0	214	43	1,920	11.2	11	32,535
Use of Nursing Facilities								
Entire year	97.2	58.5	2,289	39	21,983	10.4	98	10,678
Part year	96.8	51.4	2,004	39	15,559	12.9	87	4,883
None	60.9	9.6	463	48	3,439	13.5	18	219,097
Maintenance Assistance Status								
Cash	70.0	15.7	796	51	5,238	15.2	32	77,856
Medically needy	81.3	41.1	1,778	43	15,479	11.5	76	32,199
Poverty related	51.4	2.6	82	32	940	8.8	3	96,911
Other/unknown	65.2	7.0	306	44	2,414	12.7	8	27,692

Source: Data for this table are from the MAX 1999 file for Kansas, released by CMS in 1/2004. This table was produced on 06/25/2004.

Table 3

All Medicaid Beneficiaries

a. Table 3 includes beneficiaries represented by Cell C 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. Information about OTC drugs appears in this column only. OTC drugs are not part of the reimbursement amount for prescription drugs.

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

TABLE 4
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a,b}
 KANSAS, 1999

Beneficiary Characteristics	Mean No. of Rx	Mean Rx \$	Rx \$ as % of All Services	No. of Rx, % with:						Mean \$, All Services	Benes	Bene Mos
				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			
All	1.6	\$72	12.7 %	36.7 %	40.2 %	6.4 %	9.1 %	5.5 %	2.0 %	\$567	234,658	1,878,483
Age												
5 and younger	0.4	10	5.9	44.0	52.1	2.8	1.0	0.1	0.0	166	59,712	436,313
6-14	0.5	20	13.8	48.7	43.3	4.2	3.2	0.4	0.1	148	56,484	463,393
15-20	0.7	32	8.7	41.5	47.1	6.0	4.4	0.9	0.1	371	26,499	195,794
21-44	1.7	98	11.7	32.4	41.1	9.6	11.2	4.5	1.2	843	44,463	331,699
45-64	3.6	191	16.8	19.3	21.2	11.9	24.9	16.7	6.0	1,137	19,323	190,307
65-74	4.1	178	18.5	17.6	17.8	10.8	24.3	20.4	9.1	958	8,892	86,715
75-84	4.9	188	14.3	11.3	13.1	10.0	27.9	26.4	11.3	1,316	9,360	86,722
85 and older	5.1	172	9.6	6.1	11.0	9.8	33.0	29.0	11.1	1,797	9,924	87,539
Unknown	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	0	1	1
Basis of Eligibility												
Aged	4.9	182	12.7	11.5	13.0	9.8	28.6	26.2	11.0	1,430	25,803	235,414
Disabled	2.7	156	14.1	20.3	30.3	12.3	21.4	11.9	3.8	1,106	46,402	475,521
Adults	0.8	25	8.3	39.7	47.3	7.2	4.8	0.9	0.2	303	34,081	187,156
Children	0.4	14	9.5	46.9	47.4	3.4	2.0	0.3	0.0	148	128,372	980,392
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Gender												
Female	1.9	81	13.7	33.5	39.9	6.8	10.3	6.8	2.7	589	137,200	1,087,577
Male	1.2	60	11.2	41.2	40.6	5.9	7.5	3.7	1.1	536	97,435	790,874
Unknown	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	839	23	32
Race												
White	2.0	89	13.0	32.2	39.6	7.2	11.1	7.2	2.7	684	159,377	1,283,133
African American	0.9	40	11.5	44.5	41.5	5.1	5.8	2.5	0.6	349	42,746	356,004
Other/unknown	0.7	29	11.2	48.6	41.5	4.2	4.1	1.3	0.4	261	32,535	239,346
Use of Nursing Facilities												
Entire year	6.2	243	10.4	2.8	7.9	7.6	30.2	35.4	16.1	2,335	10,678	100,530
Part year	6.2	241	12.9	3.2	8.5	8.2	31.6	33.2	15.2	1,873	4,883	40,575
None	1.2	58	13.5	39.1	42.5	6.3	7.6	3.4	1.0	434	219,097	1,737,378
Maintenance Assistance Status												
Cash	1.8	91	15.2	30.0	40.3	9.2	12.8	6.1	1.7	597	77,856	683,411
Medically needy	4.6	201	11.5	18.7	13.2	8.8	25.5	23.6	10.2	1,747	32,199	285,280
Poverty related	0.4	12	8.8	48.6	46.5	3.1	1.5	0.2	0.1	135	96,911	672,718
Other/unknown	0.8	36	12.7	34.8	49.3	7.6	6.6	1.5	0.3	282	27,692	237,074

Source: Data for this table are from the MAX 1999 file for Kansas, released by CMS in 1/2004. This table was produced on 06/25/2004.

Table 4

All Medicaid Beneficiaries

a. Table 4 includes the beneficiaries represented by Cell C 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.

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE 5
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC^{a, b, c}
 KANSAS, 1999

Beneficiary Characteristics	All Rx		Patented Brand-Name Drugs		Off-Patent Brand-Name Drugs		Generic Drugs	
	No. of Rx	Rx \$	No. of Rx	\$ per Rx	No. of Rx	Rx \$	No. of Rx	Rx \$
All	1.6	\$72	0.6	\$46	0.2	\$12	0.7	\$11
Age								
5 and younger	0.4	10	0.1	6	0.0	1	0.2	3
6-14	0.5	20	0.2	14	0.0	2	0.2	4
15-20	0.7	32	0.3	23	0.1	4	0.3	5
21-44	1.7	98	0.7	67	0.2	17	0.7	11
45-64	3.6	191	1.5	122	0.5	33	1.5	27
65-74	4.1	178	1.6	108	0.7	31	1.7	29
75-84	4.9	188	1.7	108	0.9	37	2.0	33
85 and older	5.1	172	1.6	92	1.0	37	2.3	34
Unknown	0.0	0	0.0	0	0.0	0	0.0	0
Basis of Eligibility								
Aged	4.9	182	1.6	104	0.9	63	2.1	33
Disabled	2.7	156	1.1	104	0.4	26	1.1	20
Adults	0.8	25	0.3	16	0.1	4	0.4	5
Children	0.4	14	0.2	9	0.0	1	0.2	3
Unknown	0.0	0	0.0	0	0.0	0	0.0	0
Gender								
Female	1.9	81	0.7	51	0.3	14	0.8	13
Male	1.2	60	0.4	39	0.2	10	0.5	9
Unknown	0.0	0	0.0	0	0.0	0	0.0	0
Race								
White	2.0	89	0.7	56	0.3	15	0.8	14
African American	0.9	40	0.3	26	0.1	7	0.4	6
Other/unknown	0.7	29	0.3	19	0.1	4	0.3	4
Use of Nursing Facilities								
Entire year	6.2	243	2.0	135	1.2	52	2.7	43
Part year	6.2	241	2.1	143	1.1	44	2.6	42
None	1.2	58	0.5	38	0.2	9	0.5	9
Maintenance Assistance								
Status								
Cash	1.8	91	0.7	59	0.2	15	0.8	13
Medically needy	4.6	201	1.6	121	0.8	38	1.9	32
Poverty related	0.4	12	0.1	8	0.0	1	0.2	3
Other/unknown	0.8	36	0.4	25	0.1	5	0.3	5

Source: Data for this table are from the MAX 1999 file for Kansas, released by CMS in 1/2004. This table was produced on 06/25/2004.

a. Table 5 includes the beneficiaries represented by Cell C 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.

Table 5

All Medicaid Beneficiaries

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 Kansas, 5.2 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 combined. For information about this classification method, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).

