

# STATISTICAL COMPENDIUM: MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2003 LOUISIANA

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 CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY<sup>a,b</sup>  
 DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 2003

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown
<b>All</b>	<b>111,105</b>	<b>69,588</b>	<b>41,134</b>	<b>371</b>	<b>12</b>	<b>0</b>	<b>1,218,209</b>	<b>749,653</b>	<b>465,412</b>	<b>3,013</b>	<b>131</b>	<b>0</b>
<b>Age</b>												
5 and younger	10	0	10	0	0	0	103	0	103	0	0	0
6-14	25	0	21	0	4	0	285	0	237	0	48	0
15-20	285	2	271	5	7	0	3,243	24	3,109	39	71	0
21-44	19,221	587	18,364	269	1	0	217,662	6,462	209,023	2,165	12	0
45-64	22,512	213	22,202	97	0	0	253,807	2,454	250,544	809	0	0
65-74	26,501	26,235	266	0	0	0	295,608	293,212	2,396	0	0	0
75-84	24,545	24,545	0	0	0	0	265,124	265,124	0	0	0	0
85 and older	18,006	18,006	0	0	0	0	182,377	182,377	0	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
<b>Gender</b>												
Female	73,788	52,469	21,073	241	5	0	813,392	570,617	240,754	1,961	60	0
Male	37,315	17,119	20,059	130	7	0	404,793	179,036	224,634	1,052	71	0
Unknown	2	0	2	0	0	0	24	0	24	0	0	0
<b>Race</b>												
White	46,428	29,607	16,654	162	5	0	495,020	306,168	187,521	1,282	49	0
African American	50,454	29,485	20,775	189	5	0	565,277	327,669	235,950	1,600	58	0
Other/unknown	14,223	10,496	3,705	20	2	0	157,912	115,816	41,941	131	24	0
<b>Use of Nursing Facilities<sup>c</sup></b>												
Entire year	18,267	16,547	1,720	0	0	0	185,158	166,348	18,810	0	0	0
Part year	9,010	8,059	951	0	0	0	89,711	79,739	9,972	0	0	0
None	83,828	44,982	38,463	371	12	0	943,340	503,566	436,630	3,013	131	0
<b>Maintenance Assistance Status</b>												
Cash	70,554	40,440	29,871	243	0	0	802,952	462,186	338,747	2,019	0	0
Medically needy	191	102	63	26	0	0	1,751	892	610	249	0	0
Poverty-related	2,916	1,165	1,661	82	8	0	30,824	12,368	17,826	547	83	0
Other/unknown	37,444	27,881	9,539	20	4	0	382,682	274,207	108,229	198	48	0
<b>Dual Medicare Status<sup>d</sup></b>												
Full dual, all year	107,107	67,367	39,381	347	12	0	1,173,894	725,059	445,944	2,760	131	0
Full dual, part year	3,998	2,221	1,753	24	0	0	44,315	24,594	19,468	253	0	0
<b>Managed Care (MC) Status</b>												
Fee-for-service (FFS) all year	111,105	69,588	41,134	371	12	0	1,218,209	749,653	465,412	3,013	131	0
FFS part year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
FFS part year, no Rx claims	0	0	0	0	0	0	0	0	0	0	0	0

Source: Data for this table are from the MAX 2003 file for Louisiana, released by CMS in 05/2007. This table was produced on 11/01/2007.

- 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 2003. 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 = Centers for Medicare & Medicaid Services; FFS = fee-for-service pharmacy benefit; MAX = Medicaid Analytic Extract; Rx = pharmacy benefit.

TABLE D.3  
ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC<sup>a, b</sup>  
DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 2003

Beneficiary Characteristics	Percentage with at Least One Rx	Mean Number of Rx	Mean Rx \$	\$ per Rx	Mean \$, All Medicaid FFS \$ <sup>c</sup>	Rx \$ as a Percentage of All Medicaid FFS \$ <sup>d</sup>	Number of Beneficiaries
All	89.5 %	49.3	\$2,915	\$59	\$12,124	24.0 %	111,105
<b>Age</b>							
5 and younger	90.0	40.1	6,168	154	17,088	36.1	10
6-14	92.0	38.1	4,948	130	15,301	32.3	25
15-20	82.1	23.9	2,206	92	13,017	16.9	285
21-44	80.8	28.9	2,315	80	11,358	20.4	19,221
45-64	88.3	49.6	3,243	65	14,127	23.0	22,512
65-74	90.0	52.3	2,899	56	8,896	32.6	26,501
75-84	93.2	57.6	3,128	54	11,999	26.1	24,545
85 and older	94.7	55.4	2,883	52	15,334	18.8	18,006
Unknown	0.0	0.0	0	0	0	0.0	0
<b>Basis of Eligibility<sup>e</sup></b>							
Aged	92.2	54.6	2,963	54	11,586	25.6	69,588
Disabled	85.1	40.5	2,844	70	13,085	21.7	41,134
Adults	80.3	23.8	1,560	65	6,016	25.9	371
Children	91.7	49.1	6,944	142	23,446	29.6	12
Unknown	0.0	0.0	0	0	0	0.0	0
<b>Gender</b>							
Female	92.7	54.0	3,044	56	11,619	26.2	73,788
Male	83.2	40.0	2,660	67	13,121	20.3	37,315
Unknown	100.0	9.0	509	57	14,457	3.5	2
<b>Race</b>							
White	90.6	57.8	3,494	60	16,677	21.0	46,428
African American	88.2	41.9	2,439	58	9,131	26.7	50,454
Other/unknown	90.6	47.6	2,710	57	7,875	34.4	14,223
<b>Use of Nursing Facilities<sup>f</sup></b>							
Entire year	98.1	78.6	4,598	59	26,926	17.1	18,267
Part year	98.2	61.9	3,638	59	19,921	18.3	9,010
None	86.7	41.5	2,470	60	8,060	30.6	83,828
<b>Maintenance Assistance Status</b>							
Cash	88.9	44.3	2,573	58	5,881	43.8	70,554
Medically needy	70.2	35.2	2,517	72	9,119	27.6	191
Poverty related	75.8	16.7	975	58	3,162	30.8	2,916
Other/unknown	91.8	61.3	3,712	61	24,600	15.1	37,444

Source: Data for this table are from the MAX 2003 file for Louisiana, released by CMS in 05/2007. This table was produced on 11/01/2007.

- 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. In seven states (DE, IA, NE, NY, TX, UT, and WV) the expenditures in this column include only Rx drug expenditures for those enrolled in capitated managed care plans, and not expenditures for other services covered by the plans or long-term-care services not covered by the plans. As a result, the amounts shown in this column for all Medicaid fee-for-service expenditures are lower than they would otherwise be.
- d. In seven states (DE, IA, NE, NY, TX, UT, and WV) the Rx share of expenditures for all Medicaid services shown in this column is higher than it would be if all expenditures for these other services, including services provided in capitated managed care plans and long-term-care services, were included.
- e. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.
- f. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.

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

TABLE D.4  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC<sup>a, b</sup>  
 DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 2003

Beneficiary Characteristics	Number of Rx, Percentage with:										Beneficiaries	Number
	Mean Number of Rx	Mean Rx \$	Percentage of All Medicaid FFS <sup>c</sup>	None	More than 0, but 1 or Less	More than 1, but 2 or Less	More than 2, but 5 or Less	More than 5, but 10 or Less	More than 10	Mean \$, All Medicaid FFS <sup>d</sup>		
<b>All</b>	<b>4.5</b>	<b>\$266</b>	<b>24.0 %</b>	<b>10.5 %</b>	<b>15.9 %</b>	<b>10.2 %</b>	<b>28.7 %</b>	<b>27.4 %</b>	<b>7.3 %</b>	<b>\$1,106</b>	<b>111,105</b>	<b>1,218,209</b>
<b>Age</b>												
5 and younger	3.9	599	36.1	10.0	10.0	20.0	50.0	10.0	0.0	1,659	10	103
6-14	3.3	434	32.3	8.0	8.0	24.0	44.0	16.0	0.0	1,342	25	285
15-20	2.1	194	16.9	17.9	40.7	11.9	19.6	7.7	2.1	1,144	285	3,243
21-44	2.6	204	20.4	19.2	31.0	12.3	22.9	12.4	2.3	1,003	19,221	217,662
45-64	4.4	288	23.0	11.7	15.7	10.6	28.6	26.6	6.8	1,253	22,512	253,807
65-74	4.7	260	32.6	10.0	14.0	10.5	29.2	28.6	7.7	798	26,501	295,608
75-84	5.3	290	26.1	6.8	10.8	9.0	30.4	32.8	10.2	1,111	24,545	265,124
85 and older	5.5	285	18.8	5.3	9.4	8.7	32.2	35.4	9.0	1,514	18,006	182,377
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<b>Basis of Eligibility<sup>e</sup></b>												
Aged	5.1	275	25.6	7.8	11.9	9.5	30.3	31.6	8.8	1,076	69,588	749,653
Disabled	3.6	251	21.7	14.9	22.6	11.4	26.1	20.3	4.8	1,157	41,134	465,412
Adults	2.9	192	25.9	19.7	27.2	12.9	21.6	15.9	2.7	741	371	3,013
Children	4.5	636	29.6	8.3	0.0	16.7	50.0	16.7	8.3	2,148	12	131
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<b>Gender</b>												
Female	4.9	276	26.2	7.3	13.6	10.1	30.4	30.4	8.2	1,054	73,788	813,392
Male	3.7	245	20.3	16.8	20.5	10.4	25.4	21.3	5.6	1,210	37,315	404,793
Unknown	0.8	42	3.5	0.0	100.0	0.0	0.0	0.0	0.0	1,205	2	24
<b>Race</b>												
White	5.4	328	21.0	9.4	11.6	8.0	26.5	32.8	11.7	1,564	46,428	495,020
African American	3.7	218	26.7	11.8	19.8	11.9	30.0	22.6	3.9	815	50,454	565,277
Other/unknown	4.3	244	34.4	9.4	16.1	11.2	31.3	26.6	5.3	709	14,223	157,912
<b>use of nursing Facilities<sup>f</sup></b>												
Entire year	7.8	454	17.1	1.9	3.3	4.4	24.1	43.9	22.4	2,656	18,267	185,158
Part year	6.2	365	18.3	1.8	7.0	7.6	32.4	39.5	11.7	2,001	9,010	89,711
None	3.7	220	30.6	13.3	19.6	11.7	29.3	22.5	3.6	716	83,828	943,340
<b>Maintenance Assistance Status</b>												
Cash	3.9	226	43.8	11.1	18.7	11.8	30.3	24.1	4.1	517	70,554	802,952
Medically needy	3.8	275	27.6	29.8	18.3	6.3	18.8	16.8	9.9	995	191	1,751
Poverty related	1.6	92	30.8	24.2	40.0	12.8	17.0	5.6	0.4	299	2,916	30,824
Other/unknown	6.0	363	15.1	8.2	8.7	7.1	26.8	35.3	14.0	2,407	37,444	382,682

Table D4

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2003 file for Louisiana, released by CMS in 05/2007. This table was produced on 11/01/2007.

