

STATISTICAL COMPENDIUM: MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2004 LOUISIANA

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TABLE D.2
CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a, b}
DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 2004

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown
All	110,889	67,370	43,135	342	9	33	1,213,053	726,916	483,014	2,780	73	270
Age												
5 and younger	11	0	10	0	1	0	112	0	100	0	12	0
6-14	20	0	15	0	5	0	231	0	177	0	54	0
15-20	314	0	312	0	2	0	3,551	0	3,547	0	4	0
21-44	19,374	0	19,111	256	1	6	217,273	0	215,192	2,037	3	41
45-64	23,478	0	23,376	85	0	17	262,162	0	261,270	731	0	161
65-74	26,196	25,875	310	1	0	10	291,877	289,081	2,716	12	0	68
75-84	24,093	24,092	1	0	0	0	261,059	261,047	12	0	0	0
85 and older	17,403	17,403	0	0	0	0	176,788	176,788	0	0	0	0
Unknown	0	0	0	0	0	0		0	0	0	0	0
Gender												
Female	73,292	50,865	22,163	228	3	33	806,208	553,763	250,333	1,806	36	270
Male	37,595	16,505	20,970	114	6	0	406,821	173,153	232,657	974	37	0
Unknown	2	0	2	0	0	0	24	0	24	0	0	0
Race												
White	46,170	28,350	17,652	150	3	15	492,926	295,569	196,088	1,130	20	119
African American	50,543	28,481	21,869	170	6	17	565,193	316,862	246,658	1,481	53	139
Other/unknown	14,176	10,539	3,614	22	0	1	154,934	114,485	40,268	169	0	12
Use of Nursing Facilities^c												
Entire year	17,062	15,335	1,727	0	0	0	174,794	155,930	18,864	0	0	0
Part year	9,382	8,395	986	1	0	0	93,663	83,366	10,285	12	0	0
None	84,445	43,640	40,422	341	9	33	944,596	487,620	453,865	2,768	73	270
Maintenance Assistance Status												
Cash	69,842	39,353	30,277	212	0	0	790,271	449,324	339,135	1,812	0	0
Medically needy	126	77	36	13	0	0	1,101	684	308	109	0	0
Poverty-related	2,841	1,087	1,617	97	7	33	29,856	11,753	17,104	680	49	270
Other/unknown	38,080	26,853	11,205	20	2	0	391,825	265,155	126,467	179	24	0
Dual Medicare Status^d												
Full dual, all year	106,333	64,920	41,053	318	9	33	1,162,700	699,705	460,132	2,520	73	270
Full dual, part year	4,556	2,450	2,082	24	0	0	50,353	27,211	22,882	260	0	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	110,889	67,370	43,135	342	9	33	1,213,053	726,916	483,014	2,780	73	270
FFS part year, with Rx claims	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

Source: Data for this table are from the MAX 2004 file for Louisiana, released by CMS in 02/2008. This table was produced on 03/25/2008.

- 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 2004. 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^{a, b}
DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 2004

