

STATISTICAL COMPENDIUM: MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2002 MISSOURI

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TABLE D.2
 CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a,b}
 DUAL ELIGIBLE BENEFICIARIES, MISSOURI, 2002

Beneficiary Characteristics	No. of Benes						No. of Bene Mos					
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown
All	155,495	87,532	65,836	2,082	45	0	1,593,094	886,728	689,020	16,934	412	0
Age												
5 and younger	8	0	5	0	3	0	79	0	54	0	25	0
6-14	15	0	7	0	8	0	167	0	79	0	88	0
15-20	277	0	246	5	26	0	2,941	0	2,668	37	236	0
21-44	27,510	0	26,007	1,497	6	0	291,836	0	279,415	12,376	45	0
45-64	38,489	0	37,990	499	0	0	396,345	0	392,455	3,890	0	0
65-74	32,848	31,833	947	68	0	0	336,039	327,554	7,956	529	0	0
75-84	32,056	31,645	397	13	1	0	326,398	322,297	3,993	102	6	0
85 and older	24,292	24,054	237	0	1	0	239,289	236,877	2,400	0	12	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	98,528	63,986	33,428	1,091	23	0	1,023,580	659,525	355,090	8,747	218	0
Male	56,967	23,546	32,408	991	22	0	569,514	227,203	333,930	8,187	194	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	124,470	70,933	51,888	1,614	35	0	1,271,368	715,174	542,506	13,349	339	0
African American	27,041	13,928	12,688	415	10	0	282,304	145,109	133,964	3,158	73	0
Other/unknown	3,984	2,671	1,260	53	0	0	39,422	26,445	12,550	427	0	0
Use of Nursing Facilities^c												
Entire year	21,007	19,000	2,006	0	1	0	222,879	200,184	22,683	0	12	0
Part year	13,984	12,407	1,574	3	0	0	126,772	110,767	15,973	32	0	0
None	120,504	56,125	62,256	2,079	44	0	1,243,443	575,777	650,364	16,902	400	0
Maintenance Assistance Status												
Cash	48,692	20,787	25,950	1,934	21	0	555,361	240,128	299,222	15,813	198	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0
Poverty-related	5,776	2,747	2,952	69	8	0	48,395	19,219	28,592	516	68	0
Other/unknown	101,027	63,998	36,934	79	16	0	989,338	627,381	361,206	605	146	0
Dual Medicare Status^d												
Full dual, all year	140,764	81,011	57,741	1,968	44	0	1,444,072	825,402	602,589	15,681	400	0
Full dual, part year	14,731	6,521	8,095	114	1	0	149,022	61,326	86,431	1,253	12	0
Managed Care Status												
FFS all year	154,752	87,528	65,581	1,604	39	0	1,589,013	886,693	687,408	14,530	382	0
FFS part year, with Rx claims	560	4	212	342	2	0	3,354	35	1,406	1,898	15	0
FFS part year, no Rx claims	183	0	43	136	4	0	727	0	206	506	15	0

Table D2

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2002 file for Missouri, released by CMS in 05/2006. This table was produced on 04/19/2007.

- a. Table D.2 includes the beneficiaries represented by Cell G 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.
- d. 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 2002. The "Full dual, part year" group contains beneficiaries who had such benefits for some, but not all, months of their enrollment. 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 D.3
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC^{a,b}
 DUAL ELIGIBLE BENEFICIARIES, MISSOURI, 2002

Beneficiary Characteristics	% with at Least One Rx	Mean No. of Rx	Mean Rx \$	\$ per Rx	Mean \$, All Services	Rx \$ as % of All Services	No. of Benes
All	89.5 %	54.1	\$3,091	\$57	\$12,066	25.6 %	155,495
Age							
5 and younger	100.0	52.6	4,772	91	18,775	25.4	8
6-14	93.3	61.1	8,927	146	27,998	31.9	15
15-20	78.7	24.1	2,311	96	11,563	20.0	277
21-44	87.0	40.9	3,555	87	11,459	31.0	27,510
45-64	90.0	60.1	3,990	66	11,639	34.3	38,489
65-74	86.9	54.4	2,732	50	9,092	30.1	32,848
75-84	90.5	57.6	2,627	46	12,499	21.0	32,056
85 and older	93.6	54.7	2,243	41	16,876	13.3	24,292
Unknown	0.0	0.0	0	0	0	0.0	0
Basis of Eligibility^c							
Aged	90.2	55.9	2,574	46	12,503	20.6	87,532
Disabled	88.9	52.6	3,829	73	11,772	32.5	65,836
Adults	78.3	22.1	1,475	67	2,941	50.2	2,082
Children	75.6	38.4	4,234	110	15,661	27.0	45
Unknown	0.0	0.0	0	0	0	0.0	0
Gender							
Female	91.9	59.3	3,084	52	12,405	24.9	98,528
Male	85.3	45.0	3,103	69	11,480	27.0	56,967
Unknown	0.0	0.0	0	0	0	0.0	0
Race							
White	90.7	57.4	3,267	57	12,441	26.3	124,470
African American	84.7	41.1	2,425	59	10,960	22.1	27,041
Other/unknown	84.6	38.8	2,115	55	7,857	26.9	3,984
Use of Nursing Facilities^d							
Entire year	98.4	77.4	3,654	47	28,832	12.7	21,007
Part year	96.6	58.8	2,799	48	17,044	16.4	13,984
None	87.1	49.4	3,027	61	8,566	35.3	120,504
Maintenance Assistance Status							
Cash	91.3	54.9	3,165	58	9,069	34.9	48,692
Medically needy	0.0	0.0	0	0	0	0.0	0
Poverty related	85.6	36.7	2,414	66	6,845	35.3	5,776
Other/unknown	88.8	54.7	3,094	57	13,809	22.4	101,027

Source: Data for this table are from the MAX 2002 file for Missouri, released by CMS in 05/2006. This table was produced on 04/19/2007.

- a. Table D.3 includes beneficiaries represented by Cell G 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. 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 of Table 1 for methodology used to determine nursing facility residence.
- 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 D.4
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a,b}
 DUAL ELIGIBLE BENEFICIARIES, MISSOURI, 2002

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	5.3	\$302	25.6 %	10.5 %	13.0 %	9.4 %	27.9 %	28.9 %	10.4 %	\$1,178	155,495	1,593,094
Age												
5 and younger	5.3	483	25.4	0.0	12.5	12.5	37.5	37.5	0.0	1,901	8	79
6-14	5.5	802	31.9	6.7	0.0	0.0	60.0	33.3	0.0	2,515	15	167
15-20	2.3	218	20.0	21.3	31.0	15.9	19.1	11.9	0.7	1,089	277	2,941
21-44	3.9	335	31.0	13.0	23.7	11.9	26.2	19.0	6.2	1,080	27,510	291,836
45-64	5.8	388	34.3	10.0	11.4	8.8	26.6	29.8	13.5	1,130	38,489	396,345
65-74	5.3	267	30.1	13.1	12.0	9.2	26.8	28.3	10.6	889	32,848	336,039
75-84	5.7	258	21.0	9.5	9.7	8.5	28.7	32.7	11.1	1,228	32,056	326,398
85 and older	5.5	228	13.3	6.4	8.7	9.0	32.2	34.6	9.1	1,713	24,292	239,289
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Basis of Eligibility^c												
Aged	5.5	254	20.6	9.8	10.2	8.9	29.0	31.7	10.4	1,234	87,532	886,728
Disabled	5.0	366	32.5	11.1	16.1	10.0	26.6	25.6	10.5	1,125	65,836	689,020
Adults	2.7	181	50.2	21.7	28.7	13.2	21.7	12.1	2.7	362	2,082	16,934
Children	4.2	462	27.0	24.4	13.3	6.7	28.9	26.7	0.0	1,711	45	412
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Gender												
Female	5.7	297	24.9	8.1	10.6	8.9	28.8	31.8	11.9	1,194	98,528	1,023,580
Male	4.5	310	27.0	14.7	17.1	10.3	26.3	23.9	7.8	1,148	56,967	569,514
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	5.6	320	26.3	9.3	11.6	8.8	27.8	30.7	11.8	1,218	124,470	1,271,368
African American	3.9	232	22.1	15.3	18.4	11.6	28.4	21.6	4.7	1,050	27,041	282,304
Other/unknown	3.9	214	26.9	15.4	18.8	12.0	27.9	20.2	5.7	794	3,984	39,422
use or nursing Facilities^d												
Entire year	7.3	344	12.7	1.6	4.0	5.7	26.4	42.9	19.5	2,718	21,007	222,879
Part year	6.5	309	16.4	3.4	7.7	8.0	30.6	36.5	13.7	1,880	13,984	126,772
None	4.8	293	35.3	12.9	15.1	10.2	27.8	25.5	8.4	830	120,504	1,243,443
Maintenance Assistance Status												
Cash	4.8	278	34.9	8.7	16.8	10.5	28.0	26.6	9.5	795	48,692	555,361
Medically needy	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Poverty related	4.4	288	35.3	14.4	18.8	11.2	27.3	21.2	7.1	817	5,776	48,395
Other/unknown	5.6	316	22.4	11.2	10.8	8.8	27.9	30.4	11.0	1,410	101,027	989,338

Table D4

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2002 file for Missouri, released by CMS in 05/2006. This table was produced on 04/19/2007.