- 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. In seven states (DE, IA, NE, NY, TX, UT, and WV) the expenditures in this column include only Rx drug expenditures for those enrolled in capitated managed care plans, and not expenditures for other services covered by the plans or long-term-care services not covered by the plans. As a result, the amounts shown in this column for all Medicaid fee-for-service expenditures are lower than they would otherwise be.
  - d. In seven states (DE, IA, NE, NY, TX, UT, and WV) the Rx share of expenditures for all Medicaid services shown in this column is higher than it would be if all expenditures for these other services, including services provided in capitated managed care plans and long-term-care services, were included.
  - e. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.
  - f. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.
- Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; FFS = fee-for-service; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.



TABLE D.5  
 AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 2003

Beneficiary Characteristics	All Rx			Patented Brand-Name Drugs			Off-Patent Brand-Name Drugs			Generic Drugs		
	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx
<b>All</b>	<b>4.5</b>	<b>\$266</b>	<b>\$59</b>	<b>2.0</b>	<b>\$200</b>	<b>\$98</b>	<b>0.2</b>	<b>\$10</b>	<b>\$46</b>	<b>2.2</b>	<b>\$55</b>	<b>\$25</b>
<b>Age</b>												
5 and younger	3.9	599	154	1.8	529	296	0.1	9	74	2.0	61	31
6-14	3.3	434	130	1.5	376	245	0.2	20	102	1.6	38	24
15-20	2.1	194	92	1.0	149	155	0.1	7	84	1.1	38	36
21-44	2.6	204	80	1.1	160	142	0.1	9	69	1.3	35	27
45-64	4.4	288	65	2.0	220	110	0.2	9	48	2.2	58	26
65-74	4.7	260	56	2.2	195	89	0.2	9	44	2.3	56	24
75-84	5.3	290	54	2.4	215	88	0.3	11	43	2.6	63	24
85 and older	5.5	285	52	2.4	206	88	0.3	12	40	2.8	66	23
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Basis of Eligibility<sup>d</sup></b>												
Aged	5.1	275	54	2.3	204	89	0.2	10	42	2.5	60	24
Disabled	3.6	251	70	1.6	194	120	0.2	9	56	1.8	48	27
Adults	2.9	192	65	1.2	141	116	0.1	6	55	1.6	44	28
Children	4.5	636	142	2.4	572	237	0.1	2	37	2.0	62	31
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Gender</b>												
Female	4.9	276	56	2.2	207	93	0.2	10	41	2.4	59	24
Male	3.7	245	67	1.7	186	113	0.2	10	60	1.9	49	26
Unknown	0.8	42	57	0.4	34	90	0.0	0	0	0.4	9	23
<b>Race</b>												
White	5.4	328	60	2.5	247	100	0.3	13	46	2.7	67	25
African American	3.7	218	58	1.7	163	97	0.2	8	48	1.9	47	25
Other/unknown	4.3	244	57	2.0	185	93	0.2	8	42	2.1	50	24
<b>Use of Nursing Facilities<sup>e</sup></b>												
Entire year	7.8	454	59	3.4	336	98	0.4	19	47	3.9	98	25
Part year	6.2	365	59	2.7	268	98	0.3	15	46	3.2	82	26
None	3.7	220	60	1.7	167	99	0.2	8	46	1.8	44	24
<b>Maintenance Assistance Status</b>												
Cash	3.9	226	58	1.8	171	96	0.2	8	46	1.9	47	24
Medically needy	3.8	275	72	1.6	195	121	0.2	7	38	2.0	73	36
Poverty related	1.6	92	58	0.7	69	101	0.1	3	49	0.8	20	24
Other/unknown	6.0	363	61	2.7	272	102	0.3	15	47	3.0	76	25

Source: Data for this table are from the MAX 2003 file for Louisiana, released by CMS in 05/2007. This table was produced on 11/01/2007.

- 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 Louisiana, 0.6 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all combined. For information about this classification method, see Wolters Kluwer Health, <http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).
- d. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.
- e. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.

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

TABLE D.6

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 2003

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				Users <sup>e</sup>									
	Total	Patented	Off-Patent	Brand-Name	Generic	Total	Patented	Off-Patent	Brand-Name	Generic	Total Number of Rx	Total Rx \$	Number	Percentage of Dual Benes	Number of Benefit Months			
																\$19	\$0	\$4
Anti-infective Agents	0.3	0.1	0.0	0.2	0.2	\$24	\$19	\$0	\$4	\$76	\$129	\$69	\$26	222,747	\$16,876,047	62,666	56.4 %	709,104
Biologics	0.4	0.0	0.2	0.1	0.1	####	8	1,880	594	6294	157	7,768	5,754	233	1,466,395	51	0.0	591
Antineoplastic Agents	0.5	0.1	0.0	0.3	0.3	73	38	2	33	161	337	172	101	29,736	4,792,959	6,276	5.6	65,361
Endocrine/Metabolic Drugs	0.9	0.5	0.1	0.3	0.3	45	34	2	8	49	73	21	26	499,264	24,693,065	49,283	44.4	554,546
Cardiovascular Agents	1.7	0.7	0.1	1.0	1.0	68	44	2	22	39	65	31	22	1,457,234	57,338,810	75,083	67.6	837,173
Respiratory Agents	0.6	0.3	0.1	0.2	0.2	33	24	3	6	52	70	62	24	362,580	19,015,364	51,208	46.1	579,621
Gastrointestinal Agents	0.7	0.4	0.0	0.3	0.3	62	53	1	9	84	126	88	27	415,223	34,984,469	50,287	45.3	559,988
Genitourinary Agents	0.5	0.4	0.0	0.1	0.1	33	30	0	3	65	79	41	22	100,319	6,499,984	17,647	15.9	197,800
CNS Drugs	1.2	0.6	0.0	0.6	0.6	96	80	2	14	82	137	111	25	749,102	61,667,249	57,743	52.0	640,341
Stimulants/Anti-obesity/Anorexia	0.4	0.2	0.0	0.1	0.1	34	29	1	3	92	127	63	28	7,641	702,718	1,834	1.7	20,910
Miscellaneous Psychological/Neurological Agents	0.7	0.6	0.0	0.1	0.1	86	84	0	2	130	139	45	36	67,385	8,727,605	9,548	8.6	101,768
Analgesics and Anesthetics	0.8	0.3	0.0	0.5	0.5	42	32	1	9	56	110	62	21	544,385	30,236,804	63,605	57.2	718,205
Neuromuscular Agents	0.8	0.3	0.1	0.4	0.4	53	36	3	13	65	113	49	31	301,227	19,630,155	33,010	29.7	372,646
Nutritional Products	0.7	0.1	0.0	0.6	0.6	15	1	1	14	23	20	21	24	237,367	5,547,285	32,615	29.4	359,473
Hematological Agents	0.7	0.3	0.1	0.3	0.3	61	52	2	6	83	153	26	21	227,107	18,750,709	28,122	25.3	309,805
Topical Products	0.4	0.3	0.0	0.2	0.2	21	15	1	4	46	60	52	25	234,838	10,831,372	46,211	41.6	522,671
Miscellaneous Products	0.3	0.1	0.0	0.2	0.2	54	38	5	11	169	355	246	59	6,944	1,175,093	1,986	1.8	21,784
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	0.0	17	0	0	0	70	0	0	0	12,767	896,779	4,487	4.0	51,880
<b>TOTAL NO. OF RX AND RX \$</b>	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.	5,476,099	323,832,862	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2003 file for Louisiana, released by CMS in 05/2007. This table was produced on 11/01/2007.

a. Table D.6 includes the beneficiaries represented by Cell G of Table 1. 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.medisp.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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 Louisiana, 0.6 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, <http://www.medisp.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

e. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 2003.

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

TABLE D.7

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 2003

Top 10 Drug Groups	Users			Among Users		
	Total Medicaid Rx \$	Number of Users	Percentage of Dual Beneficiaries	Number of Benefit Months	Number of Rx per Benefit Month	Rx \$ per Benefit Month
ANTIPSYCHOTICS	\$37,044,733	29,419	26.5 %	326,824	0.6	\$175
ULCER DRUGS	28,489,402	47,790	43.0	536,070	0.5	103
ANTI-DIABETIC	18,062,850	42,387	38.2	478,570	0.6	60
ANTI-DEPRESSANTS	17,963,513	47,056	42.4	525,197	0.6	59
ANTI-HYPERTENSIVE	17,122,551	61,736	55.6	698,830	0.6	41
ANALGESICS - ANTI-INFLAMMATORY	16,885,234	44,949	40.5	519,179	0.4	85
ANTI-HYPERLIPIDEMIC	15,800,043	26,954	24.3	310,686	0.6	88
ANTI-CONVULSANT	14,643,306	24,886	22.4	280,410	0.7	77
ANALGESICS - Narcotic	11,137,294	70,998	63.9	806,148	0.4	38
MISC. HEMATOLOGICAL	9,996,925	15,183	13.7	169,079	0.6	102
<b>Total</b>	<b>187,145,851</b>	<b>411,358</b>		<b>4,650,993</b>	<b>n.a.</b>	<b>n.a.</b>

Source: Data for this table are from the MAX 2003 file for Louisiana, released by CMS in 05/2007. This table was produced on 11/01/2007.