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

TABLE 6
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d}
 KANSAS, 1999

Therapeutic Category	No. of Rx per Bene Mo among Users				\$ per Bene Mo among Users				Total No. of Rx	Total Rx \$	No.	As % of All Benes	No. of Bene Mos				
	Patented		Off-Patent		Patented		Off-Patent										
	Total	Brand-Name	Generic	Total	Brand-Name	Generic	Total	Brand-Name						Generic			
Anti-infective Agents	0.3	0.1	0.0	0.1	\$11	\$9	\$0	\$2	\$39	\$68	\$41	\$12	290,057	\$11,368,336	103,356	44.0 %	996,614
Biologicals	0.3	0.2	0.0	0.0	451	333	47	71	1740	1,543	1,709	4,460	406	706,536	172	0.1	1,567
Antineoplastic Agents	0.5	0.2	0.1	0.2	86	59	18	9	162	304	125	45	9,361	1,514,941	1,831	0.8	17,615
Endocrine/Metabolic Drugs	0.6	0.3	0.1	0.2	22	16	3	3	34	55	22	13	252,921	8,639,736	40,020	17.1	396,014
Cardiovascular Agents	1.4	0.4	0.3	0.6	42	21	12	9	31	52	38	14	502,236	15,480,801	36,568	15.6	367,318
Respiratory Agents	0.5	0.3	0.0	0.2	19	15	0	5	38	55	27	19	268,404	10,118,887	52,540	22.4	524,163
Gastrointestinal Agents	0.6	0.3	0.1	0.2	44	29	9	5	69	106	83	22	167,625	11,640,918	26,057	11.1	263,546
Genitourinary Agents	0.4	0.2	0.0	0.2	14	11	0	3	38	50	30	20	47,419	1,784,742	12,703	5.4	123,155
CNS Drugs	1.0	0.6	0.2	0.3	81	58	18	5	78	104	101	18	435,076	34,098,684	42,355	18.0	420,999
Stimulants/Anti-obesity/Anorexia	0.6	0.2	0.1	0.4	22	6	3	12	35	37	38	34	39,499	1,401,979	6,541	2.8	65,185
Miscellaneous Psychological/Neurological Agents	0.4	0.3	0.0	0.0	42	39	2	1	103	113	109	28	13,123	1,350,646	3,277	1.4	31,971
Analgesics and Anesthetics	0.6	0.1	0.1	0.4	22	12	4	5	37	85	72	13	292,466	10,706,775	49,580	21.1	486,396
Neuromuscular Agents	0.9	0.4	0.1	0.4	46	31	5	9	50	86	42	22	228,943	11,392,693	24,114	10.3	248,512
Nutritional Products	0.5	0.0	0.2	0.3	10	0	5	5	20	23	28	15	85,715	1,678,534	18,212	7.8	167,392
Hematological Agents	0.8	0.1	0.4	0.3	38	19	10	9	49	229	28	27	59,308	2,930,007	7,756	3.3	76,669
Topical Products	0.3	0.1	0.0	0.1	7	4	1	2	26	42	34	13	137,290	3,633,709	51,044	21.8	511,764
Miscellaneous Products	0.3	0.1	0.0	0.1	32	21	8	3	123	161	261	32	9,847	1,215,178	3,741	1.6	38,152
Unknown Therapeutic Category	0.4	0.0	0.0	0.0	16	0	0	0	40	0	0	0	149,220	6,006,943	36,142	15.4	366,463
TOTAL NO. OF RX AND RX \$	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	2,988,916	135,670,045	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 1999 file for Kansas, released by CMS in 1/2004. This table was produced on 06/25/2004.

- a. Table 6 includes the beneficiaries represented by Cell C of Table 1. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 1999. 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/products/product_mddb.asp (May 13 2003).
- 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 Kansas, 5.2 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/products/product_mddb.asp (May 13 2003).

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Center for Medicare and Medicaid Services; CNS = Central Nervous System; MAX = Medicaid Analytic Extract; n.a. = not applicable; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE 7
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP^{a, b, c}
 KANSAS, 1999

Top 10 Drug Groups	Users				Among Users		
	Total Medicaid Rx \$	No. As % of All Benes	No. of Bene Mos	No. of Rx per Bene Mo	\$ per Rx	Rx \$ per Bene Mo	
ANTIPSYCHOTICS	\$18,180,449	20,602	8.8 %	218,984	0.7	\$119	\$83
ANTIDEPRESSANTS	11,929,708	37,103	15.8	385,616	0.5	57	31
ANTICONVULSANT	9,009,622	18,981	8.1	203,208	0.8	59	44
ULCER DRUGS	8,909,866	24,044	10.2	252,474	0.5	77	35
ANTIASTHMATIC	5,409,592	42,054	17.9	427,477	0.4	35	13
ANALGESICS - Narcotic	4,913,387	47,354	20.2	477,334	0.4	29	10
ANTIDIABETIC	4,688,805	14,796	6.3	156,144	0.7	42	30
ANALGESICS - ANTI-INFLAMMATORY	4,539,341	31,303	13.3	325,590	0.3	47	14
ANTIHYPERTENSIVE	4,300,872	19,516	8.3	205,156	0.6	35	21
CALCIUM BLOCKERS	3,442,418	9,943	4.2	104,712	0.6	52	33

Source: Data for this table are from the MAX 1999 file for Kansas, released by CMS in 1/2004. This table was produced on 06/25/2004.

- a. Table 7 includes the beneficiaries represented by Cell C of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 1999. 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 1999. For information about these drug groups, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).
- Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE 7A
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR TOP 10 DRUG GROUPS COMBINED
 AND FIRST AND SECOND GROUPS SEPARATELY, BY SEX, BOE, AND AGE^{a,b,c}
 KANSAS, 1999