Beneficiary Characteristics	Percentage with at Least One Rx	Mean Number of Rx	Mean Rx \$	\$ per Rx	Mean \$, All Medicaid FFS \$ ^c	Rx \$ as a Percentage of All Medicaid FFS \$ ^d	Number of Beneficiaries
All	89.5 %	51.7	\$3,375	\$65	\$12,827	26.3 %	110,889
Age							
5 and younger	90.9	33.4	4,300	129	16,658	25.8	11
6-14	100.0	40.5	4,659	115	13,880	33.6	20
15-20	82.2	19.0	1,807	95	12,938	14.0	314
21-44	81.2	30.5	2,718	89	11,932	22.8	19,374
45-64	88.1	51.9	3,777	73	14,950	25.3	23,478
65-74	90.1	55.0	3,330	61	9,330	35.7	26,196
75-84	93.2	60.6	3,599	59	12,685	28.4	24,093
85 and older	94.7	58.6	3,349	57	16,414	20.4	17,403
Unknown	0.0	0.0	0	0	0	0.0	0
Basis of Eligibility^e							
Aged	92.4	58.0	3,433	59	12,352	27.8	67,370
Disabled	85.0	42.2	3,293	78	13,620	24.2	43,135
Adults	83.9	22.5	1,788	80	5,383	33.2	342
Children	77.8	28.1	4,508	160	21,443	21.0	9
Unknown	97.0	42.5	6,638	156	18,695	35.5	33
Gender							
Female	92.7	56.8	3,535	62	12,316	28.7	73,292
Male	83.4	41.8	3,062	73	13,822	22.2	37,595
Unknown	100.0	8.5	394	46	22,755	1.7	2
Race							
White	90.6	60.6	4,031	67	17,686	22.8	46,170
African American	88.3	44.1	2,846	65	9,594	29.7	50,543
Other/unknown	90.3	50.0	3,123	63	8,526	36.6	14,176
Use of Nursing Facilities^f							
Entire year	98.1	83.0	5,332	64	29,284	18.2	17,062
Part year	98.2	65.8	4,271	65	20,513	20.8	9,382
None	86.8	43.9	2,880	66	8,648	33.3	84,445
Maintenance Assistance Status							
Cash	88.9	46.5	2,980	64	6,095	48.9	69,842
Medically needy	88.1	48.2	3,185	66	15,840	20.1	126
Poverty related	76.5	18.8	1,268	68	3,135	40.4	2,841
Other/unknown	91.6	63.7	4,257	67	25,886	16.4	38,080

Source: Data for this table are from the MAX 2004 file for Louisiana, released by CMS in 02/2008. This table was produced on 03/25/2008.

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^{a, b}
 DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 2004

Beneficiary Characteristics	Mean Number of Rx	Mean Rx \$	Rx \$ as a Percentage of All Medicaid FFS \$ ^c	Number of Rx, Percentage with:						Mean \$, All Medicaid FFS \$ ^d	Number	
				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		Beneficiaries	Benefit Months
All	4.7	\$309	26.3 %	10.5 %	15.0 %	9.6 %	28.1 %	28.3 %	8.5 %	\$1,173	110,889	1,213,053
Age												
5 and younger	3.3	422	25.8	9.1	18.2	9.1	54.5	9.1	0.0	1,636	11	112
6-14	3.5	403	33.6	0.0	15.0	20.0	45.0	20.0	0.0	1,202	20	231
15-20	1.7	160	14.0	17.8	42.7	14.0	19.1	6.1	0.3	1,144	314	3,551
21-44	2.7	242	22.8	18.8	29.7	12.2	23.1	13.5	2.6	1,064	19,374	217,273
45-64	4.6	338	25.3	11.9	14.9	9.8	28.3	26.9	8.2	1,339	23,478	262,162
65-74	4.9	299	35.7	9.9	13.1	9.6	28.9	29.5	8.9	837	26,196	291,877
75-84	5.6	332	28.4	6.8	9.9	8.5	29.2	34.1	11.6	1,171	24,093	261,059
85 and older	5.8	330	20.4	5.3	8.5	8.0	30.7	37.1	10.5	1,616	17,403	176,788
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Basis of Eligibility^e												
Aged	5.4	318	27.8	7.6	10.8	8.8	29.5	33.1	10.3	1,145	67,370	726,916
Disabled	3.8	294	24.2	15.0	21.7	10.9	25.9	20.9	5.7	1,216	43,135	483,014
Adults	2.8	220	33.2	16.1	27.2	16.4	25.1	12.9	2.3	662	342	2,780
Children	3.5	556	21.0	22.2	11.1	11.1	22.2	33.3	0.0	2,644	9	73
Unknown	5.2	811	35.5	3.0	9.1	12.1	51.5	18.2	6.1	2,285	33	270
Gender												
Female	5.2	321	28.7	7.3	12.7	9.4	29.7	31.3	9.6	1,120	73,292	806,208
Male	3.9	283	22.2	16.6	19.5	10.1	25.0	22.5	6.2	1,277	37,595	406,821
Unknown	0.7	33	1.7	0.0	100.0	0.0	0.0	0.0	0.0	1,896	2	24
Race												
White	5.7	378	22.8	9.4	11.2	7.6	25.3	33.4	13.1	1,657	46,170	492,926
African American	3.9	255	29.7	11.7	18.7	11.3	29.9	23.7	4.7	858	50,543	565,193
Other/unknown	4.6	286	36.6	9.7	14.5	10.3	30.6	28.2	6.7	780	14,176	154,934
use of nursing Facilities^f												
Entire year	8.1	520	18.2	1.9	2.7	3.6	22.0	45.1	24.7	2,858	17,062	174,794
Part year	6.6	428	20.8	1.8	6.8	7.2	29.3	40.9	13.9	2,055	9,382	93,663
None	3.9	258	33.3	13.2	18.5	11.1	29.2	23.5	4.6	773	84,445	944,596
Maintenance Assistance Status												
Cash	4.1	263	48.9	11.1	17.7	11.2	30.0	24.9	5.1	539	69,842	790,271
Medically needy	5.5	365	20.1	11.9	11.9	13.5	19.8	31.0	11.9	1,813	126	1,101
Poverty related	1.8	121	40.4	23.5	38.1	12.2	18.8	6.4	1.0	298	2,841	29,856
Other/unknown	6.2	414	16.4	8.4	8.5	6.6	25.3	36.0	15.1	2,516	38,080	391,825