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 2003. 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 2003. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement; n.a. = not applicable.

TABLE D.7A  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS COMBINED  
 AND FIRST AND SECOND GROUPS SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 2003

Beneficiary Characteristics	All Top 10 Drug Groups					ANTIPSYCHOTICS					ULCER DRUGS						
	Number of Rx	Rx \$	Number of Users	Users as % of Dual Benefes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benefes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benefes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
<b>All</b>	<b>2,468,078</b>	<b>\$187,145,851</b>	<b>29,419</b>	<b>26.5 %</b>	<b>326,824</b>	<b>0.6</b>	<b>\$113</b>	<b>47,790</b>	<b>43.0 %</b>	<b>536,070</b>	<b>0.5</b>	<b>\$53</b>					
<b>Female</b>	1,771,321	128,803,530	17,809	24.1	196,950	0.6	101	35,175	47.7	396,773	0.5	53					
<b>Disabled</b>	475,992	38,868,840	6,247	29.6	72,899	0.6	117	9,331	44.3	108,606	0.4	46					
5 and younger	6	327	0	0.0	0	0.0	0	1	50.0	12	0.3	25					
6-14	46	2,261	0	0.0	0	0.0	0	3	33.3	36	0.4	6					
15-20	1,319	121,982	32	24.8	384	0.5	121	32	24.8	383	0.4	31					
21-44	129,862	11,701,331	2,731	33.4	32,024	0.6	119	2,621	32.0	30,779	0.4	38					
45-64	340,238	26,714,582	3,457	27.5	40,249	0.6	115	6,562	52.2	76,273	0.4	49					
65-74	4,521	328,357	27	15.6	242	0.6	91	112	64.7	1,123	0.5	53					
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
<b>Other Eligibles</b>	1,295,329	89,934,690	11,562	21.9	124,051	0.6	91	25,844	49.0	288,167	0.6	56					
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
6-14	18	839	0	0.0	0	0.0	0	2	100.0	24	0.1	12					
15-20	34	2,402	2	28.6	24	0.3	44	4	57.1	45	0.2	11					
21-44	3,505	268,500	89	19.9	958	0.4	75	82	18.3	821	0.3	33					
45-64	3,282	236,810	25	14.7	280	0.6	133	71	41.8	806	0.4	44					
65-74	478,386	33,425,156	2,957	16.3	33,143	0.7	103	8,925	49.2	102,982	0.5	52					
75-84	491,675	34,239,784	4,386	23.2	47,526	0.7	94	9,484	50.1	105,957	0.6	57					
85 and older	318,429	21,761,199	4,103	27.3	42,120	0.6	78	7,276	48.4	77,532	0.6	61					
<b>Male</b>	696,752	58,342,186	11,610	31.1	129,874	0.7	133	12,615	33.8	139,297	0.5	53					
<b>Disabled</b>	345,574	33,046,377	7,304	36.4	84,809	0.7	149	5,467	27.3	62,508	0.5	48					
5 and younger	39	1,880	0	0.0	0	0.0	0	3	37.5	33	0.7	54					
6-14	61	1,736	0	0.0	0	0.0	0	3	25.0	36	0.2	11					
15-20	1,361	148,240	45	31.7	512	0.6	140	28	19.7	324	0.3	31					
21-44	135,004	14,635,005	3,673	36.1	42,972	0.6	149	2,095	20.6	24,321	0.4	43					
45-64	207,551	18,154,722	3,575	37.1	41,239	0.7	150	3,306	34.3	37,495	0.5	50					
65-74	1,558	104,794	11	11.8	86	0.9	127	32	34.4	299	0.6	51					
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
<b>Other Eligibles</b>	351,178	25,295,809	4,306	25.0	45,065	0.7	102	7,148	41.4	76,789	0.6	57					
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
6-14	24	732	0	0.0	0	0.0	0	1	50.0	12	0.2	9					
15-20	73	6,400	0	0.0	0	0.0	0	2	28.6	24	1.0	127					
21-44	3,772	406,829	87	21.3	998	0.6	160	56	13.7	631	0.3	35					
45-64	2,114	188,190	24	17.1	267	0.7	172	37	26.4	360	0.4	37					
65-74	173,538	12,531,738	1,693	20.9	18,727	0.7	117	3,157	39.0	35,254	0.5	55					
75-84	117,313	8,344,598	1,566	27.9	15,962	0.7	93	2,516	44.8	26,504	0.6	58					
85 and older	54,344	3,817,322	936	31.4	9,111	0.6	77	1,379	46.2	14,004	0.6	63					
<b>Unknown</b>	5	135	0	0.0	0	0.0	0	0	0.0	0	0.0	0					

Source: Data for this table are from the MAX 2003 file for Louisiana, released by CMS in 05/2007. This table was produced on 11/01/2007.

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 2003. 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 2003. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispain.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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

TABLE D.7B  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR THIRD TO FIFTH TOP DRUG GROUPS  
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 2003

Beneficiary Characteristics	ANTI-DIABETIC				ANTI-DEPRESSANTS				ANTI-HYPERTENSIVE				
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean per Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean per Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean per Rx \$ per Benefit Month	
<b>All</b>	<b>42,387</b>	<b>38.2 %</b>	<b>478,570</b>	<b>0.6</b>	<b>47,056</b>	<b>42.4 %</b>	<b>525,197</b>	<b>0.6</b>	<b>61,736</b>	<b>55.6 %</b>	<b>698,830</b>	<b>0.6</b>	<b>\$25</b>
<b>Female</b>	32,053	43.4	363,944	0.6	34,501	46.8	386,889	0.6	45,202	61.3	513,931	0.6	25
<b>Disabled</b>	7,866	37.3	91,418	0.6	11,980	56.8	139,071	0.5	10,171	48.3	118,291	0.5	22
5 and younger	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0
6-14	1	11.1	12	0.8	0	0.0	0	0.0	4	44.4	48	0.4	31
15-20	12	9.3	144	0.5	34	26.4	406	0.5	21	16.3	252	0.5	26
21-44	1,302	15.9	15,290	0.5	4,134	50.5	48,334	0.5	1,949	23.8	22,741	0.5	18
45-64	6,426	51.1	74,637	0.6	7,729	61.5	89,510	0.5	8,054	64.0	93,708	0.5	23
65-74	125	72.3	1,335	0.6	83	48.0	821	0.5	143	82.7	1,542	0.6	28
75-84	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0
<b>Other Eligibles</b>	24,187	45.9	272,526	0.6	22,521	42.7	247,818	0.6	35,031	66.5	395,640	0.6	26
5 and younger	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	2	100.0	24	0.3	3	150.0	36	0.2	9
15-20	0	0.0	0	0.0	3	42.9	36	0.3	1	14.3	12	0.2	3
21-44	49	10.9	542	0.5	164	36.6	1,772	0.4	70	15.6	732	0.4	15
45-64	55	32.4	617	0.6	85	50.0	959	0.4	107	62.9	1,197	0.5	20
65-74	10,663	58.8	123,165	0.6	7,573	41.8	86,517	0.6	13,748	75.8	159,044	0.6	25
75-84	9,084	48.0	101,742	0.7	8,260	43.6	90,840	0.6	13,024	68.8	147,457	0.6	26
85 and older	4,336	28.9	46,460	0.6	6,434	42.8	67,670	0.7	8,078	53.8	87,162	0.7	26
<b>Male</b>	10,334	27.7	114,626	0.6	12,555	33.6	138,308	0.6	16,534	44.3	184,899	0.6	23
<b>Disabled</b>	4,206	21.0	47,996	0.6	6,821	34.0	78,167	0.5	6,896	34.4	78,754	0.5	22
5 and younger	0	0.0	0	0.0	0	0.0	0	0.0	1	12.5	12	0.9	6
6-14	0	0.0	0	0.0	3	25.0	36	0.8	3	25.0	36	0.2	5
15-20	3	2.1	36	0.4	42	29.6	479	0.6	15	10.6	174	0.6	16
21-44	1,115	11.0	12,943	0.5	3,204	31.5	37,124	0.5	2,184	21.5	25,237	0.5	19
45-64	3,060	31.8	34,735	0.6	3,552	36.9	40,354	0.6	4,641	48.2	52,793	0.6	23
65-74	28	30.1	282	0.7	20	21.5	174	0.5	52	55.9	502	0.6	28
75-84	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0
<b>Other Eligibles</b>	6,128	35.5	66,630	0.7	5,734	33.2	60,141	0.6	9,638	55.9	106,145	0.6	24
5 and younger	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	1	50.0	12	0.7	2	100.0	24	0.4	11
15-20	0	0.0	0	0.0	2	28.6	24	0.3	4	57.1	42	0.7	44
21-44	40	9.8	395	0.5	102	24.9	1,112	0.5	68	16.6	728	0.5	21
45-64	51	36.4	533	0.5	55	39.3	547	0.5	51	36.4	533	0.5	23
65-74	3,258	40.2	36,589	0.7	2,394	29.5	26,343	0.6	4,941	61.0	56,034	0.6	24
75-84	2,007	35.8	21,408	0.6	2,035	36.3	20,825	0.7	3,217	57.3	34,837	0.6	24
85 and older	772	25.9	7,705	0.6	1,145	38.4	11,278	0.7	1,355	45.4	13,947	0.7	24
<b>Unknown</b>	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 2003 file for Louisiana, released by CMS in 05/2007. This table was produced on 11/01/2007.