Beneficiary Characteristics	All Top 10 Drug Groups					ANTIPSYCHOTICS					ANTIDEPRESSANTS					
	No. of Rx	Rx \$	No. of Users	Users as % of All Benes	Mean No. of Rx	No. of Users	Users as % of All Benes	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	Mean No. of Rx
All	1,350,246	\$75,324,060	20,602	8.8 %	0.7	218,984	8.8 %	0.7	\$83	37,103	15.8 %	0.5	\$31			
Female	911,366	48,398,694	11,599	8.5	0.7	122,948	8.5	0.7	74	25,685	18.7	0.6	31			
Disabled	441,781	27,390,906	6,146	24.6	0.7	68,946	24.6	0.7	93	12,234	49.1	0.5	33			
5 and younger	1,652	81,813	2	0.4	1.4	18	0.4	1.4	40	8	1.5	0.3	10			
6-14	6,622	371,458	106	8.3	0.6	1,197	8.3	0.6	61	177	13.8	0.5	23			
15-20	6,985	420,605	144	14.0	0.5	1,618	14.0	0.5	66	252	24.5	0.5	28			
21-44	145,018	9,923,988	2,950	31.2	0.7	32,948	31.2	0.7	94	5,052	53.5	0.5	33			
45-64	246,493	14,791,300	2,721	25.0	0.8	30,701	25.0	0.8	96	6,189	56.8	0.6	34			
65-74	32,098	1,658,785	208	13.7	0.7	2,308	13.7	0.7	79	515	33.9	0.5	28			
75-84	2,410	119,255	15	8.7	0.7	156	8.7	0.7	59	35	20.3	0.5	26			
85 and older	503	23,702	0	0.0	0.0	0	0.0	0.0	0	6	13.3	0.8	63			
Other Eligibles	469,585	21,007,788	5,453	4.9	0.6	54,002	4.9	0.6	49	13,451	12.0	0.6	29			
5 and younger	9,710	209,105	35	0.1	0.3	383	0.1	0.3	27	49	0.2	0.3	10			
6-14	23,209	931,704	404	1.6	0.5	4,413	1.6	0.5	40	1,160	4.5	0.4	20			
15-20	22,863	910,645	487	3.3	0.4	4,965	3.3	0.4	32	1,465	9.9	0.4	23			
21-44	43,464	1,469,071	518	2.3	0.3	4,270	2.3	0.3	19	2,840	12.4	0.3	22			
45-64	5,045	229,664	21	2.7	0.2	171	2.7	0.2	12	245	31.5	0.4	23			
65-74	93,600	4,750,092	900	20.2	0.8	9,530	20.2	0.8	76	1,715	38.6	0.6	33			
75-84	136,746	6,549,063	1,450	21.3	0.7	14,461	21.3	0.7	58	2,758	40.5	0.7	35			
85 and older	134,948	5,958,444	1,638	20.1	0.6	15,809	20.1	0.6	42	3,219	39.5	0.7	36			
Male	438,880	26,925,366	9,003	9.2	0.7	96,036	9.2	0.7	95	11,418	11.7	0.5	30			
Disabled	259,606	18,726,310	5,614	26.2	0.8	62,125	26.2	0.8	119	5,897	27.5	0.5	33			
5 and younger	2,616	98,149	18	2.3	0.4	200	2.3	0.4	31	14	1.8	0.3	6			
6-14	16,383	884,845	447	19.1	0.6	5,061	19.1	0.6	58	571	24.3	0.5	24			
15-20	11,002	749,357	314	19.4	0.6	3,488	19.4	0.6	73	363	22.4	0.5	31			
21-44	105,258	8,962,756	3,008	33.8	0.8	33,223	33.8	0.8	126	2,719	30.6	0.5	36			
45-64	114,265	7,513,216	1,747	24.3	0.9	19,249	24.3	0.9	132	2,102	29.2	0.6	32			
65-74	9,314	479,505	74	13.0	0.8	836	13.0	0.8	86	121	21.3	0.5	27			
75-84	715	36,139	6	9.4	0.8	68	9.4	0.8	56	7	10.9	0.5	26			
85 and older	53	2,343	0	0.0	0.0	0	0.0	0.0	0	0	0.0	0.0	0			
Other Eligibles	179,274	8,199,056	3,389	4.5	0.6	33,911	4.5	0.6	52	5,521	7.3	0.5	27			
5 and younger	13,863	324,434	67	0.2	0.3	707	0.2	0.3	24	104	0.3	0.3	12			
6-14	38,493	1,691,162	1,053	3.9	0.5	11,306	3.9	0.5	45	1,907	7.1	0.4	21			
15-20	19,114	1,062,742	716	7.9	0.5	7,246	7.9	0.5	55	1,038	11.4	0.5	27			
21-44	5,854	259,557	74	2.4	0.4	608	2.4	0.4	60	288	9.2	0.4	19			
45-64	1,944	87,388	2	0.5	0.4	13	0.5	0.4	11	67	15.1	0.4	23			
65-74	36,136	1,898,560	503	21.3	0.8	5,182	21.3	0.8	78	646	27.4	0.7	37			
75-84	37,704	1,762,030	530	23.0	0.7	4,956	23.0	0.7	55	794	34.4	0.7	36			
85 and older	26,166	1,113,183	444	25.7	0.6	3,893	25.7	0.6	34	677	39.2	0.7	35			
Unknown	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 1999 file for Kansas, released by CMS in 1/2004. This table was produced on 06/25/2004.

a. Table 7A includes the beneficiaries represented by Cell C of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 1999. 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 1999. For information about these drug groups, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mdmb.asp (May 13 2003).

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE 7B
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY,
 BY SEX, BOE, AND AGE^{a, b, c}
 KANSAS, 1999

Beneficiary Characteristics	ANTICONVULSANT					ULCER DRUGS					ANTIASTHMATIC				
	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
All	18,981	8.1 %	203,208	0.8	\$44	24,044	10.2 %	252,474	0.5	\$35	42,054	17.9 %	427,477	0.4	\$13
Female	10,860	7.9	115,893	0.7	43	17,273	12.6	182,040	0.5	36	25,412	18.5	259,599	0.4	13
Disabled	6,769	27.1	75,441	0.8	49	7,621	30.6	85,983	0.4	36	9,354	37.5	104,470	0.4	16
5 and younger	69	12.6	758	0.7	60	43	7.8	480	0.3	15	217	39.5	2,301	0.3	7
6-14	266	20.8	3,047	0.7	56	45	3.5	487	0.3	18	333	26.0	3,799	0.4	15
15-20	256	24.9	2,879	0.8	52	109	10.6	1,233	0.2	17	224	21.8	2,477	0.4	12
21-44	3,162	33.5	35,027	0.7	53	2,348	24.9	26,720	0.4	32	2,923	30.9	32,915	0.4	13
45-64	2,820	25.9	31,527	0.8	44	4,370	40.1	49,062	0.4	38	4,924	45.2	54,868	0.5	19
65-74	185	12.2	2,090	0.7	32	643	42.4	7,301	0.4	39	680	44.8	7,546	0.4	17
75-84	10	5.8	101	0.5	25	50	29.1	566	0.4	39	37	21.5	390	0.4	11
85 and older	1	2.2	12	0.3	4	13	28.9	134	0.4	21	16	35.6	174	0.5	17
Other Eligibles	4,091	3.6	40,452	0.7	31	9,652	8.6	96,057	0.5	36	16,058	14.3	155,129	0.3	11
5 and younger	94	0.3	962	0.5	26	356	1.3	3,196	0.2	5	3,590	12.6	34,548	0.2	4
6-14	452	1.7	4,729	0.6	29	443	1.7	4,607	0.2	7	2,936	11.3	29,893	0.2	9
15-20	417	2.8	4,270	0.6	34	570	3.9	5,509	0.2	10	1,595	10.8	14,874	0.2	7
21-44	590	2.6	4,779	0.4	25	1,159	5.0	9,702	0.2	18	2,254	9.8	17,850	0.3	7
45-64	43	5.5	381	0.4	20	171	22.0	1,511	0.3	30	187	24.0	1,712	0.3	10
65-74	788	17.7	8,347	0.9	40	1,559	35.1	16,911	0.5	41	1,669	37.5	17,863	0.6	23
75-84	952	14.0	9,566	0.8	31	2,555	37.5	26,571	0.6	42	2,073	30.4	21,070	0.6	21
85 and older	755	9.3	7,418	0.8	28	2,839	34.9	28,050	0.7	45	1,754	21.5	17,319	0.5	16
Male	8,121	8.3	87,315	0.8	47	6,771	6.9	70,434	0.5	35	16,642	17.1	167,878	0.3	12
Disabled	5,483	25.5	60,756	0.8	53	3,617	16.9	40,366	0.4	37	4,733	22.1	52,017	0.4	17
5 and younger	101	13.2	1,071	0.7	38	49	6.4	527	0.4	18	368	48.0	4,026	0.3	8
6-14	553	23.6	6,213	0.7	43	76	3.2	863	0.3	21	617	26.3	6,938	0.3	12
15-20	415	25.6	4,596	0.7	52	132	8.2	1,487	0.3	25	279	17.2	3,122	0.4	12
21-44	2,664	30.0	29,647	0.8	56	1,406	15.8	15,801	0.4	37	1,152	13.0	12,754	0.4	15
45-64	1,677	23.3	18,408	0.9	52	1,736	24.1	19,253	0.5	39	2,041	28.4	22,166	0.5	21
65-74	67	11.8	749	0.9	42	199	35.0	2,216	0.4	35	252	44.3	2,727	0.6	23
75-84	5	7.8	60	1.0	75	18	28.1	207	0.3	27	23	35.9	272	0.3	13
85 and older	1	11.1	12	0.2	5	1	11.1	12	0.8	32	1	11.1	12	0.1	0
Other Eligibles	2,638	3.5	26,559	0.7	32	3,154	4.2	30,068	0.5	31	11,909	15.7	115,861	0.3	9
5 and younger	161	0.5	1,600	0.5	22	418	1.4	3,522	0.2	6	4,941	16.5	47,666	0.2	4
6-14	837	3.1	8,953	0.6	31	304	1.1	3,188	0.2	9	3,585	13.3	35,695	0.3	9
15-20	512	5.6	5,135	0.6	36	246	2.7	2,376	0.2	13	1,014	11.2	9,983	0.3	10
21-44	113	3.6	914	0.4	20	50	6.7	1,701	0.3	29	179	5.7	1,290	0.3	11
45-64	15	3.4	109	0.5	30	210	11.3	431	0.3	24	42	9.5	297	0.3	11
65-74	438	18.6	4,522	0.9	40	587	24.9	6,150	0.5	41	786	33.3	7,907	0.6	23
75-84	337	14.6	3,291	0.8	30	723	31.4	7,113	0.6	43	826	35.8	7,971	0.7	23
85 and older	225	13.0	2,035	0.8	29	616	35.6	5,587	0.7	45	536	31.0	5,052	0.6	19
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