Source: Data for this table are from the MAX 2004 file for Louisiana, released by CMS in 02/2008. This table was produced on 03/25/2008.

- 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^{a, b, c}
DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 2004

Beneficiary	All Rx			Patented Brand-Name Drugs			Off-Patent Brand-Name Drugs			Generic Drugs		
Characteristics	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx
All	4.7	\$309	\$65	2.0	\$224	\$113	0.3	\$21	\$62	2.4	\$63	\$26
Age												
5 and younger	3.3	422	129	1.2	320	268	0.2	33	149	1.8	69	38
6-14	3.5	403	115	1.2	246	199	0.3	45	161	2.0	111	56
15-20	1.7	160	95	0.8	122	162	0.1	8	73	0.8	29	37
21-44	2.7	242	89	1.1	184	167	0.2	17	85	1.4	40	29
45-64	4.6	338	73	1.9	247	127	0.3	23	73	2.4	67	29
65-74	4.9	299	61	2.1	217	103	0.3	19	57	2.5	62	25
75-84	5.6	332	59	2.4	240	100	0.4	22	54	2.8	70	25
85 and older	5.8	330	57	2.3	231	100	0.5	24	52	3.0	74	25
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility^d												
Aged	5.4	318	59	2.3	229	101	0.4	21	54	2.7	68	25
Disabled	3.8	294	78	1.6	218	140	0.3	20	77	1.9	55	29
Adults	2.8	220	80	1.0	163	156	0.2	18	96	1.5	39	26
Children	3.5	556	160	1.5	395	272	0.4	45	127	1.7	116	70
Unknown	5.2	811	156	1.9	677	364	0.3	53	197	3.0	81	27
Gender												
Female	5.2	321	62	2.2	232	107	0.4	21	57	2.6	67	26
Male	3.9	283	73	1.6	208	129	0.3	20	74	2.0	55	28
Unknown	0.7	33	46	0.3	23	91	0.0	0	0	0.5	10	22
Race												
White	5.7	378	67	2.4	274	115	0.4	27	64	2.8	76	27
African American	3.9	255	65	1.6	185	114	0.3	16	60	2.0	53	26
Other/unknown	4.6	286	63	2.0	210	106	0.3	19	58	2.2	57	25
Use of Nursing Facilities^e												
Entire year	8.1	520	64	3.3	372	112	0.6	37	61	4.1	111	27
Part year	6.6	428	65	2.7	304	112	0.5	30	59	3.3	94	28
None	3.9	258	66	1.7	189	114	0.3	17	62	2.0	51	26
Maintenance Assistance Status												
Cash	4.1	263	64	1.7	192	111	0.3	17	62	2.1	54	26
Medically needy	5.5	365	66	2.3	270	119	0.4	23	56	2.8	71	25
Poverty related	1.8	121	68	0.7	87	123	0.1	9	74	0.9	25	26
Other/unknown	6.2	414	67	2.6	300	117	0.5	29	61	3.1	85	27

Source: Data for this table are from the MAX 2004 file for Louisiana, released by CMS in 02/2008. This table was produced on 03/25/2008.