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 2003. 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 2003. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispain.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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



TABLE D.7C  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR SIXTH TO EIGHTH TOP DRUG GROUPS  
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 2003

Beneficiary Characteristics	ANALGESICS - ANTI-INFLAMMATORY					ANTIHYPERLIPIDEMIC					ANTICONVULSANT				
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Rx \$ per Benefit Month	Mean Number of Rx per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Rx \$ per Benefit Month	Mean Number of Rx per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Rx \$ per Benefit Month	Mean Number of Rx per Benefit Month
<b>All</b>	<b>44,949</b>	<b>40.5%</b>	<b>519,179</b>	<b>\$33</b>	<b>0.4</b>	<b>26,954</b>	<b>24.3%</b>	<b>310,686</b>	<b>\$51</b>	<b>0.6</b>	<b>24,886</b>	<b>22.4%</b>	<b>280,410</b>	<b>0.7</b>	<b>\$52</b>
<b>Female</b>	33,537	45.5	388,267	34	0.4	20,001	27.1	231,348	51	0.6	15,743	21.3	177,500	0.6	48
<b>Disabled</b>	10,184	48.3	119,685	27	0.3	4,974	23.6	58,155	46	0.5	6,773	32.1	78,510	0.7	62
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	11.1	12	1	0.0	0	0.0	0	0	0.0	0	0.0	0	0.0	0
15-20	38	29.5	444	3	0.2	1	0.8	12	74	0.9	34	26.4	404	0.8	82
21-44	3,255	39.8	38,438	16	0.2	740	9.0	8,698	39	0.4	2,653	32.4	31,009	0.7	71
45-64	6,794	54.0	79,740	32	0.3	4,165	33.1	48,703	47	0.5	4,055	32.2	46,815	0.6	56
65-74	96	55.5	1,051	42	0.4	68	39.3	742	47	0.5	31	17.9	282	0.6	42
75-84	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0.0	0
<b>Other Eligibles</b>	23,353	44.3	268,582	38	0.4	15,027	28.5	173,193	53	0.6	8,970	17.0	98,990	0.6	37
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	1	14.3	9	1	0.1	0	0.0	0	0	0.0	0	0.0	0	0.0	0
21-44	169	37.7	1,860	15	0.2	18	4.0	189	35	0.4	63	14.1	671	0.5	51
45-64	114	67.1	1,345	28	0.3	52	30.6	606	37	0.4	29	17.1	309	0.5	32
65-74	9,364	51.6	109,466	35	0.4	7,140	39.4	83,232	51	0.6	3,435	18.9	39,050	0.6	40
75-84	8,467	44.7	97,978	42	0.4	5,755	30.4	66,325	55	0.6	3,431	18.1	37,816	0.6	36
85 and older	5,238	34.9	57,924	39	0.5	2,062	13.7	22,841	54	0.6	2,012	13.4	21,144	0.7	32
<b>Male</b>	11,411	30.6	130,900	27	0.4	6,953	18.6	79,338	51	0.6	9,143	24.5	102,910	0.7	60
<b>Disabled</b>	5,649	28.2	65,716	20	0.3	3,261	16.3	37,783	48	0.6	6,067	30.2	69,751	0.7	67
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	8.3	12	3	0.3	0	0.0	0	0	0.0	0	0.0	0	0.0	0
15-20	34	23.9	391	16	0.2	2	1.4	24	18	0.3	36	25.4	422	0.8	87
21-44	2,483	24.4	29,008	13	0.2	981	9.6	11,535	42	0.5	2,859	28.1	33,235	0.7	75
45-64	3,099	32.2	35,960	26	0.3	2,250	23.4	25,935	51	0.6	3,155	32.8	35,939	0.7	61
65-74	32	34.4	345	36	0.5	28	30.1	289	61	0.7	17	18.3	155	0.6	29
75-84	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0.0	0
<b>Other Eligibles</b>	5,762	33.4	65,184	35	0.4	3,692	21.4	41,555	54	0.6	3,076	17.8	33,159	0.7	45
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	50.0	12	6	0.1	1	50.0	12	0.2	7
15-20	1	14.3	12	1	0.1	0	0.0	0	0	0.0	0	0.0	0	0.0	0
21-44	88	21.5	989	11	0.2	28	6.8	313	36	0.5	84	20.5	915	0.7	82
45-64	49	35.0	481	44	0.3	29	20.7	312	46	0.6	18	12.9	171	0.7	67
65-74	2,886	35.6	33,485	32	0.4	2,143	26.4	24,578	54	0.6	1,538	19.0	17,163	0.7	48
75-84	1,861	33.2	20,781	38	0.4	1,167	20.8	12,906	54	0.6	1,014	18.1	10,679	0.7	41
85 and older	877	29.4	9,436	39	0.5	324	10.9	3,434	54	0.6	421	14.1	4,219	0.7	33
<b>Unknown</b>	1	50.0	12	6	0.2	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 2003 file for Louisiana, released by CMS in 05/2007. This table was produced on 11/01/2007.

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 2003. 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 2003. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispain.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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

**TABLE D.7D**  
**MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR NINTH AND TENTH TOP DRUG GROUPS**  
**SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup>**  
**DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 2003**

Beneficiary Characteristics	ANALGESICS - Narcotic				MISC. HEMATOLOGICAL					
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean of Rx per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean of Rx per Benefit Month	Number of Beneficiaries	Number of Benefit Months
<b>All</b>	<b>70,998</b>	<b>63.9 %</b>	<b>806,148</b>	<b>0.4</b>	<b>15,183</b>	<b>13.7 %</b>	<b>169,079</b>	<b>0.6</b>	<b>111,105</b>	<b>1,218,209</b>
<b>Female</b>	51,288	69.5	585,156	0.4	11,009	14.9	123,376	0.6	73,788	813,392
<b>Disabled</b>	18,124	86.0	211,303	0.4	1,588	7.5	18,410	0.5	21,073	240,754
5 and younger	2	100.0	24	0.1	0	0.0	0	0.0	2	24
6-14	0	0.0	0	0.0	0	0.0	0	0.0	0	0
15-20	85	65.9	981	0.2	1	0.8	12	0.1	129	1,471
21-44	6,455	78.9	75,662	0.3	141	1.7	1,680	0.4	8,185	94,202
45-64	11,425	90.9	133,069	0.4	1,410	11.2	16,325	0.5	12,575	143,367
65-74	157	90.8	1,567	0.3	36	20.8	393	0.4	173	1,592
75-84	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
<b>Other Eligibles</b>	33,164	62.9	373,853	0.4	9,421	17.9	104,966	0.6	52,715	572,638
5 and younger	0	0.0	0	0.0	0	0.0	0	0.0	0	0
6-14	1	50.0	12	0.1	0	0.0	0	0.0	2	24
15-20	5	71.4	45	0.1	0	0.0	0	0.0	7	63
21-44	294	65.6	3,064	0.3	5	1.1	60	0.3	448	4,382
45-64	167	98.2	1,946	0.3	9	5.3	103	0.6	170	1,866
65-74	13,020	71.8	150,515	0.4	2,798	15.4	32,200	0.6	18,132	204,736
75-84	11,888	62.8	134,417	0.4	3,689	19.5	41,292	0.6	18,933	207,551
85 and older	7,789	51.8	83,854	0.4	2,920	19.4	31,311	0.7	15,023	154,016
<b>Male</b>	19,709	52.8	220,980	0.4	4,174	11.2	45,703	0.6	37,315	404,793
<b>Disabled</b>	11,033	55.0	126,291	0.4	999	5.0	11,283	0.5	20,059	224,634
5 and younger	3	37.5	30	0.2	0	0.0	0	0.0	8	79
6-14	2	16.7	24	0.6	0	0.0	0	0.0	12	139
15-20	53	37.3	628	0.2	0	0.0	0	0.0	142	1,638
21-44	5,220	51.3	60,298	0.4	150	1.5	1,742	0.4	10,177	114,797
45-64	5,702	59.2	64,807	0.4	836	8.7	9,431	0.5	9,627	107,177
65-74	53	57.0	504	0.4	13	14.0	110	0.7	93	804
75-84	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
<b>Other Eligibles</b>	8,676	50.3	94,689	0.4	3,175	18.4	34,420	0.6	17,256	180,159
5 and younger	0	0.0	0	0.0	0	0.0	0	0.0	0	0
6-14	1	50.0	12	0.2	0	0.0	0	0.0	2	24
15-20	3	42.9	34	0.4	0	0.0	0	0.0	7	71
21-44	202	49.4	2,187	0.4	2	0.5	24	0.3	409	4,257
45-64	115	82.1	1,123	0.4	8	5.7	83	0.7	140	1,397
65-74	4,327	53.4	48,878	0.4	1,402	17.3	15,804	0.6	8,103	88,476
75-84	2,663	47.5	28,570	0.4	1,122	20.0	12,072	0.6	5,612	57,573
85 and older	1,365	45.8	13,885	0.3	641	21.5	6,437	0.6	2,983	28,361
<b>Unknown</b>	1	50.0	12	0.3	0	0.0	0	0.0	2	24

Table D7D

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2003 file for Louisiana, released by CMS in 05/2007. This table was produced on 11/01/2007.

- 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 2003. 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 2003. For information about these drug groups, see Wolters Kluwer Health, <http://www.medspan.com/marketing/ContentPage.aspx?contentid=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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

TABLE D.8  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,  
 BY BENEFICIARY CHARACTERISTIC<sup>a, b</sup>  
 DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 2003

Beneficiary Characteristics	Rx \$ per Benefit Month	Number of Rx per Benefit Month	Number of All-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents	
				7.8	18,267
<b>All</b>	<b>\$454</b>	<b>7.8</b>	<b>18,267</b>		<b>185,158</b>
<b>Age</b>					
0-64	587	8.4	1,706		18,705
65-74	535	8.6	2,979		31,743
75-84	470	8.1	6,047		61,203
85 and older	371	7.0	7,535		73,507
Unknown	0	0.0	0		0
<b>Gender</b>					
Female	443	7.8	12,877		131,210
Male	479	7.6	5,390		53,948
Unknown	0	0.0	0		0
<b>Race</b>					
White	472	8.1	12,125		121,425
African American	416	6.9	4,814		50,677
Other/unknown	429	7.4	1,328		13,056
<b>Basis of Eligibility<sup>c</sup></b>					
Aged	439	7.7	16,547		166,348
Disabled	587	8.4	1,720		18,810
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 2003 file for Louisiana, released by CMS in 05/2007. This table was produced on 11/01/2007.

a. Table D.8 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their 2003 Medicaid enrollment. A total of 9,010 beneficiaries who were in nursing facilities for part of their enrollment and their 89,711 benefit months were excluded from the analysis. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

c. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.