- a. Table D.4 includes the beneficiaries represented by Cell G 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. 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 of Table 1 for methodology used to determine nursing facility residence.
- 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 D.5
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, MISSOURI, 2002

Beneficiary Characteristics	All Rx			Patented Brand-Name Drugs			Off-Patent Brand-Name Drugs			Generic Drugs		
	No. of Rx	Rx \$	\$ per Rx	No. of Rx	Rx \$	\$ per Rx	No. of Rx	Rx \$	\$ per Rx	No. of Rx	Rx \$	\$ per Rx
All	5.3	\$302	\$57	2.2	\$232	\$103	0.4	\$19	\$48	2.6	\$50	\$19
Age												
5 and younger	5.3	483	91	2.5	434	174	0.3	15	57	2.5	33	13
6-14	5.5	802	146	2.7	679	255	0.4	50	143	2.5	72	29
15-20	2.3	218	96	1.1	178	159	0.2	19	86	0.9	21	22
21-44	3.9	335	87	1.8	277	157	0.2	16	65	1.8	43	23
45-64	5.8	388	66	2.6	303	117	0.4	23	60	2.8	61	22
65-74	5.3	267	50	2.3	200	87	0.4	18	46	2.6	49	19
75-84	5.7	258	46	2.3	191	81	0.5	18	39	2.8	49	17
85 and older	5.5	228	41	2.1	162	78	0.5	19	36	2.9	47	16
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility^d												
Aged	5.5	254	46	2.3	187	83	0.4	18	40	2.8	48	17
Disabled	5.0	366	73	2.2	292	130	0.3	20	61	2.4	53	22
Adults	2.7	181	67	1.2	143	122	0.2	11	66	1.4	27	20
Children	4.2	462	110	2.2	388	178	0.3	36	120	1.7	38	22
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Gender												
Female	5.7	297	52	2.4	225	93	0.4	20	46	2.8	52	18
Male	4.5	310	69	1.9	246	127	0.3	17	54	2.2	47	21
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Race												
White	5.6	320	57	2.4	245	103	0.4	20	48	2.8	54	19
African American	3.9	232	59	1.7	182	108	0.3	13	48	2.0	37	19
Other/unknown	3.9	214	55	1.8	165	94	0.3	13	47	1.9	35	19
Use of Nursing Facilities^e												
Entire year	7.3	344	47	2.9	256	88	0.6	24	39	3.7	64	17
Part year	6.5	309	48	2.6	230	89	0.5	22	40	3.3	56	17
None	4.8	293	61	2.1	228	109	0.3	18	53	2.3	47	20
Maintenance Assistance Status												
Cash	4.8	278	58	2.1	214	103	0.3	16	49	2.4	47	20
Medically needy	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Poverty related	4.4	288	66	1.9	228	119	0.3	19	58	2.1	42	19
Other/unknown	5.6	316	57	2.4	243	103	0.4	20	48	2.8	53	19

Source: Data for this table are from the MAX 2002 file for Missouri, released by CMS in 05/2006. This table was produced on 04/19/2007.

- a. Table D.5 includes the beneficiaries represented by Cell G 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 Missouri, 0.5 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all combined. For information about this classification method, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).
- 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 = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.6

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, MISSOURI, 2002

Therapeutic Category	No. of Rx per Bene Mo among Users			\$ per Bene Mo among Users			Total No. of Rx			Total Rx \$	Users								
	Patented			Off-Patent			Generic				Total	Dual Benes							
	Brand-Name	Off-Patent Brand-Name	Generic Brand-Name	Brand-Name	Off-Patent Brand-Name	Generic Brand-Name	Patented Brand-Name	Off-Patent Brand-Name	Generic			No.	As % of	No. of Bene Mos					
Anti-infective Agents	0.4	0.2	0.0	0.2	\$32	\$28	\$1	3	11	\$3	\$86	\$145	\$85	\$16	377,613	\$32,393,288	92,072	59.2 %	1,011,112
Biologics	0.1	0.1	0.0	0.0	15	1	3	11	153	17	153	17	1,808	647	4,591	701,188	4,077	2.6	46,814
Antineoplastic Agents	0.6	0.3	0.1	0.2	120	97	9	14	210	364	210	364	148	58	35,519	7,447,450	5,937	3.8	62,227
Endocrine/Metabolic Drugs	1.0	0.5	0.1	0.4	47	38	3	6	46	74	46	74	26	16	797,915	36,708,236	71,887	46.2	780,957
Cardiovascular Agents	1.9	0.7	0.2	1.0	68	45	6	18	36	65	36	65	33	17	2,029,638	73,021,244	100,028	64.3	1,073,827
Respiratory Agents	0.8	0.5	0.1	0.3	45	35	5	5	54	76	54	76	66	18	689,565	37,485,781	75,534	48.6	831,357
Gastrointestinal Agents	0.7	0.2	0.0	0.5	36	26	2	8	51	129	51	129	91	16	547,544	27,846,821	70,498	45.3	767,007
Genitourinary Agents	0.5	0.4	0.0	0.1	33	31	0	2	64	76	64	76	42	17	139,994	8,896,941	24,708	15.9	272,803
CNS Drugs	1.4	0.7	0.0	0.7	119	100	4	16	82	136	82	136	79	24	1,407,284	116,089,439	90,392	58.1	972,850
Stimulants/Anti-obesity/Anorexia	0.6	0.1	0.1	0.4	54	17	12	25	87	221	87	221	92	60	1,539	133,288	220	0.1	2,467
Miscellaneous Psychological/Neurological Agents	0.7	0.7	0.0	0.0	91	91	0	1	128	132	128	132	49	21	69,781	8,897,791	9,292	6.0	97,544
Analgesics and Anesthetics	0.9	0.3	0.1	0.5	56	43	4	10	63	126	63	126	73	19	855,049	54,035,360	88,324	56.8	960,937
Neuromuscular Agents	1.0	0.4	0.1	0.5	65	48	5	12	66	119	66	119	56	24	541,390	35,646,688	50,392	32.4	552,088
Nutritional Products	0.6	0.0	0.1	0.5	11	0	1	10	18	26	18	26	19	18	275,501	5,050,482	42,109	27.1	454,585
Hematological Agents	0.8	0.3	0.1	0.4	53	43	3	6	65	155	65	155	24	17	297,497	19,480,108	34,646	22.3	370,768
Topical Products	0.4	0.2	0.0	0.2	17	13	1	4	42	64	42	64	46	19	284,491	11,945,617	61,802	39.7	685,609
Miscellaneous Products	0.4	0.2	0.1	0.2	77	49	19	9	177	267	177	267	297	50	23,577	4,164,665	5,063	3.3	53,902
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	7	0	0	0	24	0	24	0	0	0	28,596	697,398	8,613	5.5	95,957
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.	n.a.	n.a.	8,407,084	480,641,785	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2002 file for Missouri, released by CMS in 05/2006. This table was produced on 04/19/2007.

- a. Table D.6 includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 2002. A beneficiary who used drugs from two or more categories 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. For information about these therapeutic categories, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mdmb.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 Missouri, 0.5 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mdmb.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 D.7

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, MISSOURI, 2002

Top 10 Drug Groups	Users			Among Users		
	Total Medicaid Rx \$	No.	As % of Dual Benes	No. of Bene Mos	No. of Rx per Bene Mo	Rx \$ per Bene Mo
ANTIPSYCHOTICS	\$65,171,328	47,862	30.8 %	526,091	0.7	\$173
ANTIDEPRESSANTS	40,467,223	90,989	58.5	992,800	0.6	64
ANTICONVULSANT	28,194,184	41,244	26.5	454,674	0.8	79
ANALGESICS - Narcotic	25,268,367	104,225	67.0	1,145,278	0.4	52
ANALGESICS - ANTI-INFLAMMATORY	25,129,700	62,518	40.2	701,455	0.4	81
ANTHYPERLIPIDEMIC	22,468,558	36,030	23.2	400,603	0.7	86
ANTIDIABETIC	22,205,366	52,501	33.8	575,920	0.7	55
ANTIASTHMATIC	20,088,290	66,498	42.8	729,941	0.5	60
ANTHYPERTENSIVE	19,559,173	70,395	45.3	769,222	0.7	38
ULCER DRUGS	19,262,805	76,720	49.3	845,597	0.5	50
Total	287,814,994	648,982		7,141,581	n.a.	n.a.

Source: Data for this table are from the MAX 2002 file for Missouri, released by CMS in 05/2006. This table was produced on 04/19/2007.

a. Table D.7 includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2002. 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 2002. 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; n.a. = not applicable.