All Medicaid Beneficiaries

Table 7B

Source: Data for this table are from the MAX 1999 file for Kansas, released by CMS in 1/2004. This table was produced on 06/25/2004.

- a. Table 7B includes the beneficiaries represented by Cell C of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 1999. 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 1999. For information about these drug groups, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).
- Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE 7C
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY,
 BY SEX, BOE, AND AGE^{a, b, c}
 KANSAS, 1999

Beneficiary Characteristics	ANALGESICS - Narcotic				ANTIDIABETIC				ANALGESICS - ANTI-INFLAMMATORY						
	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
All	47,354	20.2 %	477,334	0.4	\$10	14,796	6.3 %	156,144	0.7	\$30	31,303	13.3 %	325,590	0.3	\$14
Female	35,691	26.0	356,769	0.4	10	10,869	7.9	115,252	0.7	30	23,375	17.0	241,639	0.3	15
Disabled	13,682	54.9	153,737	0.4	13	5,320	21.3	59,172	0.7	32	9,510	38.1	108,050	0.3	19
5 and younger	41	7.5	452	0.1	1	0	0.0	0	0.0	0	33	6.0	381	0.2	24
6-14	105	8.2	1,199	0.1	2	19	1.5	206	0.7	25	78	6.1	911	0.2	3
15-20	266	25.9	2,982	0.2	2	34	3.3	392	0.5	26	187	18.2	2,124	0.2	3
21-44	5,420	57.4	61,321	0.4	12	1,004	10.6	11,234	0.6	29	3,302	35.0	37,606	0.3	13
45-64	6,876	63.1	76,749	0.4	14	3,563	32.7	39,458	0.7	34	5,082	46.6	57,532	0.4	22
65-74	877	57.8	9,941	0.4	10	649	42.8	7,290	0.6	30	746	49.1	8,591	0.4	20
75-84	84	48.8	969	0.5	6	47	27.3	548	0.6	29	65	37.8	721	0.3	22
85 and older	13	28.9	124	0.3	5	4	8.9	44	0.8	34	17	37.8	184	0.4	22
Other Eligibles	22,009	19.6	203,032	0.3	8	5,549	4.9	56,080	0.8	28	13,865	12.4	133,589	0.3	12
5 and younger	560	2.0	5,741	0.1	1	7	0.0	61	0.4	30	704	2.5	7,122	0.2	2
6-14	1,144	4.4	11,826	0.1	1	56	0.2	574	0.8	30	901	3.5	9,441	0.1	2
15-20	3,174	21.5	28,180	0.2	1	58	0.4	511	1.0	44	2,169	14.7	19,913	0.2	2
21-44	8,184	35.6	66,820	0.2	3	385	1.7	3,065	0.6	23	4,210	18.3	35,084	0.2	4
45-64	310	39.8	2,741	0.4	6	105	13.5	849	0.6	30	273	35.1	2,478	0.3	13
65-74	2,080	46.8	22,292	0.5	14	1,548	34.8	16,583	0.7	32	1,523	34.3	16,874	0.4	22
75-84	3,061	44.9	31,417	0.5	15	2,071	30.4	21,509	0.8	29	2,134	31.3	22,709	0.4	25
85 and older	3,496	42.9	34,015	0.5	15	1,319	16.2	12,928	0.8	24	1,951	24.0	19,968	0.5	23
Male	11,663	12.0	120,565	0.3	12	3,927	4.0	40,892	0.7	30	7,928	8.1	83,951	0.3	11
Disabled	6,141	28.6	67,654	0.4	16	2,304	10.7	25,134	0.7	31	3,808	17.7	42,841	0.3	13
5 and younger	69	9.0	782	0.1	1	5	0.7	54	0.5	11	41	5.4	480	0.2	2
6-14	186	7.9	2,119	0.1	2	16	0.7	188	0.8	33	116	4.9	1,315	0.2	3
15-20	251	15.5	2,799	0.2	5	23	1.4	259	1.1	46	142	8.8	1,615	0.2	3
21-44	2,723	30.6	30,053	0.4	21	587	6.6	6,425	0.7	29	1,521	17.1	17,063	0.2	10
45-64	2,673	37.1	29,182	0.4	14	1,527	21.2	16,556	0.7	32	1,789	24.9	20,055	0.3	17
65-74	222	39.0	2,521	0.4	7	134	23.6	1,510	0.7	30	180	31.6	2,085	0.3	17
75-84	16	25.0	186	0.3	3	12	18.8	142	0.5	16	19	29.7	228	0.3	17
85 and older	1	11.1	12	0.1	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	5,522	7.3	52,911	0.3	6	1,623	2.1	15,758	0.7	27	4,120	5.4	41,110	0.2	9
5 and younger	756	2.5	7,771	0.1	1	21	0.1	228	0.5	21	857	2.9	8,687	0.1	2
6-14	1,116	4.1	11,783	0.1	1	53	0.2	476	1.1	33	671	2.5	7,109	0.1	2
15-20	768	8.4	7,426	0.1	1	33	0.4	316	1.3	46	751	8.3	7,488	0.2	3
21-44	707	22.5	5,150	0.4	8	72	2.3	501	0.7	27	410	13.0	3,162	0.2	8
45-64	147	33.1	1,163	0.4	9	52	11.7	453	0.7	29	107	24.1	935	0.3	11
65-74	700	29.7	7,064	0.4	14	515	21.8	5,190	0.7	29	478	20.3	5,190	0.4	19
75-84	739	32.0	7,307	0.4	12	552	23.9	5,477	0.7	25	497	21.6	5,203	0.4	19
85 and older	589	34.1	5,247	0.4	11	325	18.8	3,117	0.8	23	349	20.2	3,336	0.5	21
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Table 7C
 All Medicaid Beneficiaries

Source: Data for this table are from the MAX 1999 file for Kansas, released by CMS in 1/2004. This table was produced on 06/25/2004.