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

TABLE D.9  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,  
 BY BRAND STATUS AND THERAPEUTIC CATEGORY<sup>a, b, c, d, e</sup>  
 DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 2003

Therapeutic Category	Number of Rx per Benefit Month Among Users			\$ per Benefit Month Among Users			\$ per Rx			Users							
	Total	Patented Brand-Name	Off-Patent Brand-Name	Total	Patented Brand-Name	Off-Patent Brand-Name	Total	Patented Brand-Name	Off-Patent Brand-Name	Total Number of Rx	Total Rx \$	Number of Users	Percentage of Dual All-Year Nursing Facility Residents	Number of Benefit Months			
Anti-infective Agents	0.3	0.2	0.0	0.2	\$20	\$15	\$0	\$5	\$60	\$92	\$59	\$28	43,891	\$2,640,320	12,130	66.4 %	128,961
Biologicals	0.9	0.0	0.9	0.0	###	0	7,737	0	8,927	0	8,927	0	78	696,294	8	0.0	90
Antineoplastic Agents	0.5	0.1	0.0	0.4	77	25	3	49	141	305	184	109	11,741	1,656,299	2,153	11.8	21,377
Endocrine/Metabolic Drugs	1.2	0.6	0.2	0.4	56	42	4	10	48	74	19	25	112,521	5,368,571	9,144	50.1	96,210
Cardiovascular Agents	2.1	0.6	0.1	1.4	72	38	3	30	34	61	31	22	312,867	10,509,164	14,228	77.9	146,719
Respiratory Agents	0.8	0.4	0.1	0.4	42	27	5	10	51	70	66	28	88,864	4,532,165	10,049	55.0	107,329
Gastrointestinal Agents	1.1	0.6	0.0	0.5	80	65	0	14	71	115	59	25	129,871	9,244,238	11,116	60.9	116,231
Genitourinary Agents	0.8	0.6	0.0	0.2	50	45	0	4	65	80	37	23	38,304	2,503,387	4,708	25.8	50,072
CNS Drugs	1.7	1.0	0.0	0.7	147	125	2	20	86	127	85	28	241,445	20,800,036	13,602	74.5	141,519
Stimulants/Anti-obesity/Anorexia	0.6	0.2	0.0	0.4	38	27	1	10	62	138	43	24	1,947	119,903	297	1.6	3,154
Miscellaneous Psychological/Neurological Agents	0.9	0.8	0.0	0.0	115	114	0	1	134	136	0	39	37,132	4,978,639	4,199	23.0	43,314
Analgesics and Anesthetics	0.9	0.4	0.0	0.5	54	44	1	9	58	101	50	19	96,222	5,568,048	9,825	53.8	103,140
Neuromuscular Agents	1.2	0.5	0.1	0.6	73	46	4	23	60	95	41	36	80,421	4,820,564	6,193	33.9	66,269
Nutritional Products	0.9	0.1	0.0	0.8	17	1	1	15	18	15	22	18	88,673	1,605,938	8,995	49.2	94,305
Hematological Agents	1.0	0.4	0.1	0.5	75	63	3	9	72	150	23	19	76,591	5,547,892	7,097	38.9	73,700
Topical Products	0.6	0.3	0.0	0.2	27	19	2	6	45	58	52	26	70,188	3,138,560	10,920	59.8	117,551
Miscellaneous Products	0.3	0.1	0.0	0.2	20	5	1	15	67	69	205	65	1,804	120,769	571	3.1	6,030
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	18	0	0	0	54	0	0	0	2,534	136,328	689	3.8	7,619
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.	1,435,094	83,987,115	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2003 file for Louisiana, released by CMS in 05/2007. This table was produced on 11/01/2007.

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 2003. A total of 9,010 beneficiaries who were in nursing facilities for part of their enrollment and their 89,711 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 2003. 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.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

In Louisiana, 0.6 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.

Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; CNS = Central Nervous System; MAX = Medicaid Analytic Extract; n.a. = not applicable; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.10  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS,  
 BY TOP-10 DRUG GROUP<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 2003

Top 10 Drug Groups in Nursing Facilities	Users				Among Users			
	Total Medicaid Rx \$	Number of Users	As a Percentage of All-Year Nursing Facility Residents	Number of Benefit Months	Number of Rx per Benefit Month	\$ per Rx	Rx \$ per Benefit Month	
ANTIPSYCHOTICS	\$12,959,090	9,791	53.6 %	104,874	0.8	\$155	\$124	
ULCER DRUGS	7,566,246	9,770	53.5	102,846	0.8	97	74	
ANTIDEPRESSANTS	6,218,005	11,779	64.5	124,724	0.8	61	50	
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	4,978,639	4,231	23.2	43,662	0.9	134	114	
ANTIDIABETIC	3,579,162	7,807	42.7	83,177	0.8	54	43	
ANALGESICS - ANTI-INFLAMMATORY	3,389,190	5,765	31.6	62,747	0.6	84	54	
ANTICONVULSANT	3,306,084	5,487	30.0	59,336	0.9	62	56	
ANTIHYPERTENSIVE	3,110,395	9,539	52.2	100,362	0.8	39	31	
MISC. HEMATOLOGICAL	2,723,779	3,501	19.2	36,774	0.8	96	74	
ANTIASTHMATIC	2,175,116	8,318	45.5	88,607	0.4	55	25	
<b>Total</b>	<b>50,005,706</b>	<b>75,988</b>		<b>807,109</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	

Source: Data for this table are from the MAX 2003 file for Louisiana, released by CMS in 05/2007. This table was produced on 11/01/2007.

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 2003. A total of 9,010 beneficiaries who were in nursing facilities for part of their enrollment and their 89,711 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 2003. 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 2003 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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



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, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c, d</sup>  
DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 2003

Beneficiary Characteristics	All Top 10 Drug Groups				ANTIPSYCHOTICS				ULCER DRUGS				
	Number of Rx	Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx
<b>All</b>	<b>608,881</b>	<b>\$50,005,706</b>	<b>9,791</b>	<b>53.6 %</b>	<b>104,874</b>	<b>0.8</b>	<b>\$124</b>	<b>9,770</b>	<b>53.5 %</b>	<b>102,846</b>	<b>0.8</b>	<b>\$74</b>	
<b>Female</b>	425,180	34,325,945	6,501	50.5	69,534	0.8	115	6,989	54.3	73,933	0.8	73	
<b>Disabled</b>	29,980	2,757,910	537	80.6	6,102	0.9	161	395	59.3	4,408	0.8	75	
64 or younger	29,624	2,729,844	533	80.9	6,069	0.9	162	390	59.2	4,363	0.8	75	
65-74	356	28,066	4	57.1	33	0.9	104	5	71.4	45	0.7	93	
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
<b>Other Eligibles</b>	395,200	31,568,035	5,964	48.8	63,432	0.8	111	6,594	54.0	69,525	0.8	73	
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
65-74	72,513	6,058,090	1,182	73.7	13,217	0.9	139	943	58.8	10,260	0.8	75	
75-84	160,546	12,975,582	2,380	54.2	25,633	0.8	114	2,506	57.1	26,566	0.8	74	
85 and older	162,141	12,534,363	2,402	38.6	24,582	0.7	91	3,145	50.6	32,699	0.8	72	
<b>Male</b>	183,701	15,679,761	3,290	61.0	35,340	0.8	140	2,781	51.6	28,913	0.8	74	
<b>Disabled</b>	46,080	4,460,570	972	92.2	11,016	0.9	179	571	54.2	6,225	0.8	70	
64 or younger	45,918	4,443,419	968	92.5	10,984	0.9	179	567	54.2	6,206	0.8	69	
65-74	162	17,151	4	57.1	32	1.1	229	4	57.1	19	0.9	118	
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
<b>Other Eligibles</b>	137,621	11,219,191	2,318	53.5	24,324	0.8	123	2,210	51.0	22,688	0.8	76	
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
65-74	53,895	4,591,711	888	65.2	9,974	0.9	150	711	52.2	7,690	0.8	78	
75-84	51,370	4,092,351	870	52.5	8,939	0.8	112	846	51.1	8,576	0.7	75	
85 and older	32,356	2,535,129	560	42.5	5,411	0.7	91	653	49.6	6,422	0.7	74	
<b>Unknown</b>	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 2003 file for Louisiana, released by CMS in 05/2007. This table was produced on 11/01/2007.

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 2003. A total of 9,010 beneficiaries who were in nursing facilities for part of their enrollment and their 89,711 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 2003. 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 2003 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Walters Kluwer Health, <http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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

TABLE 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, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 2003

Beneficiary Characteristics	ANTIDEPRESSANTS					MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL					ANTIDIABETIC				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
<b>All</b>	11,779	64.5 %	124,724	0.8	\$50	4,231	23.2 %	43,662	0.9	\$114	7,807	42.7 %	83,177	0.8	\$43
<b>Female</b>	8,534	66.3	90,875	0.8	50	3,203	24.9	33,499	0.9	114	5,565	43.2	59,524	0.8	42
<b>Disabled</b>	551	82.7	6,272	0.8	55	64	9.6	712	0.7	118	336	50.5	3,686	0.9	50
64 or younger	544	82.5	6,203	0.8	55	63	9.6	700	0.7	118	327	49.6	3,605	0.9	50
65-74	7	100.0	69	0.8	75	1	14.3	12	1.0	135	9	128.6	81	0.7	52
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Other Eligibles</b>	7,983	65.4	84,603	0.8	50	3,139	25.7	32,787	0.9	114	5,229	42.8	55,838	0.8	42
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	1,283	80.0	14,175	0.8	52	288	18.0	3,113	0.9	114	1,116	69.6	12,455	0.8	47
75-84	3,233	73.6	34,434	0.8	51	1,317	30.0	13,896	0.9	116	2,224	50.7	23,556	0.8	43
85 and older	3,467	55.8	35,994	0.8	48	1,534	24.7	15,778	0.8	112	1,889	30.4	19,827	0.7	38
<b>Male</b>	3,245	60.2	33,849	0.8	49	1,028	19.1	10,163	0.8	113	2,242	41.6	23,653	0.8	45
<b>Disabled</b>	762	72.3	8,413	0.8	53	80	7.6	906	0.7	126	515	48.9	5,768	0.9	47
64 or younger	759	72.5	8,395	0.8	53	78	7.4	882	0.7	128	511	48.8	5,738	0.9	47
65-74	3	42.9	18	0.9	83	2	28.6	24	0.7	89	4	57.1	30	0.9	61
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Other Eligibles</b>	2,483	57.3	25,436	0.8	48	948	21.9	9,257	0.8	112	1,727	39.8	17,885	0.8	44
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	850	62.4	9,219	0.8	50	200	14.7	2,107	0.8	112	647	47.5	7,134	0.9	49
75-84	990	59.7	9,971	0.8	49	405	24.4	3,896	0.8	112	682	41.2	6,827	0.8	42
85 and older	643	48.8	6,246	0.8	44	343	26.0	3,254	0.8	111	398	30.2	3,924	0.7	39
<b>Unknown</b>	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 2003 file for Louisiana, released by CMS in 05/2007. This table was produced on 11/01/2007.