TABLE D.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}
 DUAL ELIGIBLE BENEFICIARIES, MISSOURI, 2002

Beneficiary Characteristics	All Top 10 Drug Groups				ANTIPSYCHOTICS				ANTIDEPRESSANTS			
	No. of RX	Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of RX	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of RX	Mean Rx \$
All	4,062,682	\$287,814,994	47,862	30.8 %	526,091	0.7	\$124	90,989	58.5 %	992,800	0.6	\$41
Female	2,722,834	181,639,206	28,161	28.6	309,909	0.7	106	62,674	63.6	687,126	0.6	41
Disabled	1,046,620	83,833,610	13,191	39.5	149,022	0.7	127	28,802	86.2	321,028	0.6	43
5 and younger	46	2,725	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	27	1,530	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	1,109	97,053	31	30.1	371	0.5	83	49	47.6	585	0.4	29
21-44	288,570	25,828,250	5,683	50.2	64,273	0.6	124	9,833	86.9	110,227	0.6	42
45-64	736,037	56,660,742	7,315	34.9	82,660	0.7	129	18,563	88.5	206,430	0.6	43
65-74	12,208	789,360	108	18.8	1,099	0.7	121	224	39.1	2,319	0.6	37
75-84	5,634	307,293	38	13.8	429	0.5	69	85	30.9	933	0.6	30
85 and older	2,989	146,657	16	9.0	190	0.5	46	48	27.0	534	0.7	32
Other Eligibles	1,676,214	97,805,596	14,970	23.0	160,887	0.6	86	33,872	52.0	366,098	0.7	39
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	98	8,104	0	0.0	0	0.0	0	1	16.7	12	1.0	22
15-20	177	11,265	4	25.0	48	0.4	62	11	68.8	117	0.3	18
21-44	10,142	815,756	197	22.0	1,919	0.4	63	586	65.5	5,623	0.5	31
45-64	2,625	168,713	33	19.3	329	0.4	55	118	69.0	1,173	0.5	31
65-74	604,733	37,820,721	3,844	18.5	42,962	0.7	105	10,562	50.9	117,853	0.6	37
75-84	630,226	36,306,292	5,374	23.1	58,094	0.7	87	12,012	51.5	130,699	0.7	39
85 and older	428,213	22,674,745	5,518	27.7	57,535	0.6	72	10,582	53.1	110,621	0.7	42
Male	1,339,848	106,175,788	19,701	34.6	216,182	0.8	150	28,315	49.7	305,674	0.6	41
Disabled	817,723	74,548,127	14,289	44.1	160,286	0.8	169	18,649	57.5	204,949	0.6	42
5 and younger	5	518	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	25	1,306	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	1,589	155,941	50	35.0	574	0.8	146	53	37.1	578	0.5	35
21-44	323,067	33,226,358	7,777	52.9	87,798	0.8	169	8,831	60.1	98,494	0.6	42
45-64	483,589	40,576,721	6,373	37.5	70,951	0.9	171	9,611	56.5	104,402	0.6	42
65-74	6,422	422,321	73	19.5	784	0.8	117	113	30.2	1,042	0.6	39
75-84	2,201	122,679	13	10.7	147	0.8	101	27	22.1	271	0.6	31
85 and older	825	42,283	3	5.1	32	0.9	86	14	23.7	162	0.6	35
Other Eligibles	522,125	31,627,661	5,412	22.0	55,896	0.7	95	9,666	39.4	100,725	0.7	39
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	28	895	0	0.0	0	0.0	0	1	50.0	12	0.3	4
15-20	228	16,646	4	26.7	45	0.2	20	6	40.0	72	0.4	39
21-44	7,301	573,867	87	14.3	859	0.4	75	278	45.6	2,828	0.4	29
45-64	4,204	293,168	19	5.8	195	0.5	69	116	35.4	1,127	0.5	32
65-74	253,357	16,286,850	2,062	18.5	22,416	0.7	114	3,890	34.9	42,500	0.6	38
75-84	179,484	10,336,390	2,051	24.6	20,880	0.7	88	3,453	41.4	35,410	0.7	39
85 and older	77,523	4,119,845	1,189	28.8	11,501	0.6	74	1,922	46.6	18,776	0.7	41
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 2002 file for Missouri, released by CMS in 05/2006. This table was produced on 04/19/2007.

a. Table D.7A includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2002. 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 2002. 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 D.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}
 DUAL ELIGIBLE BENEFICIARIES, MISSOURI, 2002

Beneficiary Characteristics	ANTICONVULSANT					ANALGESICS - Narcotic					ANALGESICS - ANTI-INFLAMMATORY				
	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
All	41,244	26.5 %	454,674	0.8	\$62	104,225	67.0 %	1,145,278	0.4	\$22	62,518	40.2 %	701,455	0.4	\$36
Female	24,753	25.1	273,797	0.8	57	71,564	72.6	792,639	0.4	21	43,545	44.2	491,251	0.5	38
Disabled	13,842	41.4	155,074	0.8	70	30,560	91.4	343,250	0.4	25	18,653	55.8	210,892	0.4	35
5 and younger	2	66.7	22	0.7	65	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	2	50.0	24	0.1	1	0	0.0	0	0.0	0
15-20	40	38.8	475	0.7	76	56	54.4	668	0.2	4	29	28.2	335	0.1	3
21-44	5,595	49.4	63,003	0.8	77	9,826	86.8	111,269	0.4	23	5,825	51.5	66,303	0.3	23
45-64	8,037	38.3	89,799	0.8	66	20,178	96.2	226,083	0.4	26	12,427	59.2	140,160	0.4	40
65-74	115	20.1	1,187	0.9	63	301	52.5	3,020	0.4	14	204	35.6	2,159	0.5	38
75-84	33	12.0	359	0.8	29	117	42.5	1,337	0.3	8	109	39.6	1,270	0.5	39
85 and older	20	11.2	229	0.6	25	80	44.9	849	0.3	8	59	33.1	665	0.5	39
Other Eligibles	10,911	16.8	118,723	0.7	40	41,004	63.0	449,389	0.4	17	24,892	38.2	280,359	0.5	40
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	1	16.7	10	0.6	10	0	0.0	0	0.0	0	1	16.7	10	0.3	6
15-20	3	18.8	36	0.5	18	15	93.8	180	0.2	3	4	25.0	47	0.2	7
21-44	226	25.3	2,105	0.5	47	707	79.1	7,101	0.4	32	362	40.5	3,590	0.3	19
45-64	40	23.4	403	0.5	43	130	76.0	1,312	0.5	21	69	40.4	691	0.4	31
65-74	4,006	19.3	44,682	0.7	45	14,591	70.3	164,472	0.4	16	9,516	45.8	109,357	0.5	40
75-84	4,179	17.9	45,599	0.7	39	14,691	63.0	162,237	0.4	18	8,998	38.6	101,956	0.5	40
85 and older	2,456	12.3	25,888	0.8	33	10,870	54.5	114,087	0.5	18	5,942	29.8	64,708	0.6	41
Male	16,491	28.9	180,877	0.8	69	32,661	57.3	352,639	0.4	26	18,973	33.3	210,204	0.4	31
Disabled	12,269	37.9	136,372	0.8	77	20,502	63.3	224,657	0.4	31	11,923	36.8	132,676	0.4	29
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	1	33.3	12	0.3	5	0	0.0	0	0.0	0
15-20	45	31.5	520	0.7	50	44	30.8	481	0.2	15	20	14.0	228	0.2	6
21-44	6,190	42.1	69,321	0.8	80	8,654	58.9	96,718	0.4	31	4,878	33.2	54,957	0.3	20
45-64	5,946	34.9	65,615	0.9	74	11,587	68.1	125,377	0.5	31	6,882	40.4	75,974	0.4	35
65-74	71	19.0	756	0.9	53	149	39.8	1,341	0.4	17	97	25.9	985	0.4	34
75-84	13	10.7	114	1.0	104	45	36.9	489	0.4	7	30	24.6	348	0.5	38
85 and older	4	6.8	46	0.6	30	22	37.3	239	0.4	8	16	27.1	184	0.6	36
Other Eligibles	4,222	17.2	44,505	0.8	46	12,159	49.5	127,982	0.4	17	7,050	28.7	77,528	0.5	36
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	2	100.0	24	0.1	1	0	0.0	0	0.0	0
15-20	5	33.3	60	1.3	152	6	40.0	64	0.3	9	2	13.3	24	0.6	49
21-44	140	23.0	1,380	0.5	45	488	80.1	4,987	0.4	36	222	36.5	2,199	0.3	19
45-64	39	11.9	397	0.5	31	228	69.5	2,176	0.5	35	104	31.7	1,028	0.4	35
65-74	2,049	18.4	22,461	0.8	51	5,817	52.3	63,066	0.4	18	3,469	31.2	39,039	0.5	36
75-84	1,390	16.6	14,233	0.8	43	3,781	45.3	39,582	0.4	13	2,260	27.1	24,987	0.5	37
85 and older	599	14.5	5,974	0.7	36	1,637	44.6	18,083	0.4	14	993	24.1	10,251	0.5	36
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Table D7B

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2002 file for Missouri, released by CMS in 05/2006. This table was produced on 04/19/2007.