- a. Table 7C includes the beneficiaries represented by Cell C of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 1999. 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 1999. For information about these drug groups, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).
- Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE 7D
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR NINTH AND TENTH TOP DRUG GROUPS
 SEPARATELY, BY SEX, BOE, AND AGE^{a, b, c}
 KANSAS, 1999

Beneficiary Characteristics	ANTIHYPERTENSIVE				CALCIUM BLOCKERS				Mean Rx \$	Mean No. of Rx	Users as % of All Benes	No. of Users	No. of Mos among Users	Mean Rx \$	Mean No. of Rx	Users as % of All Benes	No. of Users	No. of Mos among Users	Mean Rx \$	Mean No. of Rx	No. of Benes	No. of Mos	
	No. of Users	Users as % of All Benes	No. of Mos among Users	Mean Rx \$	Mean No. of Rx	Users as % of All Benes	No. of Users	No. of Mos among Users															Mean Rx \$
All	19,516	8.3 %	205,156	0.6	\$21	9,943	4.2 %	104,712	0.6	\$33	234,658	1,878,483											
Female	12,702	9.3	133,727	0.6	22	7,409	5.4	77,988	0.6	33	137,200	1,087,577											
Disabled	4,976	20.0	55,425	0.5	22	2,884	11.6	32,265	0.6	33	24,940	259,072											
5 and younger	15	2.7	149	0.8	8	1	0.2	12	0.9	12	549	5,221											
6-14	105	8.2	1,206	0.6	9	2	0.2	24	0.5	17	1,280	13,740											
15-20	42	4.1	485	0.5	18	10	1.0	112	0.5	29	1,029	10,670											
21-44	847	9.0	9,530	0.5	18	453	4.8	5,084	0.5	29	9,445	98,741											
45-64	3,230	29.6	35,732	0.5	23	1,949	17.9	21,738	0.6	33	10,902	111,913											
65-74	665	43.8	7,560	0.6	24	407	26.8	4,609	0.6	36	1,518	16,524											
75-84	58	33.7	627	0.6	25	51	29.7	562	0.5	32	172	1,818											
85 and older	14	31.1	136	0.7	27	11	24.4	124	0.6	32	45	445											
Other Eligibles	7,726	6.9	78,302	0.7	22	4,525	4.0	45,723	0.7	33	112,260	828,505											
5 and younger	61	0.2	644	0.4	6	0	0.0	0	0.0	0	28,399	206,596											
6-14	334	1.3	3,554	0.5	9	7	0.0	68	0.1	3	25,935	207,971											
15-20	98	0.7	1,005	0.4	6	37	0.3	326	0.3	7	14,762	100,690											
21-44	324	1.4	2,585	0.3	12	208	0.9	1,653	0.3	16	22,981	127,984											
45-64	113	14.5	989	0.5	18	66	8.5	526	0.5	27	778	5,299											
65-74	1,698	38.2	18,133	0.6	23	991	22.3	10,611	0.7	35	4,445	42,935											
75-84	2,573	37.7	26,577	0.7	24	1,641	24.1	17,026	0.7	35	6,818	64,258											
85 and older	2,525	31.0	24,815	0.7	24	1,575	19.3	15,513	0.8	34	8,142	72,772											
Male	6,814	7.0	71,429	0.6	19	2,534	2.6	26,724	0.6	33	97,434	790,873											
Disabled	3,316	15.5	36,585	0.6	20	1,481	6.9	16,316	0.6	33	21,462	216,449											
5 and younger	41	5.4	444	0.6	10	1	0.1	12	0.3	18	766	7,514											
6-14	392	16.7	4,449	0.6	13	3	0.1	28	1.0	40	2,346	24,875											
15-20	140	8.7	1,601	0.5	12	16	1.0	171	0.5	27	1,618	16,304											
21-44	756	8.5	8,362	0.5	21	378	4.3	4,153	0.5	31	8,891	90,415											
45-64	1,746	24.3	19,004	0.6	22	947	13.2	10,400	0.6	34	7,199	70,528											
65-74	203	35.7	2,288	0.5	22	126	22.1	1,436	0.6	36	569	6,021											
75-84	31	48.4	357	0.5	20	9	14.1	106	0.5	26	64	686											
85 and older	7	77.8	80	0.5	21	1	11.1	10	0.2	25	9	106											
Other Eligibles	3,498	4.6	34,844	0.6	18	1,053	1.4	10,408	0.7	31	75,972	574,424											
5 and younger	126	0.4	1,261	0.4	8	2	0.0	21	0.3	14	29,975	216,950											
6-14	1,071	4.0	11,119	0.6	10	2	0.0	24	0.6	9	26,923	216,807											
15-20	208	2.3	2,102	0.5	9	7	0.1	65	0.4	22	9,090	68,130											
21-44	85	2.7	647	0.5	20	41	1.3	301	0.5	29	3,146	14,559											
45-64	62	14.0	521	0.5	26	38	8.6	329	0.5	31	444	2,567											
65-74	702	29.7	7,359	0.6	24	338	14.3	3,549	0.6	35	2,360	21,235											
75-84	736	31.9	7,270	0.7	26	410	17.8	4,060	0.7	30	2,306	19,960											
85 and older	508	29.4	4,565	0.7	24	215	12.4	2,059	0.7	28	1,728	14,216											
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	24	33											

Source: Data for this table are from the MAX 1999 file for Kansas, released by CMS in 1/2004. This table was produced on 06/25/2004.

- a. Table 7D includes the beneficiaries represented by Cell C of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 1999. 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 1999. For information about these drug groups, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy; \$ = Medicaid reimbursement.

TABLE 8
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BENEFICIARY CHARACTERISTIC^{a, b}
 KANSAS, 1999

Beneficiary Characteristics	Rx \$ per Bene Mo	No. of Rx per Bene Mo	No. of All-Year NF Residents	Bene Mos among All-Year NF Residents
All	\$243	6.2	10,678	100,530
Age				
0-64	435	7.1	1,135	11,895
65-74	288	6.9	1,163	11,322
75-84	242	6.5	2,963	27,581
85 and older	187	5.7	5,417	49,732
Unknown	0	0.0	0	0
Gender				
Female	231	6.3	7,975	75,355
Male	280	6.0	2,703	25,175
Unknown	0	0.0	0	0
Race				
White	243	6.3	9,938	93,298
African American	248	5.4	544	5,319
Other/unknown	248	6.1	196	1,913
Basis of Eligibility				
Aged	217	6.1	9,474	87,930
Disabled	428	7.1	1,204	12,600
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 1999 file for Kansas, released by CMS in 1/2004. This table was produced on 06/25/2004.

a. Table 8 includes the beneficiaries represented by Cell D of Table 1, those who resided in nursing facilities throughout their 1999 Medicaid enrollment. A total of 4,883 beneficiaries who were in nursing facilities for part of their enrollment and their 40,575 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.

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy; \$ = Medicaid reimbursement.