- 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 2003. A total of 9,010 beneficiaries who were in nursing facilities for part of their enrollment and their 89,711 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 2003. 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 2003 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).
- Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE 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, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 2003

Beneficiary Characteristics	ANALGESICS - ANTI-INFLAMMATORY					ANTICONVULSANT					ANTIHYPERTENSIVE				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
<b>All</b>	<b>5,765</b>	<b>31.6 %</b>	<b>62,747</b>	<b>0.6</b>	<b>\$54</b>	<b>5,487</b>	<b>30.0 %</b>	<b>59,336</b>	<b>0.9</b>	<b>\$56</b>	<b>9,539</b>	<b>52.2 %</b>	<b>100,362</b>	<b>0.8</b>	<b>\$31</b>
<b>Female</b>	4,282	33.3	46,700	0.7	55	3,469	26.9	37,391	0.9	52	6,637	51.5	70,046	0.8	31
<b>Disabled</b>	241	36.2	2,771	0.7	55	488	73.3	5,591	1.0	75	330	49.5	3,724	0.8	32
64 or younger	237	36.0	2,732	0.7	55	485	73.6	5,564	1.0	75	323	49.0	3,649	0.8	32
65-74	4	57.1	39	0.5	41	3	42.9	27	1.3	54	7	100.0	75	0.9	47
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Other Eligibles</b>	4,041	33.1	43,929	0.7	55	2,981	24.4	31,800	0.9	48	6,307	51.7	66,322	0.8	31
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	623	38.9	7,035	0.7	58	775	48.3	8,575	1.0	60	983	61.3	10,773	0.8	32
75-84	1,557	35.5	17,093	0.7	58	1,251	28.5	13,353	0.9	47	2,487	56.7	26,281	0.8	31
85 and older	1,861	29.9	19,801	0.6	53	955	15.4	9,872	0.8	38	2,837	45.6	29,268	0.8	30
<b>Male</b>	1,483	27.5	16,047	0.6	50	2,018	37.4	21,945	0.9	63	2,902	53.8	30,316	0.8	31
<b>Disabled</b>	277	26.3	3,095	0.6	49	755	71.6	8,476	1.0	76	607	57.6	6,791	0.8	32
64 or younger	276	26.4	3,091	0.6	49	752	71.8	8,450	1.0	76	602	57.5	6,747	0.8	32
65-74	1	14.3	4	0.3	3	3	42.9	26	1.0	41	5	71.4	44	0.5	21
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Other Eligibles</b>	1,206	27.8	12,952	0.6	50	1,263	29.1	13,469	0.9	55	2,295	52.9	23,525	0.8	30
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	388	28.5	4,439	0.6	51	585	43.0	6,552	0.9	63	853	62.6	9,274	0.8	32
75-84	446	26.9	4,669	0.6	50	479	28.9	5,039	0.9	50	892	53.8	8,955	0.8	30
85 and older	372	28.2	3,844	0.6	49	199	15.1	1,878	0.8	40	550	41.8	5,296	0.8	29
<b>Unknown</b>	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 2003 file for Louisiana, released by CMS in 05/2007. This table was produced on 11/01/2007.

- 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 2003. A total of 9,010 beneficiaries who were in nursing facilities for part of their enrollment and their 89,711 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 2003. 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 2003 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).
- Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE 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, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 2003

Beneficiary Characteristics	MISC. HEMATOLOGICAL					ANTIASTHMATIC					Benefit Months Among All-Year Nursing Facility Residents	
	Users as % of All-Year Nursing Facility Residents		Number of Benefit Months Among Users		Mean Rx \$	Users as % of All-Year Nursing Facility Residents		Number of Benefit Months Among Users		Mean Rx \$		
	Number of Users	%	Number of Users	Mean Number of Rx		Number of Users	%	Number of Users	Mean Number of Rx			
<b>All</b>	<b>3,501</b>	<b>19.2 %</b>	<b>36,774</b>	<b>0.8</b>	<b>\$74</b>	<b>8,318</b>	<b>45.5 %</b>	<b>88,607</b>	<b>0.4</b>	<b>\$25</b>	<b>18,267</b>	<b>185,158</b>
<b>Female</b>	2,411	18.7	25,432	0.8	75	5,564	43.2	59,641	0.4	24	12,877	131,210
<b>Disabled</b>	70	10.5	778	0.8	75	296	44.4	3,312	0.4	24	666	7,354
64 or younger	68	10.3	763	0.8	76	291	44.2	3,252	0.4	24	659	7,296
65-74	2	28.6	15	0.9	70	5	71.4	60	0.5	31	7	58
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
<b>Other Eligibles</b>	2,341	19.2	24,654	0.8	75	5,268	43.1	56,329	0.4	23	12,211	123,856
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	295	18.4	3,201	0.8	80	791	49.3	8,639	0.5	30	1,603	17,215
75-84	883	20.1	9,372	0.8	75	2,080	47.4	22,136	0.4	26	4,390	45,107
85 and older	1,163	18.7	12,081	0.8	73	2,397	38.5	25,554	0.4	19	6,218	61,534
<b>Male</b>	1,090	20.2	11,342	0.8	72	2,754	51.1	28,966	0.5	27	5,390	53,948
<b>Disabled</b>	143	13.6	1,593	0.7	67	404	38.3	4,553	0.5	25	1,054	11,456
64 or younger	143	13.7	1,593	0.7	67	402	38.4	4,551	0.5	25	1,047	11,409
65-74	0	0.0	0	0.0	0	2	28.6	2	1.0	66	7	47
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
<b>Other Eligibles</b>	947	21.8	9,749	0.8	73	2,350	54.2	24,413	0.5	27	4,336	42,492
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	312	22.9	3,441	0.8	74	766	56.2	8,282	0.6	33	1,362	14,423
75-84	348	21.0	3,548	0.8	75	857	51.7	8,828	0.5	25	1,657	16,096
85 and older	287	21.8	2,760	0.8	68	727	55.2	7,303	0.4	24	1,317	11,973
<b>Unknown</b>	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 2003 file for Louisiana, released by CMS in 05/2007. This table was produced on 11/01/2007.

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 2003. A total of 9,010 beneficiaries who were in nursing facilities for part of their enrollment and their 89,711 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 2003. 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 2003 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medspan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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

TABLE D.11  
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D  
 AMONG DUALS, BY BENEFICIARY CHARACTERISTIC<sup>a,b</sup>  
 LOUISIANA, 2003

Beneficiary Characteristics	Number of Beneficiaries with at Least One Part D Excluded Rx	Percentage of Beneficiaries with at Least One Part D Excluded Rx	Number of Part D Excluded Rx per Beneficiary	Total Number Excluded Rx	Part D		Total Part D Excluded Rx \$	\$ per Part D Excluded Rx	Part D Excluded Rx \$ as a Percentage of All Dual Rx \$ of Beneficiaries	
					Excluded Rx per Beneficiary	Excluded Rx \$			Dual Rx \$	%
<b>All</b>	<b>58,335</b>	<b>52.5 %</b>	<b>4.6</b>	<b>506,183</b>	<b>\$110</b>	<b>\$12,239,998</b>	<b>\$24</b>	<b>3.8 %</b>	<b>111,105</b>	
<b>Age</b>										
5 and younger	9	90.0	12.4	124	748	7,476	60	12.1	10	
6-14	15	60.0	4.2	105	108	2,693	26	2.2	25	
15-20	109	38.2	3.2	920	202	57,639	63	9.2	285	
21-44	7,603	39.6	2.9	56,240	85	1,637,045	29	3.7	19,221	
45-64	11,824	52.5	4.7	104,887	131	2,958,746	28	4.1	22,512	
65-74	13,632	51.4	4.3	113,616	102	2,695,119	24	3.5	26,501	
75-84	14,082	57.4	5.2	128,240	113	2,763,185	22	3.6	24,545	
85 and older	11,061	61.4	5.7	102,051	118	2,118,095	21	4.1	18,006	
Unknown	0	0.0	0.0	0	0	0	0	0.0	0	
<b>Basis of Eligibility<sup>c</sup></b>										
Aged	38,888	55.9	4.9	344,155	109	7,577,174	22	3.7	69,588	
Disabled	19,276	46.9	3.9	161,014	113	4,631,124	29	4.0	41,134	
Adults	160	43.1	2.5	940	80	29,516	31	5.1	371	
Children	11	91.7	6.2	74	182	2,184	30	2.6	12	
Unknown	0	0.0	0.0	0	0	0	0	0.0	0	
<b>Gender</b>										
Female	42,168	57.1	5.0	367,614	117	8,665,828	24	3.9	73,788	
Male	16,167	43.3	3.7	138,569	96	3,574,170	26	3.6	37,315	
Unknown	0	0.0	0.0	0	0	0	0	0.0	2	
<b>Race</b>										
White	27,046	58.3	5.7	265,520	127	5,908,384	22	3.6	46,428	
African American	23,928	47.4	3.6	182,671	100	5,051,043	28	4.1	50,454	
Other/unknown	7,361	51.8	4.1	57,992	90	1,280,571	22	3.3	14,223	
<b>Use of Nursing Facilities<sup>d</sup></b>										
Entire year	12,856	70.4	8.5	155,281	189	3,448,311	22	4.1	18,267	
Part year	6,731	74.7	6.6	59,571	166	1,494,526	25	4.6	9,010	
None	38,748	46.2	3.5	291,331	87	7,297,161	25	3.5	83,828	
<b>Maintenance Assistance Status</b>										
Cash	33,919	48.1	3.7	261,110	95	6,718,002	26	3.7	70,554	
Medically needy	83	43.5	3.5	674	248	47,407	70	9.9	191	
Poverty related	1,067	36.6	1.5	4,399	31	91,293	21	3.2	2,916	
Other/unknown	23,266	62.1	6.4	240,000	144	5,383,296	22	3.9	37,444	

Source: Data for this table are from the MAX 2003 file for Louisiana, released by CMS in 05/2007. This table was produced on 11/01/2007.