- a. Table D.7B includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2002. 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 2002. 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 D.7C
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR SIXTH TO EIGHTH TOP DRUG GROUPS
 SEPARATELY, BY SEX, BOE, AND AGE^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, MISSOURI, 2002

Beneficiary Characteristics	ANTHYPERLIPIDEMIC					ANTI-DIABETIC					ANTI-ASTHMATIC				
	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
All	36,030	23.2 %	400,603	0.7	\$56	52,501	33.8 %	575,920	0.7	\$39	66,498	42.8 %	729,941	0.5	\$28
Female	23,834	24.2	267,908	0.7	56	36,412	37.0	402,759	0.7	38	44,261	44.9	490,259	0.5	27
Disabled	8,268	24.7	92,596	0.6	54	11,927	35.7	132,987	0.7	43	18,269	54.7	205,356	0.4	28
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	2	1.9	24	0.5	45	6	5.8	72	0.4	8	22	21.4	260	0.2	15
21-44	1,207	10.7	13,722	0.6	46	1,988	17.6	22,504	0.6	40	4,759	42.1	54,040	0.4	22
45-64	6,839	32.6	76,454	0.6	55	9,544	45.5	106,292	0.7	44	13,141	62.6	147,644	0.5	30
65-74	131	22.9	1,371	0.6	55	235	41.0	2,354	0.7	39	254	44.3	2,387	0.6	32
75-84	67	24.4	771	0.7	55	113	41.1	1,299	0.8	36	55	20.0	624	0.5	30
85 and older	22	12.4	254	0.7	60	41	23.0	466	0.8	27	38	21.3	401	0.6	20
Other Eligibles	15,566	23.9	175,312	0.7	58	24,485	37.6	269,772	0.7	35	25,992	39.9	284,903	0.5	26
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	1	16.7	8	0.4	26	4	66.7	44	0.7	38	2	33.3	20	0.1	3
15-20	1	6.3	12	0.8	50	1	6.3	12	0.3	26	6	37.5	72	0.3	22
21-44	32	3.6	305	0.5	41	72	8.1	659	0.6	33	246	27.5	2,366	0.3	16
45-64	23	13.5	231	0.6	56	36	21.1	337	0.6	32	63	36.8	630	0.3	16
65-74	7,543	36.3	85,744	0.7	59	10,405	50.1	117,060	0.7	39	10,690	51.5	120,117	0.5	30
75-84	6,091	26.1	68,418	0.7	59	9,418	40.4	103,808	0.7	34	9,107	39.1	99,863	0.5	26
85 and older	1,875	9.4	20,594	0.7	53	4,549	22.8	47,852	0.7	29	5,878	29.5	61,835	0.4	19
Male	12,196	21.4	132,695	0.6	56	16,089	28.2	173,161	0.7	40	22,237	39.0	239,682	0.5	29
Disabled	6,882	21.2	74,959	0.6	54	8,190	25.3	89,277	0.7	45	10,843	33.5	118,684	0.5	29
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	100.0	24	0.1	3
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	66.7	24	0.2	6
15-20	1	0.7	12	0.4	28	3	2.1	36	0.5	43	30	21.0	354	0.4	16
21-44	1,772	12.1	19,861	0.6	50	1,929	13.1	21,600	0.7	44	3,339	22.7	37,719	0.4	22
45-64	5,005	29.4	54,061	0.6	56	6,102	35.9	66,113	0.7	45	7,236	42.5	78,394	0.5	32
65-74	74	19.8	693	0.6	52	117	31.3	1,116	0.7	41	171	45.7	1,537	0.5	30
75-84	25	20.5	272	0.6	47	30	24.6	318	0.8	42	49	40.2	465	0.6	33
85 and older	5	8.5	60	0.8	75	9	15.3	94	0.5	31	14	23.7	167	0.4	28
Other Eligibles	5,314	21.6	57,736	0.7	57	7,899	32.2	83,884	0.7	36	11,394	46.4	120,998	0.5	29
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	50.0	12	0.2	3
15-20	0	0.0	0	0.0	0	2	13.3	24	1.0	42	0	0.0	0	0.0	0
21-44	63	10.3	663	0.5	41	64	10.5	699	0.6	43	122	20.0	1,359	0.3	20
45-64	63	19.2	598	0.7	61	49	14.9	418	0.7	42	79	24.1	825	0.4	29
65-74	3,164	28.4	34,823	0.7	58	4,120	37.0	44,992	0.7	39	5,480	49.2	59,595	0.5	32
75-84	1,668	20.0	18,036	0.7	57	2,694	32.3	28,231	0.7	33	3,978	47.6	41,644	0.5	28
85 and older	356	8.6	3,616	0.7	49	970	23.5	9,520	0.7	28	1,734	42.1	17,563	0.5	22
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Table D7C

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2002 file for Missouri, released by CMS in 05/2006. This table was produced on 04/19/2007.

- a. Table D.7C includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2002. 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 2002. 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 D.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}
 DUAL ELIGIBLE BENEFICIARIES, MISSOURI, 2002

Beneficiary Characteristics	ANTIHYPERTENSIVE					ULCER DRUGS						
	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Benes	No. of Bene Mos
All	70,395	45.3 %	769,222	0.7	\$25	76,720	49.3 %	845,597	0.5	\$23	155,495	1,593,094
Female	47,969	48.7	528,424	0.7	26	53,384	54.2	592,253	0.5	22	98,528	1,023,580
Disabled	12,256	36.7	136,658	0.6	25	19,187	57.4	215,685	0.4	22	33,428	355,090
5 and younger	0	0.0	0	0.0	0	3	100.0	30	1.0	43	3	30
6-14	1	25.0	12	0.7	6	5	125.0	50	0.3	29	4	43
15-20	5	4.9	60	0.4	19	21	20.4	246	0.2	11	103	1,128
21-44	1,940	17.1	21,821	0.6	21	5,138	45.4	58,082	0.4	20	11,316	122,584
45-64	9,792	46.7	109,201	0.6	26	13,588	64.8	152,613	0.4	23	20,976	221,837
65-74	273	47.6	2,763	0.7	27	254	44.3	2,639	0.4	20	573	4,898
75-84	146	53.1	1,676	0.6	26	114	41.5	1,294	0.5	22	275	2,752
85 and older	99	55.6	1,125	0.7	25	64	36.0	731	0.4	26	178	1,818
Other Eligibles	35,713	54.9	391,766	0.7	26	34,197	52.5	376,568	0.5	23	65,100	668,490
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	13
6-14	5	83.3	56	0.4	24	5	83.3	52	0.4	85	6	64
15-20	3	18.8	26	0.3	12	5	31.3	60	0.2	32	16	145
21-44	84	9.4	792	0.5	24	207	23.2	2,065	0.3	20	894	7,226
45-64	35	20.5	322	0.5	19	52	30.4	508	0.4	18	171	1,331
65-74	12,441	59.9	139,497	0.7	27	11,652	56.1	131,552	0.4	22	20,769	217,930
75-84	13,823	59.3	152,852	0.7	27	12,617	54.1	139,864	0.5	23	23,310	242,645
85 and older	9,322	46.8	98,221	0.7	25	9,659	48.5	102,467	0.6	23	19,932	199,136
Male	22,426	39.4	240,798	0.7	24	23,336	41.0	253,344	0.5	24	56,967	569,514
Disabled	10,739	33.1	116,472	0.6	24	12,618	38.9	139,129	0.4	24	32,408	333,930
5 and younger	0	0.0	0	0.0	0	1	50.0	12	0.3	37	2	24
6-14	1	33.3	12	0.8	9	3	100.0	36	0.2	28	3	36
15-20	23	16.1	267	0.5	14	22	15.4	253	0.4	25	143	1,540
21-44	3,027	20.6	33,822	0.6	22	4,566	31.1	51,256	0.4	23	14,691	156,831
45-64	7,462	43.9	80,095	0.6	25	7,832	46.0	85,637	0.5	25	17,014	170,618
65-74	143	38.2	1,372	0.7	24	131	35.0	1,250	0.5	27	374	3,058
75-84	58	47.5	631	0.7	25	42	34.4	457	0.6	29	122	1,241
85 and older	25	42.4	273	0.7	26	21	35.6	228	0.6	20	59	582
Other Eligibles	11,687	47.6	124,326	0.7	24	10,718	43.6	114,215	0.5	23	24,559	235,584
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12
6-14	3	150.0	36	0.3	2	3	150.0	36	0.3	20	2	24
15-20	5	33.3	59	0.6	8	5	33.3	56	0.3	10	15	128
21-44	105	17.2	1,075	0.6	22	142	23.3	1,471	0.3	23	609	5,195
45-64	100	30.5	964	0.6	21	91	27.7	903	0.3	24	328	2,559
65-74	5,653	50.8	61,473	0.7	25	4,929	44.3	54,117	0.5	23	11,132	110,153
75-84	4,112	49.3	43,490	0.7	24	3,654	43.8	38,633	0.5	23	8,349	79,760
85 and older	1,709	41.5	17,229	0.7	22	1,894	45.9	18,999	0.5	23	4,123	37,753
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0

Table D7D

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2002 file for Missouri, released by CMS in 05/2006. This table was produced on 04/19/2007.

a. Table D.7D includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2002. 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 2002. 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 D.8
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BENEFICIARY CHARACTERISTIC^{a, b}
 DUAL ELIGIBLE BENEFICIARIES, MISSOURI, 2002

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	\$344	7.3	21,007	222,879
Age				
0-64	508	8.4	1,937	21,997
65-74	428	8.4	2,829	30,372
75-84	362	7.7	6,687	70,502
85 and older	271	6.5	9,554	100,008
Unknown	0	0.0	0	0
Gender				
Female	333	7.3	15,532	166,085
Male	377	7.3	5,475	56,794
Unknown	0	0.0	0	0
Race				
White	350	7.5	18,077	191,213
African American	309	6.1	2,504	27,615
Other/unknown	306	6.8	426	4,051
Basis of Eligibility^c				
Aged	327	7.2	19,000	200,184
Disabled	503	8.3	2,006	22,683
Adults	0	0.0	0	0
Children	113	4.3	1	12
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 2002 file for Missouri, released by CMS in 05/2006. This table was produced on 04/19/2007.

a. Table D.8 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their 2002 Medicaid enrollment. A total of 13,984 beneficiaries who were in nursing facilities for part of their enrollment and their 126,772 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 = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy; \$ = Medicaid reimbursement.