TABLE 9
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d, e}
 KANSAS, 1999

Therapeutic Category	No. of Rx per Bene Mo among Users				\$ per Bene Mo among Users				Total # of Rx				Total Rx \$		Users		
	Patented		Generic		Patented		Generic		Patented		Generic		No.	As % of All-Year NF Residents	No. of Bene Mos		
	Brand-Name	Off-Patent	Brand-Name	Off-Patent	Brand-Name	Off-Patent	Brand-Name	Off-Patent	Brand-Name	Off-Patent							
Anti-infective Agents	0.4	0.2	0.0	0.2	\$15	\$12	\$0	\$2	\$40	\$63	\$41	\$12	27,200	\$1,091,088	7,556	70.8 %	74,543
Biologicals	0.1	0.0	0.1	0.0	601	0	601	0	7217	0	7,217	0	1	7,217	1	0.0	12
Antineoplastic Agents	0.7	0.2	0.2	0.3	73	28	33	12	108	180	132	43	2,848	306,186	478	4.5	4,216
Endocrine/Metabolic Drugs	1.2	0.4	0.3	0.5	27	17	4	5	22	40	14	11	51,718	1,153,736	4,485	42.0	43,463
Cardiovascular Agents	2.0	0.4	0.5	1.0	44	16	15	12	22	40	29	12	138,105	3,095,631	7,404	69.3	70,615
Respiratory Agents	0.8	0.3	0.0	0.5	27	16	0	11	32	48	28	22	32,748	1,056,184	3,929	36.8	38,654
Gastrointestinal Agents	1.0	0.4	0.2	0.4	55	33	13	10	56	87	71	23	42,145	2,379,749	4,439	41.6	43,185
Genitourinary Agents	0.6	0.3	0.0	0.3	24	17	0	7	38	54	33	21	14,027	529,851	2,172	20.3	21,720
CNS Drugs	1.6	0.9	0.3	0.4	119	83	29	7	73	91	97	16	103,560	7,608,726	6,601	61.8	64,141
Stimulants/Anti-obesity/Anorexia	0.8	0.1	0.1	0.7	18	3	2	13	22	39	30	19	899	19,624	117	1.1	1,098
Miscellaneous Psychological/Neurological Agents	0.9	0.9	0.0	0.0	92	91	0	1	105	107	87	28	4,646	486,766	579	5.4	5,287
Analgesics and Anesthetics	0.9	0.3	0.1	0.6	34	20	6	8	36	75	56	14	44,052	1,603,554	4,971	46.6	47,529
Neuromuscular Agents	1.4	0.4	0.3	0.7	58	28	13	16	42	72	48	23	45,216	1,883,761	3,282	30.7	32,722
Nutritional Products	0.9	0.0	0.3	0.6	16	0	7	9	18	25	25	15	30,259	538,258	3,479	32.6	33,870
Hematological Agents	1.2	0.1	0.6	0.5	37	11	13	12	31	123	23	23	20,269	621,207	1,786	16.7	16,898
Topical Products	0.5	0.2	0.1	0.2	13	7	4	3	27	37	34	13	27,304	724,317	5,517	51.7	55,400
Miscellaneous Products	0.3	0.1	0.0	0.2	9	3	1	6	32	34	108	29	1,104	35,024	383	3.6	3,800
Unknown Therapeutic Category	0.7	0.0	0.0	0.0	25	0	0	0	33	0	0	0	38,965	1,299,090	5,331	49.9	52,748
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.	625,066	24,439,969	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 1999 file for Kansas, released by CMS in 1/2004. This table was produced on 06/25/2004.

a. Table 9 includes the beneficiaries represented by Cell D of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 1999. A total of 4,883 beneficiaries who were in nursing facilities for part of their enrollment and their 40,575 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 1999. 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/products/product_mddb.asp (May 13 2003).

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/products/product_mddb.asp (May 13 2003).

In Kansas, 5.2 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.

Table 9

All Medicaid Beneficiaries

Bene Mo(s) = benefit month(s); CMS = Center for Medicare and 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 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}
 KANSAS, 1999

Top 10 Drug Groups in Nursing Facilities	Users				Among Users		
	Total Medicaid Rx \$	No. of Users	As % of All-Year NF Residents	No. of Bene Mos	No. of Rx per Bene Mo	\$ per Rx	Rx \$ per Bene Mo
ANTIPSYCHOTICS	\$4,194,653	4,070	38.1 %	42,081	0.9	\$107	\$100
ANTIDEPRESSANTS	2,343,388	5,342	50.0	54,803	0.8	52	43
ULCER DRUGS	1,883,660	3,831	35.9	38,883	0.8	64	48
ANTICONVULSANT	1,182,383	2,531	23.7	26,663	1.0	44	44
ANTIHYPERTENSIVE	818,772	3,051	28.6	30,549	0.8	32	27
ANALGESICS - Narcotic	774,496	4,101	38.4	40,819	0.6	34	19
ANTIDIABETIC	659,387	2,288	21.4	23,172	0.9	31	28
ANALGESICS - ANTI-INFLAMMATORY	630,670	2,502	23.4	25,912	0.5	44	24
ANTIASTHMATIC	647,748	3,029	28.4	30,463	0.6	33	21
CALCIUM BLOCKERS	646,389	1,800	16.9	18,091	0.9	41	36

Source: Data for this table are from the MAX 1999 file for Kansas, released by CMS in 1/2004. This table was produced on 06/25/2004.

a. Table 10 includes the beneficiaries represented by Cell D of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 1999. A total of 4,883 beneficiaries who were in nursing facilities for part of their enrollment and their 40,575 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 1999. 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 1999 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/products/product_mddb.asp (May 13 2003).

Bene Mo(s) = benefit month(s); CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE 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, BOE, AND AGE^{a, b, c, d} KANSAS, 1999

Beneficiary Characteristics	All Top 10 Drug Groups					ANTIPSYCHOTICS					ANTIDEPRESSANTS				
	No. of Rx	Rx \$	No. of Users	Residents	Mean No. of Rx	Mean No. of Users	Residents	of All-Year NF	No. of Bene Mos among Users	Mean No. of Rx	Mean No. of Users	Residents	of All-Year NF	No. of Bene Mos among Users	Mean No. of Rx
All	260,915	\$13,781,546	4,070	38.1 %	42,081	0.9	\$100	5,342	50.0 %	54,803	0.8	\$43			
Female	189,367	9,367,257	2,733	34.3	28,228	0.9	82	4,024	50.5	41,518	0.8	42			
Disabled	26,169	1,899,222	512	81.9	5,793	1.4	176	387	61.9	4,276	0.9	52			
64 or younger	24,314	1,775,311	476	82.6	5,418	1.4	178	348	60.4	3,868	0.9	53			
65-74	1,765	120,209	33	73.3	339	1.0	156	37	82.2	384	0.7	39			
75-84	89	3,644	3	100.0	36	0.7	28	2	66.7	24	0.5	33			
85 and older	1	58	0	0.0	0	0.0	0	0	0.0	0	0.0	0			
Other Eligibles	163,198	7,468,035	2,221	30.2	22,435	0.7	58	3,637	49.5	37,242	0.8	41			
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0			
65-74	21,818	1,093,647	302	46.7	3,232	0.9	87	392	60.6	4,148	0.9	45			
75-84	56,258	2,641,875	849	39.2	8,542	0.8	61	1,213	56.1	12,375	0.8	43			
85 and older	85,122	3,732,513	1,070	23.6	10,661	0.6	46	2,032	44.8	20,719	0.8	39			
Male	71,548	4,414,289	1,337	49.5	13,853	1.1	136	1,318	48.8	13,285	0.8	45			
Disabled	23,303	2,152,788	521	90.0	5,747	1.5	245	296	51.1	3,251	0.9	54			
64 or younger	22,878	2,126,167	511	91.4	5,638	1.5	248	292	52.2	3,213	0.9	54			
65-74	355	21,166	8	50.0	86	0.8	84	4	25.0	38	0.7	34			
75-84	70	5,455	2	50.0	23	1.1	144	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			
Other Eligibles	48,245	2,261,501	816	38.4	8,106	0.8	59	1,022	48.1	10,034	0.8	42			
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0			
65-74	13,115	691,054	238	52.3	2,505	0.8	74	239	52.5	2,467	0.8	47			
75-84	19,285	899,699	318	40.2	3,182	0.8	63	398	50.3	3,920	0.8	42			
85 and older	15,845	670,748	260	29.6	2,419	0.7	39	385	43.9	3,647	0.8	39			
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 1999 file for Kansas, released by CMS in 1/2004. This table was produced on 06/25/2004.

a. Table 10A includes the beneficiaries represented by Cell D of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 1999. A total of 4,883 beneficiaries who were in nursing facilities for part of their enrollment and their 40,575 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 1999. 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 1999 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/products/product_mddb.asp (May 13 2003).