- 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 2003.
- b. The statute establishing the Medicare Part D prescription program that started in 2006 excludes several types of drugs from coverage. State Medicaid programs have been allowed to exclude these drugs since 1990, but many states have chosen to cover them, and if states cover them for any Medicaid beneficiaries they must also cover them for dual eligibles, who as of 2006 receive the remainder of their prescription drug coverage through Part D. Excluded drugs include benzodiazepines; barbiturates; nonprescription (OTC) medications; prescription vitamins and minerals (not including prenatal vitamins and fluoride preparations); and drugs used for anorexia, weight loss, or weight gain. Other excluded drugs include those that promote fertility; those used for cosmetic purposes or hair growth, for symptomatic relief of coughs and colds; or drugs for which the manufacturer requires that associated tests or monitoring services be purchased exclusively from the manufacturer.
- c. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.
- d. Please refer to footnote f on Table 1 for methodology used to determine use of nursing facilities.

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

TABLE D.12  
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D  
 AMONG DUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC<sup>a,b</sup>  
 LOUISIANA, 2003

Beneficiary Characteristics	Number Rx per Benefit Month	Rx \$ per Benefit Month	\$ per Rx	Barbiturate \$ per Benefit Month	Benzodiazapine \$ per Benefit Month	Number of Benefit Months
All	0.4	\$10	\$24	\$0	\$3	1,218,209
<b>Age</b>						
5 and younger	1.2	73	60	0	0	103
6-14	0.4	9	26	0	0	285
15-20	0.3	18	63	0	2	3,243
21-44	0.3	8	29	0	3	217,662
45-64	0.4	12	28	0	3	253,807
65-74	0.4	9	24	0	2	295,608
75-84	0.5	10	22	0	2	265,124
85 and older	0.6	12	21	0	2	182,377
Unknown	0.0	0	0	0	0	0
<b>Basis of Eligibility<sup>c</sup></b>						
Aged	0.5	10	22	0	2	749,653
Disabled	0.3	10	29	0	3	465,412
Adults	0.3	10	31	0	3	3,013
Children	0.6	17	30	0	0	131
Unknown	0.0	0	0	0	0	0
<b>Gender</b>						
Female	0.5	11	24	0	3	813,392
Male	0.3	9	26	0	2	404,793
Unknown	0.0	0	0	0	0	24
<b>Race</b>						
White	0.5	12	22	0	4	495,020
African American	0.3	9	28	0	1	565,277
Other/unknown	0.4	8	22	0	2	157,912
<b>Use of Nursing Facilities<sup>d</sup></b>						
Entire year	0.8	19	22	0	4	185,158
Part year	0.7	17	25	0	3	89,711
None	0.3	8	25	0	2	943,340
<b>Maintenance Assistance Status</b>						
Cash	0.3	8	26	0	2	802,952
Medically needy	0.4	27	70	0	4	1,751
Poverty related	0.1	3	21	0	1	30,824
Other/unknown	0.6	14	22	0	3	382,682

Source: Data for this table are from the MAX 2003 file for Louisiana, released by CMS in 05/2007. This table was produced on 11/01/2007.

- 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 2003.
- b. The statute establishing the Medicare Part D prescription program that started in 2006 excludes several types of drugs from coverage. State Medicaid programs have been allowed to exclude these drugs since 1990, but many states have chosen to cover them, and if states cover them for any Medicaid beneficiaries they must also cover them for dual eligibles, who as of 2006 receive the remainder of their prescription drug coverage through Part D. Excluded drugs include benzodiazepines; barbiturates; nonprescription (OTC) medications; prescription vitamins and minerals (not including prenatal vitamins and fluoride preparations); and drugs used for anorexia, weight loss, or weight gain. Other excluded drugs include those that promote fertility; those used for cosmetic purposes or hair growth, for symptomatic relief of coughs and colds; or drugs for which the manufacturer requires that associated tests or monitoring services be purchased exclusively from the manufacturer.
- c. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.
- d. Please refer to footnote f on Table 1 for methodology used to determine use of nursing facilities.

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



TABLE D.13  
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D  
 FOR SELECTED DRUG CATEGORIES AMONG DUALS<sup>a,b,c</sup>  
 LOUISIANA, 2003

Drug Category	Number of Users	Rx \$ per User	Total Rx \$	Rx \$ as a Percentage of All Part D Excluded Rx \$		Total Number Rx.	\$ per Rx	Number Rx as a Percentage of All Part D Excluded Rx	
				Excluded Rx \$	100.0 %			Excluded Rx	100.0 %
<b>All</b>	<b>86,885</b>	<b>\$141</b>	<b>\$12,239,998</b>	<b>100.0</b>	<b>100.0</b>	<b>506,183</b>	<b>\$24</b>	<b>506,183</b>	<b>100.0</b>
Anorexia or weight loss/gain	0	0	0	0.0	0.0	0	0	0	0.0
Fertility drugs	0	0	0	0.0	0.0	0	0	0	0.0
Drugs for cosmetic purposes	0	0	0	0.0	0.0	0	0	0	0.0
Cough and cold medications	15,038	64	966,173	7.9	7.9	36,222	27	36,222	7.2
Vitamins and minerals	31,333	126	3,958,816	32.3	32.3	220,483	18	220,483	43.6
Non-prescription drugs	9,836	45	438,456	3.6	3.6	47,069	9	47,069	9.3
Barbiturates	1,943	104	201,864	1.6	1.6	18,088	11	18,088	3.6
Benzodiazepines	23,782	131	3,113,375	25.4	25.4	160,026	19	160,026	31.6
Other Part D Excl Rx Drugs	4,953	719	3,561,314	29.1	29.1	24,295	147	24,295	4.8

Source: Data for this table are from the MAX 2003 file for Louisiana, released by CMS in 05/2007. This table was produced on 11/01/2007.

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 2003. A user is a beneficiary who had at least one prescription filled for a Part D excluded drug in 2003. 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 = Centers for Medicare & Medicaid Services; Excl = excluded; MAX = Medicaid Analytic Extract; OTC = over-the-counter; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

SUPPLEMENTAL TABLE 1  
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES<sup>a, b</sup>  
 LOUISIANA, 2003

Total Number of Dual Eligible Beneficiaries 111,105  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries \$323,832,862  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary \$2,915

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	11,659	10.5 %	\$0	0.0 %
1-500	16,160	14.5	3,575,065	1.1
501-1,000	10,967	9.9	8,132,622	2.5
1,001-1,500	9,512	8.6	11,857,681	3.7
1,501-2,000	8,376	7.5	14,623,622	4.5
2,001-2,500	7,413	6.7	16,641,242	5.1
2,501-3,000	6,676	6.0	18,310,099	5.7
3,001-3,500	5,914	5.3	19,179,252	5.9
3,501-4,000	5,265	4.7	19,716,186	6.1
4,001-4,500	4,569	4.1	19,401,306	6.0
4,501-5,000	3,824	3.4	18,145,641	5.6
5,001-5,500	3,224	2.9	16,913,525	5.2
5,501-6,000	2,697	2.4	15,483,927	4.8
6,001-6,500	2,344	2.1	14,635,057	4.5
6,501-7,000	1,977	1.8	13,329,680	4.1
7,001-7,500	1,538	1.4	11,142,259	3.4
7,501-8,000	1,344	1.2	10,406,703	3.2
8,001-8,500	1,131	1.0	9,334,111	2.9
8,501-9,000	1,008	0.9	8,817,300	2.7
9,001-9,500	765	0.7	7,063,086	2.2
9,501-10,000	617	0.6	6,017,840	1.9
10,001+	4,125	3.7	61,106,658	18.9

Source: Data for this table are from the MAX 2003 file for Louisiana, released by CMS in 05/2007. This table was produced on 11/01/2007.

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 2003.

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



SUPPLEMENTAL TABLE 1B  
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 AND OLDER<sup>a, b</sup>  
 LOUISIANA, 2003

Total Number of Dual Eligible Beneficiaries, Age 65+	69,052
Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65+	\$205,515,320
Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65+	\$2,976

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 65+	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	5,282	7.6 %	0	0.0 %
1-500	8,078	11.7	1,931,475	0.9
501-1,000	6,849	9.9	5,107,943	2.5
1,001-1,500	6,299	9.1	7,870,252	3.8
1,501-2,000	5,670	8.2	9,906,686	4.8
2,001-2,500	5,132	7.4	11,535,184	5.6
2,501-3,000	4,748	6.9	13,025,599	6.3
3,001-3,500	4,181	6.1	13,563,081	6.6
3,501-4,000	3,747	5.4	14,031,504	6.8
4,001-4,500	3,260	4.7	13,845,891	6.7
4,501-5,000	2,731	4.0	12,958,181	6.3
5,001-5,500	2,255	3.3	11,823,483	5.8
5,501-6,000	1,899	2.8	10,892,321	5.3
6,001-6,500	1,627	2.4	10,161,093	4.9
6,501-7,000	1,332	1.9	8,976,745	4.4
7,001-7,500	1,031	1.5	7,466,512	3.6
7,501-8,000	868	1.3	6,720,005	3.3
8,001-8,500	722	1.0	5,956,773	2.9
8,501-9,000	602	0.9	5,264,766	2.6
9,001-9,500	467	0.7	4,306,761	2.1
9,501-10,000	360	0.5	3,512,666	1.7
10,001+	1,912	2.8	26,658,399	13.0

Source: Data for this table are from the MAX 2003 file for Louisiana, released by CMS in 05/2007. This table was produced on 11/01/2007.