TABLE D.9
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d, e}
 DUAL ELIGIBLE BENEFICIARIES, MISSOURI, 2002

Therapeutic Category	No. of Rx per Bene Mo among Users			\$ per Bene Mo among Users			\$ per Rx			Users							
	Total	Patented	Off-Patent	Total	Patented	Off-Patent	Total	Patented	Off-Patent	Total # of Rx	Total Rx \$	No.	As % of Dual All-Year NF Residents	No. of Bene Mos			
		Brand-Name	Generic	Brand-Name	Generic	Brand-Name	Brand-Name	Generic	Brand-Name	Brand-Name	Brand-Name	Brand-Name	Brand-Name	Brand-Name	Brand-Name		
Anti-infective Agents	0.4	0.2	0.0	0.2	\$18	\$15	\$1	\$2	\$50	\$80	\$69	\$14	61,901	\$3,115,690	15,180	72.3 %	168,526
Biologics	0.1	0.1	0.0	0.0	1	1	0	0	15	13	0	19	1,530	22,727	1,475	7.0	16,856
Antineoplastic Agents	0.6	0.2	0.1	0.3	77	43	15	19	123	202	139	62	8,224	1,012,031	1,227	5.8	13,204
Endocrine/Metabolic Drugs	1.2	0.5	0.1	0.5	40	31	2	7	34	58	20	13	134,735	4,537,059	10,409	49.6	113,057
Cardiovascular Agents	2.1	0.5	0.2	1.4	54	28	6	21	26	54	27	15	358,679	9,295,454	15,904	75.7	170,841
Respiratory Agents	0.7	0.3	0.1	0.3	31	21	5	5	42	65	62	16	86,495	3,670,766	10,561	50.3	117,172
Gastrointestinal Agents	1.0	0.2	0.0	0.7	33	20	1	12	33	90	63	15	124,150	4,127,634	11,408	54.3	124,778
Genitourinary Agents	0.7	0.5	0.0	0.1	41	37	0	3	61	73	40	18	36,827	2,243,277	5,006	23.8	55,389
CNS Drugs	1.7	1.1	0.1	0.6	138	119	7	12	79	112	67	21	300,976	23,732,783	15,955	76.0	172,448
Stimulants/Anti-obesity/Anorexia	0.8	0.0	0.2	0.6	38	0	7	31	49	0	41	52	56	2,771	7	0.0	72
Miscellaneous Psychological/Neurological Agents	0.8	0.8	0.0	0.0	104	104	0	0	125	126	0	24	34,720	4,340,974	3,935	18.7	41,725
Analgesics and Anesthetics	1.0	0.4	0.1	0.5	52	41	3	7	51	96	48	14	123,735	6,280,344	11,137	53.0	121,129
Neuromuscular Agents	1.4	0.5	0.1	0.7	75	47	7	20	55	88	51	30	112,257	6,177,190	7,473	35.6	82,819
Nutritional Products	0.8	0.0	0.1	0.7	13	0	1	12	18	24	19	17	72,070	1,268,966	8,796	41.9	96,042
Hematological Agents	1.1	0.3	0.2	0.6	51	39	4	7	46	130	17	13	83,521	3,873,036	7,042	33.5	76,298
Topical Products	0.5	0.2	0.0	0.3	19	13	2	5	36	57	44	17	76,443	2,751,700	12,784	60.9	142,863
Miscellaneous Products	0.3	0.2	0.0	0.2	11	6	1	4	34	39	241	25	5,335	181,358	1,481	7.1	16,427
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	8	0	0	0	26	0	0	0	5,206	134,154	1,565	7.4	17,649
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.	1,626,860	76,767,914	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2002 file for Missouri, released by CMS in 05/2006. This table was produced on 04/19/2007.

- a. Table D.9 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2002. A total of 13,984 beneficiaries who were in nursing facilities for part of their enrollment and their 126,772 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 2002. 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 Missouri, 0.5 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.

Bene Mo(s) = benefit month(s); CMS = 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 D.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}
 DUAL ELIGIBLE BENEFICIARIES, MISSOURI, 2002

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	\$13,450,088	10,911	51.9 %	121,424	0.8	\$142	\$111
ANTIDEPRESSANTS	8,881,586	15,823	75.3	174,914	0.8	61	51
ANTICONVULSANT	4,396,212	6,676	31.8	75,261	1.0	57	58
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	4,340,974	3,861	18.4	41,518	0.8	125	105
ULCER DRUGS	3,096,251	10,851	51.7	120,074	0.7	38	26
ANALGESICS - Narcotic	3,067,656	10,969	52.2	120,352	0.6	42	25
ANALGESICS - ANTI-INFLAMMATORY	3,034,480	5,899	28.1	66,217	0.6	71	46
ANTIHYPERTENSIVE	2,734,443	9,262	44.1	100,817	0.8	32	27
ANTIDIABETIC	2,729,188	7,249	34.5	80,315	0.8	40	34
MISC. HEMATOLOGICAL	2,141,419	2,721	13.0	29,976	0.8	89	71
Total	47,872,297	84,222		930,868	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2002 file for Missouri, released by CMS in 05/2006. This table was produced on 04/19/2007.

a. Table D.10 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2002. A total of 13,984 beneficiaries who were in nursing facilities for part of their enrollment and their 126,772 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 2002. 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 2002 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 D.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}
DUAL ELIGIBLE BENEFICIARIES, MISSOURI, 2002

Beneficiary Characteristics	All Top 10 Drug Groups					ANTIPSYCHOTICS					ANTIDEPRESSANTS				
	No. of Rx	Rx \$	Users as %			Mean Rx \$	No. of Bene Mos among Users	Mean No. of Rx	Users as % of All-Year Residents	No. of Bene Mos among Users	Mean No. of Rx	Users as % of All-Year Residents	No. of Bene Mos among Users	Mean No. of Rx	
			No. of Users	Residents	NF										No. of Users
All	727,013	\$47,872,297	10,911	51.9 %	121,424	0.8	\$111	15,823	75.3 %	174,914	0.8	\$51			
Female	532,197	34,150,295	7,633	49.1	85,485	0.8	104	11,755	75.7	130,498	0.8	51			
Disabled	46,061	3,541,383	717	74.1	8,355	0.9	154	861	89.0	9,972	0.9	57			
64 or younger	44,660	3,455,239	692	74.9	8,067	0.9	156	837	90.6	9,716	0.9	58			
65-74	722	46,945	15	107.1	171	0.9	129	10	71.4	108	0.9	45			
75-84	283	16,090	5	41.7	57	0.4	71	4	33.3	39	0.5	32			
85 and older	396	23,109	5	29.4	60	0.4	44	10	58.8	109	0.4	23			
Other Eligibles	486,136	30,608,912	6,916	47.5	77,130	0.7	99	10,894	74.8	120,526	0.8	50			
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0			
65-74	76,459	5,229,556	1,148	69.6	12,980	0.9	138	1,444	87.5	16,102	0.9	55			
75-84	186,806	12,001,657	2,598	53.3	29,160	0.8	104	4,008	82.2	44,475	0.8	51			
85 and older	222,871	13,377,699	3,170	39.4	34,990	0.7	80	5,442	67.7	59,949	0.8	48			
Male	194,816	13,722,002	3,278	59.9	35,939	0.8	127	4,068	74.3	44,416	0.8	52			
Disabled	49,833	4,078,955	854	82.2	9,827	1.0	174	870	83.7	9,995	0.9	56			
64 or younger	49,134	4,027,298	838	82.7	9,644	1.0	175	849	83.8	9,792	0.9	56			
65-74	605	43,767	14	70.0	159	0.8	103	17	85.0	157	0.8	51			
75-84	50	5,317	2	50.0	24	0.9	197	1	25.0	12	0.1	0			
85 and older	44	2,573	0	0.0	0	0.0	0	3	150.0	34	0.6	43			
Other Eligibles	144,983	9,643,047	2,424	54.6	26,112	0.8	109	3,198	72.1	34,421	0.8	50			
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0			
65-74	45,964	3,282,783	768	67.1	8,678	0.8	131	871	76.1	9,787	0.8	54			
75-84	59,967	3,932,817	999	55.6	10,656	0.8	105	1,336	74.3	14,223	0.8	51			
85 and older	39,052	2,427,447	657	44.0	6,778	0.7	88	991	66.4	10,411	0.8	47			
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 2002 file for Missouri, released by CMS in 05/2006. This table was produced on 04/19/2007.