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

TABLE 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, BOE, AND AGE^{a, b, c, d}
 KANSAS, 1999

Beneficiary Characteristics	ULCER DRUGS						ANTICONVULSANT						ANTIHYPERTENSIVE					
	Users as %			Users as %			Users as %			Users as %			Users as %			Users as %		
	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	No. of Users	No. of Bene Mos among Users	Mean No. of Rx
All	3,831	35.9 %	\$48	2,551	23.7 %	\$44	3,051	28.6 %	\$44	3,051	28.6 %	\$27	30,549	0.8	\$27			
Female	2,906	36.4	48	1,619	20.3	42	2,293	28.8	42	2,293	28.8	26	22,940	0.8	26			
Disabled	225	36.0	47	419	67.0	57	133	21.3	57	133	21.3	27	1,451	0.8	27			
64 or younger	201	34.9	47	395	68.6	57	119	20.7	57	119	20.7	26	1,332	0.8	26			
65-74	20	44.4	55	24	53.3	59	14	31.1	59	14	31.1	30	119	0.9	30			
75-84	4	133.3	26	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			
Other Eligibles	2,681	36.5	48	1,200	16.3	37	2,160	29.4	37	2,160	29.4	26	21,489	0.8	26			
64 or younger	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0			
65-74	236	36.5	50	257	39.7	50	216	33.4	50	216	33.4	29	2,203	0.9	29			
75-84	819	37.8	47	470	21.7	34	696	32.2	34	696	32.2	26	6,894	0.8	26			
85 and older	1,626	35.8	48	473	10.4	32	1,248	27.5	32	1,248	27.5	26	12,392	0.9	26			
Male	925	34.2	51	912	33.7	48	758	28.0	48	758	28.0	29	7,609	0.8	29			
Disabled	177	30.6	53	409	70.6	60	107	18.5	60	107	18.5	33	1,171	0.9	33			
64 or younger	169	30.2	53	403	72.1	60	101	18.1	60	101	18.1	34	1,116	0.9	34			
65-74	6	37.5	57	6	37.5	41	4	25.0	41	4	25.0	12	38	0.4	12			
75-84	2	50.0	37	0	0.0	0	2	50.0	0	2	50.0	12	17	0.5	12			
85 and older	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0			
Other Eligibles	748	35.2	50	503	23.7	37	651	30.6	37	651	30.6	28	6,438	0.8	28			
64 or younger	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0			
65-74	156	34.3	56	190	41.8	46	146	32.1	46	146	32.1	27	1,528	0.9	27			
75-84	287	36.2	48	176	22.2	32	276	34.8	32	276	34.8	29	2,786	0.8	29			
85 and older	305	34.8	50	137	15.6	30	229	26.1	30	229	26.1	26	2,124	0.8	26			
Unknown	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 1999 file for Kansas, released by CMS in 1/2004. This table was produced on 06/25/2004.

a. Table 10B includes the beneficiaries represented by Cell D of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 1999. A total of 4,883 beneficiaries who were in nursing facilities for part of their enrollment and their 40,575 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 1999. 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 1999 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/products/product_mddb.asp (May 13 2003).

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

TABLE 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, BOE, AND AGE^{a, b, c, d}
 KANSAS, 1999

Beneficiary Characteristics	ANALGESICS - Narcotic					ANTIDIABETIC					ANALGESICS - ANTI-INFLAMMATORY				
	Users as %					Users as %					Users as %				
	No. of Users	No. of Bene Mos among Residents	Mean No. of Rx	Mean Rx \$	Mean No. of Rx	No. of Users	No. of Bene Mos among Residents	Mean No. of Rx	Mean Rx \$	Mean No. of Rx	No. of Users	No. of Bene Mos among Residents	Mean No. of Rx	Mean Rx \$	Mean No. of Rx
All	4,101	38.4 %	0.6	\$19	0.6	2,288	21.4 %	0.9	\$29	0.9	2,502	23.4 %	\$24	0.5	
Female	3,276	41.1	0.6	20	0.6	1,700	21.3	0.9	28	0.9	1,946	24.4	25	0.6	
Disabled	190	30.4	0.7	31	0.7	133	21.3	0.9	35	0.9	178	28.5	18	0.5	
64 or younger	162	28.1	0.8	34	0.8	113	19.6	1.0	34	1.0	157	27.3	18	0.5	
65-74	27	60.0	0.5	13	0.5	17	37.8	1.0	48	1.0	19	42.2	21	0.4	
75-84	1	33.3	1.4	18	1.4	3	100.0	0.4	10	0.4	2	66.7	1	0.1	
85 and older	0	0.0	0.0	0	0.0	0	0.0	0.0	0	0.0	0	0.0	0	0.0	
Other Eligibles	3,086	42.0	0.6	19	0.6	1,567	21.3	0.9	28	0.9	1,768	24.1	26	0.6	
64 or younger	0	0.0	0.0	0	0.0	0	0.0	0.0	0	0.0	0	0.0	0	0.0	
65-74	299	46.2	0.6	18	0.6	224	34.6	0.9	33	0.9	191	29.5	28	0.6	
75-84	914	42.2	0.6	21	0.6	633	29.3	0.9	30	0.9	530	24.5	29	0.6	
85 and older	1,873	41.3	0.5	18	0.5	710	15.6	0.9	24	0.9	1,047	23.1	24	0.5	
Male	825	30.5	0.5	16	0.5	588	21.8	0.9	29	0.9	556	20.6	22	0.5	
Disabled	145	25.0	0.6	23	0.6	94	16.2	0.9	28	0.9	109	18.8	24	0.5	
64 or younger	142	25.4	0.6	23	0.6	90	16.1	0.9	29	0.9	107	19.1	24	0.5	
65-74	2	12.5	1.4	47	1.4	4	25.0	0.8	16	0.8	2	12.5	18	0.4	
75-84	1	25.0	0.2	6	0.2	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	
Other Eligibles	680	32.0	0.5	15	0.5	494	23.3	0.9	29	0.9	447	21.0	21	0.5	
64 or younger	0	0.0	0.0	0	0.0	0	0.0	0.0	0	0.0	0	0.0	0	0.0	
65-74	152	33.4	0.6	24	0.6	124	27.3	0.9	33	0.9	94	20.7	20	0.5	
75-84	258	32.6	0.5	12	0.5	196	24.7	0.9	30	0.9	172	21.7	20	0.5	
85 and older	270	30.8	0.4	11	0.4	174	19.8	0.8	24	0.8	181	20.6	22	0.6	
Unknown	0	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 1999 file for Kansas, released by CMS in 1/2004. This table was produced on 06/25/2004.

- a. Table 10C includes the beneficiaries represented by Cell D of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 1999. A total of 4,883 beneficiaries who were in nursing facilities for part of their enrollment and their 40,575 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 1999. 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 1999 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/products/product_mddb.asp (May 13 2003).
- Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE 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, BOE, AND AGE^{a, b, c, d}
 KANSAS, 1999