- 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 2003.
- b. Medicaid reimbursement amounts in this table do not reflect federally required rebates from drug manufacturers to states.

SUPPLEMENTAL TABLE 1C  
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 TO 74<sup>a, b</sup>  
 LOUISIANA, 2003

Total Number of Dual Eligible Beneficiaries, Age 65-74 26,501  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65-74 \$76,826,827  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65-74 \$2,899

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 65-74	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	2,654	10.0 %	0	0.0 %
1-500	3,269	12.3	749,007	1.0
501-1,000	2,639	10.0	1,961,727	2.6
1,001-1,500	2,357	8.9	2,941,809	3.8
1,501-2,000	2,094	7.9	3,655,534	4.8
2,001-2,500	1,901	7.2	4,274,961	5.6
2,501-3,000	1,724	6.5	4,732,196	6.2
3,001-3,500	1,506	5.7	4,889,966	6.4
3,501-4,000	1,370	5.2	5,129,673	6.7
4,001-4,500	1,218	4.6	5,165,377	6.7
4,501-5,000	950	3.6	4,510,303	5.9
5,001-5,500	777	2.9	4,077,554	5.3
5,501-6,000	694	2.6	3,983,507	5.2
6,001-6,500	548	2.1	3,421,715	4.5
6,501-7,000	438	1.7	2,949,133	3.8
7,001-7,500	383	1.4	2,771,004	3.6
7,501-8,000	323	1.2	2,502,234	3.3
8,001-8,500	262	1.0	2,162,334	2.8
8,501-9,000	224	0.8	1,962,167	2.6
9,001-9,500	170	0.6	1,566,929	2.0
9,501-10,000	148	0.6	1,443,202	1.9
10,001+	852	3.2	11,976,495	15.6

Source: Data for this table are from the MAX 2003 file for Louisiana, released by CMS in 05/2007. This table was produced on 11/01/2007.

- 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 2003.
- b. Medicaid reimbursement amounts in this table do not reflect federally required rebates from drug manufacturers to states.

SUPPLEMENTAL TABLE 1D

MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 75 TO 84<sup>a, b</sup>  
LOUISIANA, 2003

Total Number of Dual Eligible Beneficiaries, Age 75-84	24,545
Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 75-84	\$76,778,083
Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 75-84	\$3,128

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 75-84 6.8 %	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement 0.0 %
\$0	1,669	10.7	0	0.0
1-500	2,626	10.7	642,424	0.8
501-1,000	2,289	9.3	1,707,763	2.2
1,001-1,500	2,169	8.8	2,710,048	3.5
1,501-2,000	2,032	8.3	3,554,083	4.6
2,001-2,500	1,879	7.7	4,229,511	5.5
2,501-3,000	1,703	6.9	4,669,892	6.1
3,001-3,500	1,528	6.2	4,959,137	6.5
3,501-4,000	1,398	5.7	5,235,615	6.8
4,001-4,500	1,179	4.8	5,007,619	6.5
4,501-5,000	1,045	4.3	4,956,544	6.5
5,001-5,500	860	3.5	4,509,017	5.9
5,501-6,000	678	2.8	3,890,939	5.1
6,001-6,500	637	2.6	3,978,813	5.2
6,501-7,000	503	2.0	3,387,453	4.4
7,001-7,500	395	1.6	2,863,738	3.7
7,501-8,000	336	1.4	2,599,166	3.4
8,001-8,500	290	1.2	2,393,077	3.1
8,501-9,000	239	1.0	2,090,274	2.7
9,001-9,500	196	0.8	1,809,379	2.4
9,501-10,000	139	0.6	1,357,691	1.8
10,001+	755	3.1	10,225,900	13.3

Source: Data for this table are from the MAX 2003 file for Louisiana, released by CMS in 05/2007. This table was produced on 11/01/2007.

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 2003.

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

SUPPLEMENTAL TABLE 1E  
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 85 AND OLDER<sup>a, b</sup>  
 LOUISIANA, 2003

Total Number of Dual Eligible Beneficiaries, Age 85+ 18,006  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 85+ \$51,910,410  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 85+ \$2,883

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 85+ 5.3 %	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	959	5.3 %	0	0.0 %
1-500	2,183	12.1	540,044	1.0
501-1,000	1,921	10.7	1,438,453	2.8
1,001-1,500	1,773	9.8	2,218,395	4.3
1,501-2,000	1,544	8.6	2,697,069	5.2
2,001-2,500	1,352	7.5	3,030,712	5.8
2,501-3,000	1,321	7.3	3,623,511	7.0
3,001-3,500	1,147	6.4	3,713,978	7.2
3,501-4,000	979	5.4	3,666,216	7.1
4,001-4,500	863	4.8	3,672,895	7.1
4,501-5,000	736	4.1	3,491,334	6.7
5,001-5,500	618	3.4	3,236,912	6.2
5,501-6,000	527	2.9	3,017,875	5.8
6,001-6,500	442	2.5	2,760,565	5.3
6,501-7,000	391	2.2	2,640,159	5.1
7,001-7,500	253	1.4	1,831,770	3.5
7,501-8,000	209	1.2	1,618,605	3.1
8,001-8,500	170	0.9	1,401,362	2.7
8,501-9,000	139	0.8	1,212,325	2.3
9,001-9,500	101	0.6	930,453	1.8
9,501-10,000	73	0.4	711,773	1.4
10,001+	305	1.7	4,456,004	8.6

Source: Data for this table are from the MAX 2003 file for Louisiana, released by CMS in 05/2007. This table was produced on 11/01/2007.

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 2003.

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<sup>a, b</sup>  
DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 2003

Beneficiary Characteristics	Number of Beneficiaries					Number of Benefit Months				
	All	Aged	Disabled	Adults	Unknown	All	Aged	Disabled	Adults	Unknown
<b>All</b>	<b>111,105</b>	<b>69,588</b>	<b>41,134</b>	<b>371</b>	<b>0</b>	<b>1,218,209</b>	<b>749,653</b>	<b>465,412</b>	<b>3,013</b>	<b>0</b>
<b>Age</b>										
5 and younger	10	0	10	0	0	103	0	103	0	0
6-14	25	0	21	0	4	285	0	237	0	48
15-20	285	2	271	5	7	3,243	24	3,109	39	71
21-44	19,221	587	18,364	269	1	217,662	6,462	209,023	2,165	12
45-64	22,512	213	22,202	97	0	253,807	2,454	250,544	809	0
65-74	26,501	26,235	266	0	0	295,608	293,212	2,396	0	0
75-84	24,545	24,545	0	0	0	265,124	265,124	0	0	0
85 and older	18,006	18,006	0	0	0	182,377	182,377	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0
<b>Gender</b>										
Female	73,788	52,469	21,073	241	5	813,392	570,617	240,754	1,961	60
Male	37,315	17,119	20,059	130	7	404,793	179,036	224,634	1,052	71
Unknown	2	0	2	0	0	24	0	24	0	0
<b>Race</b>										
White	46,428	29,607	16,654	162	5	495,020	306,168	187,521	1,282	49
African American	50,454	29,485	20,775	189	5	565,277	327,669	235,950	1,600	58
Other/unknown	14,223	10,496	3,705	20	2	157,912	115,816	41,941	131	24
<b>Use of Nursing Facilities<sup>c</sup></b>										
Entire year	18,267	16,547	1,720	0	0	185,158	166,348	18,810	0	0
Part year	9,010	8,059	951	0	0	89,711	79,739	9,972	0	0
None	83,828	44,982	38,463	371	12	943,340	503,566	436,630	3,013	131
<b>Maintenance Assistance Status</b>										
Cash	70,554	40,440	29,871	243	0	802,952	462,186	338,747	2,019	0
Medically needy	191	102	63	26	0	1,751	892	610	249	0
Poverty related	2,916	1,165	1,661	82	8	30,824	12,368	17,826	547	83
Other/unknown	37,444	27,881	9,539	20	4	382,682	274,207	108,229	198	48
<b>Dual Status<sup>d</sup></b>										
Full dual, all year	107,107	67,367	39,381	347	12	1,173,894	725,059	445,944	2,760	131
Full dual, part year	3,998	2,221	1,753	24	0	44,315	24,594	19,468	253	0
<b>Managed Care (MC) Status</b>										
Fee-for-service (FFS) all year	111,105	69,588	41,134	371	12	1,218,209	749,653	465,412	3,013	131
FFS part year, with Rx claims	0	0	0	0	0	0	0	0	0	0
FFS part year, no Rx claims	0	0	0	0	0	0	0	0	0	0
MC all year, with Rx claims	0	0	0	0	0	0	0	0	0	0
MC all year, no Rx claims	0	0	0	0	0	0	0	0	0	0



Source: Data for this table are from the MAX 2003 file for Louisiana, released by CMS in 05/2007. This table was produced on 11/01/2007.

- 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 2003. 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 = Centers for Medicare & 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<sup>a</sup>  
 DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 2003

Beneficiary Characteristics	Beneficiaries and			
	Benefit Months in Cell F of Table 1 Number of Beneficiaries	Benefit Months in Cell G of Table 1 Number of Beneficiaries	Benefit Months in Cell H of Table 1 Number of Beneficiaries	Benefit Months in Cell I of Table 1 Number of Beneficiaries
<b>All</b>	<b>111,105</b>	<b>1,218,209</b>	<b>111,105</b>	<b>1,218,209</b>
Fee-for-service (FFS) all year	111,105	1,218,209	111,105	1,218,209
FFS part year, with Rx claims	0	0	0	0
FFS part year, with no Rx claims	0	0	0	0
Managed care (MC) all year, with Rx claims	0	0	0	0
MC all year, with no Rx claims	0	0	0	0

Source: Data for this table are from the MAX 2003 file for Louisiana, released by CMS in 05/2007. This table was produced on 11/01/2007.

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

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