a. Table D.10A includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2002. A total of 13,984 beneficiaries who were in nursing facilities for part of their enrollment and their 126,772 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 2002. 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 2002 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 D.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}
 DUAL ELIGIBLE BENEFICIARIES, MISSOURI, 2002

Beneficiary Characteristics	ANTICONVULSANT					MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL					ULCER DRUGS				
	No. of Users	No. of Bene NF Residents	No. of Bene among Users	Mean No. of Rx	Mean Rx \$	No. of Users	No. of Bene NF Residents	No. of Bene among Users	Mean No. of Rx	Mean Rx \$	No. of Users	No. of Bene NF Residents	No. of Bene among Users	Mean No. of Rx	Mean Rx \$
All	6,676	31.8 %	75,261	1.0	\$58	3,861	18.4 %	41,518	0.8	\$105	10,851	51.7 %	120,074	0.7	\$26
Female	4,311	27.8	48,653	1.0	53	2,846	18.3	31,037	0.8	105	8,102	52.2	90,058	0.7	26
Disabled	775	80.1	8,983	1.2	79	82	8.5	916	0.8	152	534	55.2	6,222	0.7	29
64 or younger	762	82.5	8,830	1.2	79	76	8.2	844	0.8	157	512	55.4	5,986	0.7	29
65-74	6	42.9	72	1.1	50	2	14.3	24	1.6	136	6	42.9	49	0.8	28
75-84	4	33.3	45	0.8	29	0	0.0	0	0.0	0	7	58.3	81	0.7	34
85 and older	3	17.6	36	0.9	44	4	23.5	48	0.6	77	9	52.9	106	0.5	33
Other Eligibles	3,536	24.3	39,670	0.9	47	2,764	19.0	30,121	0.8	103	7,568	52.0	83,836	0.7	25
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	872	52.8	9,888	1.1	59	238	14.4	2,625	0.8	102	960	58.2	10,757	0.7	27
75-84	1,492	30.6	16,771	0.9	48	1,105	22.7	11,882	0.8	104	2,694	55.3	30,049	0.7	25
85 and older	1,172	14.6	13,011	0.9	38	1,421	17.7	15,614	0.8	103	3,914	48.7	43,030	0.7	25
Male	2,365	43.2	26,608	1.1	68	1,015	18.5	10,481	0.8	104	2,749	50.2	30,016	0.7	26
Disabled	904	87.0	10,558	1.2	86	76	7.3	831	0.8	146	543	52.3	6,277	0.7	27
64 or younger	890	87.9	10,406	1.2	87	72	7.1	789	0.8	148	530	52.3	6,153	0.7	27
65-74	14	70.0	152	1.0	50	4	20.0	42	0.8	107	9	45.0	76	0.8	25
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	50.0	24	1.0	15
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	100.0	24	0.6	14
Other Eligibles	1,461	32.9	16,050	1.0	56	939	21.2	9,650	0.8	101	2,206	49.7	23,739	0.7	26
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	591	51.6	6,744	1.1	67	192	16.8	2,054	0.8	104	588	51.4	6,586	0.7	26
75-84	589	32.8	6,374	1.0	52	431	24.0	4,406	0.8	101	887	49.3	9,419	0.7	28
85 and older	281	18.8	2,932	0.8	42	316	21.2	3,190	0.8	98	731	49.0	7,734	0.7	24
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 2002 file for Missouri, released by CMS in 05/2006. This table was produced on 04/19/2007.

a. Table D.10B includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2002. A total of 13,984 beneficiaries who were in nursing facilities for part of their enrollment and their 126,772 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 2002. 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 2002 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 D.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}
 DUAL ELIGIBLE BENEFICIARIES, MISSOURI, 2002

Beneficiary Characteristics	ANALGESICS - Narcotic						ANALGESICS - ANTI-INFLAMMATORY						ANTIHYPERTENSIVE					
	Users as %			Users as %			Users as %			Users as %			Users as %			Users as %		
	No. of Users	No. of Bene NF Residents	Mean No. of Rx	No. of Users	No. of Bene NF Residents	Mean No. of Rx	No. of Users	No. of Bene NF Residents	Mean No. of Rx	No. of Users	No. of Bene NF Residents	Mean No. of Rx	No. of Users	No. of Bene NF Residents	Mean No. of Rx	No. of Users	No. of Bene NF Residents	Mean No. of Rx
All	10,969	52.2 %	0.6	120,352	0.6	\$26	5,899	28.1 %	0.6	66,217	0.6	\$46	9,262	44.1 %	0.8	100,817	0.8	\$27
Female	8,603	55.4	0.6	94,728	0.6	27	4,511	29.0	0.7	50,794	0.7	47	6,713	43.2	0.8	73,566	0.8	27
Disabled	548	56.7	0.7	6,295	0.7	31	298	30.8	0.6	3,465	0.6	38	322	33.3	0.8	3,675	0.8	27
64 or younger	517	56.0	0.7	6,016	0.7	32	284	30.7	0.6	3,315	0.6	37	301	32.6	0.8	3,437	0.8	27
65-74	15	107.1	1.1	116	1.1	34	6	42.9	0.9	63	0.9	56	4	28.6	1.2	48	1.2	45
75-84	8	66.7	0.8	84	0.8	7	3	25.0	0.5	36	0.5	38	6	50.0	0.8	69	0.8	32
85 and older	8	47.1	0.4	79	0.4	11	5	29.4	0.5	51	0.5	58	11	64.7	0.7	121	0.7	26
Other Eligibles	8,055	55.3	0.6	88,433	0.6	27	4,213	28.9	0.7	47,329	0.7	48	6,391	43.9	0.9	69,891	0.9	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	0.0	0	0.0	0
65-74	1,014	61.5	0.7	11,239	0.7	29	504	30.5	0.6	5,791	0.6	48	812	49.2	0.9	9,049	0.9	28
75-84	2,858	58.6	0.7	31,580	0.7	31	1,521	31.2	0.7	17,139	0.7	49	2,362	48.5	0.9	26,103	0.9	28
85 and older	4,183	52.0	0.6	45,614	0.6	23	2,188	27.2	0.7	24,399	0.7	46	3,217	40.0	0.8	34,739	0.8	27
Male	2,366	43.2	0.6	25,624	0.6	20	1,388	25.4	0.6	15,423	0.6	42	2,549	46.6	0.8	27,251	0.8	26
Disabled	463	44.6	0.6	5,333	0.6	23	274	26.4	0.6	3,173	0.6	38	424	40.8	0.8	4,803	0.8	26
64 or younger	458	45.2	0.6	5,296	0.6	23	269	26.6	0.6	3,124	0.6	38	415	41.0	0.8	4,729	0.8	26
65-74	4	20.0	0.2	26	0.2	2	3	15.0	0.7	25	0.7	66	8	40.0	1.0	62	1.0	36
75-84	0	0.0	0.0	0	0.0	0	1	25.0	0.2	12	0.2	13	1	25.0	0.2	12	0.2	7
85 and older	1	50.0	0.1	11	0.1	1	1	50.0	0.8	12	0.8	64	0	0.0	0.0	0	0.0	0
Other Eligibles	1,903	42.9	0.5	20,291	0.5	19	1,114	25.1	0.6	12,250	0.6	43	2,125	47.9	0.8	22,448	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	0.0	0.0	0	0.0	0
65-74	492	43.0	0.6	5,500	0.6	22	304	26.6	0.6	3,481	0.6	42	582	50.8	0.9	6,437	0.9	29
75-84	757	42.1	0.5	8,021	0.5	19	449	25.0	0.6	4,944	0.6	43	925	51.4	0.8	9,694	0.8	26
85 and older	654	43.8	0.5	6,770	0.5	18	361	24.2	0.6	3,825	0.6	43	618	41.4	0.8	6,317	0.8	25
Unknown	0	0.0	0.0	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 2002 file for Missouri, released by CMS in 05/2006. This table was produced on 04/19/2007.