Beneficiary Characteristics	ANTI-ASTHMATIC					CALCIUM BLOCKERS					Mean Rx \$	All-Year NF Residents	Bene Mos among All-Year NF Residents
	Users as %		No. of Bene		Mean No. of Rx	Users as %		No. of Bene		Mean No. of Rx			
	No. of Users	Residents	NF Residents	All-Year NF Residents		Users	Mos among Users	Users	Mos among Users				
All	3,029	28.4 %	30,463	0.6	\$21	1,800	16.9 %	18,091	0.9	\$36	10,678	100,530	
Female	2,132	26.7	21,563	0.6	20	1,400	17.6	14,084	0.9	37	7,975	75,355	
Disabled	199	31.8	2,082	0.8	27	89	14.2	946	0.9	41	625	6,580	
64 or younger	186	32.3	1,959	0.9	28	79	13.7	854	0.9	40	576	6,076	
65-74	13	28.9	123	0.4	11	10	22.2	92	0.9	54	45	465	
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	36	
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	3	
Other Eligibles	1,933	26.3	19,481	0.6	19	1,311	17.8	13,138	0.9	36	7,350	68,775	
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0	
65-74	250	38.6	2,571	0.7	24	124	19.2	1,298	0.9	39	647	6,420	
75-84	658	30.4	6,435	0.7	24	408	18.9	4,064	0.9	40	2,164	20,319	
85 and older	1,025	22.6	10,475	0.5	16	779	17.2	7,776	0.9	34	4,539	42,036	
Male	897	33.2	8,900	0.7	24	400	14.8	4,007	0.8	33	2,703	25,175	
Disabled	149	25.7	1,593	0.7	23	60	10.4	648	0.8	38	579	6,020	
64 or younger	143	25.6	1,523	0.7	21	57	10.2	622	0.8	38	559	5,819	
65-74	4	25.0	48	1.4	81	2	12.5	14	0.7	40	16	160	
75-84	2	50.0	22	0.6	34	1	25.0	12	1.0	32	4	41	
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0	
Other Eligibles	748	35.2	7,307	0.7	24	340	16.0	3,359	0.8	32	2,124	19,155	
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0	
65-74	146	32.1	1,506	0.8	25	79	17.4	818	0.9	39	455	4,277	
75-84	310	39.1	2,987	0.8	29	162	20.5	1,591	0.8	30	792	7,185	
85 and older	292	33.3	2,814	0.6	20	99	11.3	950	0.8	29	877	7,693	
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 1999 file for Kansas, released by CMS in 1/2004. This table was produced on 06/25/2004.

a. Table 10D includes the beneficiaries represented by Cell D of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 1999. A total of 4,883 beneficiaries who were in nursing facilities for part of their enrollment and their 40,575 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 1999. 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 1999 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/products/product_mddb.asp (May 13 2003).

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

APPENDIX TABLE A.1

CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY^{a, b}
KANSAS, 1999

Beneficiary Characteristics	No. of Benes					No. of Bene Mos						
	All	Aged	Disabled	Adults	Children	Unknown	All	Aged	Disabled	Adults	Children	Unknown
All	251,078	27,616	47,427	36,820	139,215	0	2,211,383	272,773	499,480	231,376	1,207,754	0
Age												
5 and younger	65,341	0	1,320	0	64,021	0	548,463	0	13,108	0	535,355	0
6-14	60,492	0	3,637	0	56,855	0	556,961	0	39,100	0	517,861	0
15-20	28,223	3	2,659	7,294	18,267	0	227,494	31	27,467	45,945	154,051	0
21-44	46,984	1	18,725	28,187	71	0	375,035	12	198,614	175,923	486	0
45-64	19,977	3	18,638	1,336	0	0	203,393	36	193,870	9,487	0	0
65-74	9,347	7,201	2,143	3	0	0	96,739	72,764	23,954	21	0	0
75-84	10,004	9,753	251	0	0	0	100,483	97,709	2,774	0	0	0
85 and older	10,709	10,655	54	0	0	0	102,814	102,221	593	0	0	0
Unknown	1	0	0	0	1	1	0	0	0	0	1	0
Gender												
Female	146,771	20,772	25,442	32,273	68,284	0	1,281,495	208,805	271,399	206,863	594,428	0
Male	104,273	6,844	21,985	4,547	70,897	0	929,836	63,968	228,081	24,513	613,274	0
Unknown	34	0	0	0	34	0	52	0	0	0	52	0
Race												
White	170,615	23,725	35,917	24,885	86,088	0	1,506,288	232,944	378,855	153,744	740,745	0
African American	45,871	2,180	8,217	7,247	28,227	0	422,725	22,342	86,663	51,017	262,703	0
Other/unknown	34,592	1,711	3,293	4,688	24,900	0	282,370	17,487	33,962	26,615	204,306	0
Use of Nursing Facilities												
All year	11,469	10,215	1,254	0	0	0	117,410	103,549	13,861	0	0	0
Part year	5,253	4,456	793	3	1	0	47,326	39,178	8,108	31	9	0
None	234,356	12,945	45,380	36,817	139,214	0	2,046,647	130,046	477,511	231,345	1,207,745	0
Maintenance Assistance Status												
Cash	81,670	5,083	34,735	16,362	25,490	0	766,643	56,408	371,621	102,834	235,780	0
Medically needy	34,396	21,513	10,096	477	2,310	0	328,617	206,539	100,092	3,393	18,593	0
Poverty related	105,304	861	1,292	12,165	90,986	0	840,195	8,372	13,240	62,717	755,866	0
Other/unknown	29,708	159	1,304	7,816	20,429	0	275,928	1,454	14,527	62,432	197,515	0
Dual Status^c												
Full dual, all year	43,499	25,383	17,956	120	40	0	445,893	250,100	194,508	910	375	0
Full dual, part year	3,722	1,606	2,104	8	4	0	39,497	16,867	22,488	94	48	0
Non-dual, all year	203,857	627	27,367	36,692	139,171	0	1,725,993	5,806	282,484	230,372	1,207,331	0
Managed Care Status												
FFS all year	196,310	21,831	43,631	27,371	103,477	0	1,710,857	212,933	458,901	161,377	877,646	0
FFS part year, with Rx claims	20,033	3,630	2,234	4,129	10,040	0	202,820	40,038	25,498	35,274	102,010	0
FFS part year, no Rx claims	18,315	342	537	2,581	14,855	0	163,273	3,300	5,481	18,988	135,504	0
MC all year, with Rx claims	3,923	1,588	726	745	864	0	36,317	15,079	7,632	5,343	8,263	0
MC all year, no Rx claims	12,497	225	299	1,994	9,979	0	98,116	1,423	1,968	10,394	84,331	0

Source: Data for this table are from the MAX 1999 file for Kansas, released by CMS in 1/2004. This table was produced on 06/25/2004.

a. Table A.1 includes the beneficiaries represented by Cell B of Table 1. Benefit months are months during which beneficiaries had pharmacy benefit.

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. The "Full dual, all year" group contains beneficiaries who had Medicare as well as Medicaid pharmacy benefits during all months of Medicaid enrollment in 1999. The "Full dual, part year" group contains beneficiaries who had such benefits for some, but not all, months of their enrollment. The "Non-dual, all year" group includes beneficiaries who were never dually eligible or dually eligible but never had pharmacy benefits. Refer to footnote g of Table 1 for more information about how we determined dual eligibility status.

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Center for Medicare and 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
 KANSAS, 1999

	Bene Mos in Cell B of Table 1		Bene Mos in Cell C of Table 1		Bene Mos in Cell C of Table 1	
	No. of Bene Mos	No. of Bene Mos	No. of Bene Mos	No. of Bene Mos	No. of Bene Mos	No. of Bene Mos
All	251,078	2,211,383	234,658	1,878,483	16,420	332,900
FFS all year	196,310	1,710,857	196,310	1,710,857	0	0
FFS part year, with Rx claims	20,033	202,820	20,033	103,415	0	99,405
FFS part year, with no Rx claims	18,315	163,273	18,315	64,211	0	99,062
MC all year, with Rx claims	3,923	36,317	0	0	3,923	36,317
MC all year, with no Rx claims	12,497	98,116	0	0	12,497	98,116

Source: Data for this table are from the MAX 1999 file for Kansas, released by CMS in 1/2004. This table was produced on 06/25/2004.

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Center for Medicare and Medicaid Services; FFS = fee-for-service pharmacy benefit; MAX = Medicaid Analytic Extract; MC = managed care; Rx = pharmacy benefit.