- a. Table D.10C includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2002. A total of 13,984 beneficiaries who were in nursing facilities for part of their enrollment and their 126,772 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 2002. 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 2002 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).
- Benefit 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 D.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}
DUAL ELIGIBLE BENEFICIARIES, MISSOURI, 2002

Beneficiary Characteristics	ANTIDIABETIC					MISC. HEMATOLOGICAL					Bene Mos among All-Year NF Residents	
	Users as %		No. of Bene		Mean Rx	Users as %		No. of Bene		Mean Rx		
	No. of Users	Residents	NF Residents	Users		NF Residents	Users	No. of Rx				
All	7,249	34.5 %	80,315	0.8	\$34	2,721	13.0 %	29,976	0.8	\$71	21,007	222,879
Female	5,292	34.1	59,051	0.8	34	1,951	12.6	21,666	0.8	72	15,532	166,085
Disabled	421	43.5	4,837	0.9	41	50	5.2	577	0.8	66	967	10,918
64 or younger	405	43.8	4,647	0.9	41	48	5.2	553	0.8	64	924	10,476
65-74	7	50.0	84	0.7	28	0	0.0	0	0.0	0	14	135
75-84	5	41.7	60	0.9	24	1	8.3	12	0.9	91	12	132
85 and older	4	23.5	46	1.0	19	1	5.9	12	1.0	110	17	175
Other Eligibles	4,871	33.4	54,214	0.8	33	1,901	13.1	21,089	0.8	72	14,565	155,167
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	921	55.8	10,407	0.9	37	211	12.8	2,423	0.8	72	1,650	17,823
75-84	2,120	43.5	23,820	0.8	34	686	14.1	7,663	0.8	75	4,873	52,207
85 and older	1,830	22.8	19,987	0.8	31	1,004	12.5	11,003	0.8	70	8,042	85,137
Male	1,957	35.7	21,264	0.8	34	770	14.1	8,310	0.8	70	5,475	56,794
Disabled	387	37.2	4,390	0.9	38	100	9.6	1,177	0.7	65	1,039	11,765
64 or younger	385	38.0	4,377	0.9	38	98	9.7	1,153	0.7	65	1,013	11,521
65-74	2	10.0	13	0.2	5	2	10.0	24	0.7	59	20	183
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	4	38
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	23
Other Eligibles	1,570	35.4	16,874	0.8	33	670	15.1	7,133	0.8	71	4,436	45,029
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	525	45.9	5,910	0.8	35	173	15.1	1,898	0.8	70	1,145	12,231
75-84	663	36.9	7,082	0.8	33	278	15.5	3,017	0.8	70	1,798	18,125
85 and older	382	25.6	3,882	0.8	31	219	14.7	2,218	0.8	72	1,493	14,673
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 2002 file for Missouri, released by CMS in 05/2006. This table was produced on 04/19/2007.

a. Table D.10D includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2002. A total of 13,984 beneficiaries who were in nursing facilities for part of their enrollment and their 126,772 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 2002. 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 2002 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 D.11
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
 AMONG DUALS, BY BENEFICIARY CHARACTERISTIC^{a,b}
 MISSOURI, 2002

Beneficiary Characteristics	No. of Benes with at Least One Part D Excl Rx	% Benes with at Least One Part D Excl Rx		No. of Part D Excl Rx per Bene		Total No. Part D Excl Rx	Total Part D Excl Rx \$	\$ per Part D Excl Rx	Part D Excl Rx as % of All Dual Rx \$	Total No. of Benes
		64.2 %	6.3	6.3	\$103					
All	99,904	64.2 %	6.3	6.3	\$103	978,560	\$15,986,721	\$16	3.3 %	155,495
Age										
5 and younger	5	62.5	10.8	10.8	453	86	3,626	42	9.5	8
6-14	14	93.3	9.5	9.5	141	143	2,110	15	1.6	15
15-20	112	40.4	2.5	2.5	56	705	15,489	22	2.4	277
21-44	15,154	55.1	4.9	4.9	96	135,754	2,642,493	19	2.7	27,510
45-64	25,718	66.8	7.1	7.1	137	272,649	5,259,917	19	3.4	38,489
65-74	20,200	61.5	6.0	6.0	96	195,600	3,145,517	16	3.5	32,848
75-84	21,312	66.5	6.5	6.5	89	207,707	2,839,521	14	3.4	32,056
85 and older	17,389	71.6	6.8	6.8	86	165,916	2,078,048	13	3.8	24,292
Unknown	0	0.0	0.0	0.0	0	0	0	0	0.0	0
Basis of Eligibility^c										
Aged	57,975	66.2	6.4	6.4	91	561,001	7,950,181	14	3.5	87,532
Disabled	41,019	62.3	6.3	6.3	120	411,972	7,916,444	19	3.1	65,836
Adults	884	42.5	2.6	2.6	55	5,352	113,662	21	3.7	2,082
Children	26	57.8	5.2	5.2	143	235	6,434	27	3.4	45
Unknown	0	0.0	0.0	0.0	0	0	0	0	0.0	0
Gender										
Female	67,909	68.9	7.0	7.0	113	686,713	11,089,677	16	3.6	98,528
Male	31,995	56.2	5.1	5.1	86	291,847	4,897,044	17	2.8	56,967
Unknown	0	0.0	0.0	0.0	0	0	0	0	0.0	0
Race										
White	82,504	66.3	6.7	6.7	113	837,920	14,013,312	17	3.4	124,470
African American	15,236	56.3	4.6	4.6	64	124,491	1,725,017	14	2.6	27,041
Other/unknown	2,164	54.3	4.1	4.1	62	16,149	248,392	15	2.9	3,984
Use of Nursing Facilities^d										
Entire year	16,534	78.7	8.7	8.7	117	182,517	2,464,590	14	3.2	21,007
Part year	11,037	78.9	7.2	7.2	97	100,700	1,362,208	14	3.5	13,984
None	72,333	60.0	5.8	5.8	101	695,343	12,159,923	17	3.3	120,504
Maintenance Assistance Status										
Cash	31,264	64.2	6.7	6.7	107	325,047	5,199,567	16	3.4	48,692
Medically needy	0	0.0	0.0	0.0	0	0	0	0	0.0	0
Poverty related	3,434	59.5	4.5	4.5	76	25,757	439,972	17	3.2	5,776
Other/unknown	65,206	64.5	6.2	6.2	102	627,756	10,347,182	16	3.3	101,027

Table D11

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2002 file for Missouri, released by CMS in 05/2006. This table was produced on 04/19/2007.

- a. Table D.11 includes the beneficiaries represented by Cell G of Table 1. Beneficiaries include all dual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2002.
- b. The statute establishing the Medicare Part D prescription program that started in 2006 excludes several types of drugs from coverage. State Medicaid programs have been allowed to exclude these drugs since 1990, but many states have chosen to cover them, and if states cover them for any Medicaid beneficiaries they must also cover them for dual eligibles, who as of 2006 receive the remainder of their prescription drug coverage through Part D. Excluded drugs include benzodiazepines; barbiturates; nonprescription (OTC) medications; prescription vitamins and minerals (not including prenatal vitamins and fluoride preparations); and drugs used for anorexia, weight loss, or weight gain. Other excluded drugs include those that promote fertility; those used for cosmetic purposes or hair growth, for symptomatic relief of coughs and colds; or drugs for which the manufacturer requires that associated tests or monitoring services be purchased exclusively from the manufacturer.
- c. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.
- d. Please refer to footnote f on Table 1 for methodology used to determine use of nursing facilities.

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

TABLE D.12
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
 AMONG DUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a,b}
 MISSOURI, 2002

Beneficiary Characteristics	No. Rx per Bene Mo.	Rx \$ per Bene Mo.	\$ per Rx	Barbiturate \$ per Bene Mo.	Benzodiazapine \$ per Bene Mo.	No. of Bene Mos
All	0.6	\$10	\$16	\$0	\$3	1,593,094
Age						
5 and younger	1.1	46	42	0	2	79
6-14	0.9	13	15	0	1	167
15-20	0.2	5	22	0	1	2,941
21-44	0.5	9	19	0	4	291,836
45-64	0.7	13	19	0	4	396,345
65-74	0.6	9	16	0	3	336,039
75-84	0.6	9	14	0	2	326,398
85 and older	0.7	9	13	0	2	239,289
Unknown	0.0	0	0	0	0	0
Basis of Eligibility^c						
Aged	0.6	9	14	0	2	886,728
Disabled	0.6	11	19	0	4	689,020
Adults	0.3	7	21	0	2	16,934
Children	0.6	16	27	0	1	412
Unknown	0.0	0	0	0	0	0
Gender						
Female	0.7	11	16	0	3	1,023,580
Male	0.5	9	17	0	3	569,514
Unknown	0.0	0	0	0	0	0
Race						
White	0.7	11	17	0	3	1,271,368
African American	0.4	6	14	0	1	282,304
Other/unknown	0.4	6	15	0	2	39,422
Use of Nursing Facilities^d						
Entire year	0.8	11	14	0	3	222,879
Part year	0.8	11	14	0	3	126,772
None	0.6	10	17	0	3	1,243,443
Maintenance Assistance Status						
Cash	0.6	9	16	0	3	555,361
Medically needy	0.0	0	0	0	0	0
Poverty related	0.5	9	17	0	3	48,395
Other/unknown	0.6	10	16	0	3	989,338

Source: Data for this table are from the MAX 2002 file for Missouri, released by CMS in 05/2006. This table was produced on 04/19/2007.

- a. Table D.12 includes the beneficiaries represented by Cell G of Table 1. Beneficiaries include all dual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2002.
- b. The statute establishing the Medicare Part D prescription program that started in 2006 excludes several types of drugs from coverage. State Medicaid programs have been allowed to exclude these drugs since 1990, but many states have chosen to cover them, and if states cover them for any Medicaid beneficiaries they must also cover them for dual eligibles, who as of 2006 receive the remainder of their prescription drug coverage through Part D. Excluded drugs include benzodiazepines; barbiturates; nonprescription (OTC) medications; prescription vitamins and minerals (not including prenatal vitamins and fluoride preparations); and drugs used for anorexia, weight loss, or weight gain. Other excluded drugs include those that promote fertility; those used for cosmetic purposes or hair growth, for symptomatic relief of coughs and colds; or drugs for which the manufacturer requires that associated tests or monitoring services be purchased exclusively from the manufacturer.
- c. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.
- d. Please refer to footnote f on Table 1 for methodology used to determine use of nursing facilities.
- Bene(s) = beneficiary (or beneficiaries); CMS = Center for Medicare and Medicaid Services; Excl = excluded; MAX = Medicaid Analytic Extract, OTC = over-the-counter; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.13
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
 FOR SELECTED DRUG CATEGORIES AMONG DUALS^{a,b,c}
 MISSOURI, 2002

Drug Category	No. Users	Rx \$ per User	Total Rx \$	Rx \$ as % of All Part D Excl Rx \$	Total No. Rx.	\$ per Rx	No. Rx as % of All Part D Excl Rx
All	174,665	\$92	\$15,986,721	100.0 %	978,560	\$16	100.0 %
Anorexia or weight loss/gain	1	11	11	0.0	1	11	0.0
Fertility drugs	0	0	0	0.0	0	0	0.0
Drugs for cosmetic purposes	56	23	1,297	0.0	103	13	0.0
Cough and cold medications	38,349	100	3,838,457	24.0	130,915	29	13.4
Vitamins and minerals	37,290	124	4,618,237	28.9	257,470	18	26.3
Non-prescription drugs	51,640	30	1,548,783	9.7	250,941	6	25.6
Barbiturates	1,573	79	124,159	0.8	16,821	7	1.7
Benzodiazepines	40,941	115	4,707,473	29.4	303,089	16	31.0
Other Part D Excl Rx Drugs	4,815	238	1,148,304	7.2	19,220	60	2.0

Source: Data for this table are from the MAX 2002 file for Missouri, released by CMS in 05/2006. This table was produced on 04/19/2007.

a. Table D.13 includes the beneficiaries represented by Cell G of Table 1. Beneficiaries include all dual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2002. A user is a beneficiary who had at least one prescription filled for a Part D excluded drug in 2002. 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 D11.

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

SUPPLEMENTAL TABLE 1B
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 AND OLDER^{a, b}
 MISSOURI, 2002

Total Number of Dual Eligible Beneficiaries, Age 65+ 89,196
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65+ \$228,451,333
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65+ \$2,561

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 65+	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	8,896	10.0 %	0	0.0 %
1-500	12,269	13.8	2,817,242	1.2
501-1,000	9,409	10.5	6,982,247	3.1
1,001-1,500	8,123	9.1	10,117,685	4.4
1,501-2,000	7,509	8.4	13,119,144	5.7
2,001-2,500	6,789	7.6	15,236,195	6.7
2,501-3,000	5,977	6.7	16,383,301	7.2
3,001-3,500	5,337	6.0	17,319,172	7.6
3,501-4,000	4,570	5.1	17,109,894	7.5
4,001-4,500	3,861	4.3	16,391,836	7.2
4,501-5,000	3,203	3.6	15,192,849	6.7
5,001-5,500	2,555	2.9	13,380,616	5.9
5,501-6,000	2,111	2.4	12,130,902	5.3
6,001-6,500	1,715	1.9	10,706,885	4.7
6,501-7,000	1,435	1.6	9,682,409	4.2
7,001-7,500	1,091	1.2	7,894,479	3.5
7,501-8,000	852	1.0	6,592,809	2.9
8,001-8,500	666	0.7	5,486,198	2.4
8,501-9,000	516	0.6	4,505,143	2.0
9,001-9,500	463	0.5	4,278,571	1.9
9,501-10,000	349	0.4	3,404,577	1.5
10,001+	1,500	1.7	19,719,179	8.6

Source: Data for this table are from the MAX 2002 file for Missouri, released by CMS in 05/2006. This table was produced on 04/19/2007.

a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2002.

b. Medicaid reimbursement amounts in this table do not reflect federally required rebates from drug manufacturers to states.

APPENDIX TABLE A.3

CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY^{a, b}
DUAL ELIGIBLE BENEFICIARIES, MISSOURI, 2002

Beneficiary Characteristics	No. of Beneficiaries					No. of Beneficiaries					
	All	Aged	Disabled	Adults	Children	All	Aged	Disabled	Adults	Children	Unknown
All	155,967	87,532	65,837	2,536	62	1,601,218	886,739	690,202	23,697	580	0
Age											
5 and younger	8	0	5	0	3	83	0	58	0	25	0
6-14	17	0	7	0	10	184	0	79	0	105	0
15-20	291	0	246	6	39	3,125	0	2,696	59	370	0
21-44	27,831	0	26,008	1,815	8	297,585	0	280,246	17,277	62	0
45-64	38,617	0	37,990	627	0	398,376	0	392,774	5,602	0	0
65-74	32,854	31,833	947	74	0	336,172	327,565	7,956	651	0	0
75-84	32,057	31,645	397	14	1	326,404	322,297	3,993	108	6	0
85 and older	24,292	24,054	237	0	1	239,289	236,877	2,400	0	12	0
Unknown	0	0	0	0	0	0	0	0	0	0	0
Gender											
Female	98,820	63,986	33,429	1,374	31	1,028,846	659,527	355,923	13,113	283	0
Male	57,147	23,546	32,408	1,162	31	572,372	227,212	334,279	10,584	297	0
Unknown	0	0	0	0	0	0	0	0	0	0	0
Race											
White	124,787	70,933	51,889	1,923	42	1,276,606	715,175	543,260	17,759	412	0
African American	27,179	13,928	12,688	544	19	284,910	145,114	134,348	5,292	156	0
Other/unknown	4,001	2,671	1,260	69	1	39,702	26,450	12,594	646	12	0
Use of Nursing Facilities^c											
Entire year	21,007	19,000	2,006	0	1	222,879	200,184	22,683	0	12	0
Part year	13,984	12,407	1,574	3	0	126,779	110,767	15,980	32	0	0
None	120,976	56,125	62,257	2,533	61	1,251,560	575,788	651,539	23,665	568	0
Maintenance Assistance Status											
Cash	49,148	20,787	25,951	2,381	29	562,464	240,133	299,632	22,434	265	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0
Poverty related	5,777	2,747	2,952	70	8	48,524	19,219	28,653	574	78	0
Other/unknown	101,042	63,998	36,934	85	25	990,230	627,387	361,917	689	237	0
Dual Status^d											
Full dual, all year	141,236	81,011	57,742	2,422	61	1,452,097	825,411	603,681	22,437	568	0
Full dual, part year	14,731	6,521	8,095	114	1	149,121	61,328	86,521	1,260	12	0
Managed Care Status											
FFS all year	154,752	87,528	65,581	1,604	39	1,589,013	886,693	687,408	14,530	382	0
FFS part year, with Rx claims	560	4	212	342	2	5,922	46	2,343	3,512	21	0
FFS part year, no Rx claims	183	0	43	136	4	1,610	0	439	1,128	43	0
MC all year, with Rx claims	26	0	1	24	1	240	0	12	216	12	0
MC all year, no Rx claims	446	0	0	430	16	4,433	0	0	4,311	122	0

Source: Data for this table are from the MAX 2002 file for Missouri, released by CMS in 05/2006. This table was produced on 04/19/2007.

- a. Table A.3 includes the beneficiaries represented by Cell F 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.
- d. The "Full dual, all year" group contains beneficiaries who had Medicare as well as Medicaid pharmacy benefits during all months of Medicaid enrollment in 2002. The "Full dual, part year" group contains beneficiaries who had such benefits for some, but not all, months of their enrollment. Refer to footnote g of Table 1 for more information about how we determined dual eligibility status.

Bene Mo(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.4
 MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS^a
 DUAL ELIGIBLE BENEFICIARIES, MISSOURI, 2002

Beneficiary Characteristics	Benes and				Included in Cell G of Table 1		Excluded from Cell G of Table 1	
	Bene Mos in Cell F of Table 1	No. of Benes	No. of Benes Mos	No. of Benes	No. of Benes Mos	No. of Benes	No. of Benes Mos	
All	155,967	1,601,218	1,593,094	155,495	1,593,094	0	8,124	
FFS all year	154,752	1,589,013	1,589,013	154,752	1,589,013	0	0	
FFS part year, with Rx claims	560	5,922	3,354	560	3,354	0	2,568	
FFS part year, with no Rx claims	183	1,610	727	183	727	0	883	
MC all year, with Rx claims	26	240	0	0	0	0	240	
MC all year, with no Rx claims	446	4,433	0	0	0	0	4,433	

Source: Data for this table are from the MAX 2002 file for Missouri, released by CMS in 05/2006. This table was produced on 04/19/2007.

a. Benefit months are months during which beneficiaries had pharmacy benefit coverage.

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.