- 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, 0.5 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all combined. For information about this classification method, see Wolters Kluwer Health, <http://www.medispain.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^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 2004

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per Rx				Total Number of Rx	Total Rx \$	Users ^e		
	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic			Number	As a Percentage of Dual Benes	Number of Benefit Months
Anti-infective Agents	0.3	0.1	0.0	0.2	\$27	\$20	\$2	\$5	\$84	\$154	\$110	\$31	224,619	\$18,808,909	61,717	55.7 %	699,076
Biologicals	0.5	0.1	0.3	0.1	####	17	2,360	988	6901	225	8,741	6,966	354	2,443,025	66	0.1	726
Antineoplastic Agents	0.5	0.1	0.0	0.4	75	33	1	41	156	493	195	100	34,126	5,311,210	6,841	6.2	70,893
Endocrine/Metabolic Drugs	0.9	0.4	0.1	0.4	49	36	3	9	54	90	27	24	502,100	27,257,232	49,735	44.9	560,211
Cardiovascular Agents	1.8	0.7	0.1	1.0	78	49	5	23	43	75	46	23	1,531,389	66,402,485	75,942	68.5	848,670
Respiratory Agents	0.7	0.4	0.0	0.2	37	31	1	5	57	77	34	23	365,613	20,902,301	49,508	44.6	560,765
Gastrointestinal Agents	0.8	0.4	0.0	0.3	70	59	2	9	91	138	49	30	439,623	39,929,925	51,365	46.3	573,340
Genitourinary Agents	0.5	0.3	0.0	0.1	36	28	3	5	69	84	75	32	105,587	7,280,177	18,167	16.4	204,949
CNS Drugs	1.2	0.6	0.0	0.6	108	87	4	17	90	157	99	29	774,402	69,997,305	58,182	52.5	647,374
Stimulants/Anti-obesity/Anorexia	0.4	0.3	0.0	0.1	44	40	1	3	115	150	66	30	8,686	1,000,988	1,994	1.8	22,809
Miscellaneous Psychological/																	
Neurological Agents	0.8	0.7	0.0	0.0	108	106	0	2	140	145	105	42	93,720	13,103,829	11,366	10.2	121,846
Analgesics and Anesthetics	0.8	0.3	0.0	0.5	47	35	2	10	60	121	119	21	566,678	34,254,683	64,202	57.9	726,090
Neuromuscular Agents	0.8	0.2	0.2	0.4	59	28	16	15	72	135	94	33	320,555	23,026,265	34,496	31.1	390,682
Nutritional Products	0.7	0.0	0.0	0.6	17	1	1	15	25	28	22	25	238,140	5,878,189	32,181	29.0	356,040
Hematological Agents	0.8	0.3	0.1	0.3	73	62	5	6	96	198	33	21	243,132	23,381,924	29,179	26.3	322,232
Topical Products	0.5	0.2	0.0	0.2	24	16	2	5	52	72	53	28	246,672	12,817,849	47,034	42.4	532,895
Miscellaneous Products	0.3	0.1	0.0	0.2	65	45	5	15	208	533	231	73	7,612	1,585,301	2,195	2.0	24,450
Unknown Therapeutic Category	0.4	0.0	0.0	0.0	10	0	0	0	26	0	0	0	32,806	860,578	7,796	7.0	88,109
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.	5,735,814	374,242,175	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2004 file for Louisiana, released by CMS in 02/2008. This table was produced on 03/25/2008.

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.medispan.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, 0.5 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, <http://www.medispan.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 2004.

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^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 2004

Top 10 Drug Groups	Total Medicaid Rx \$	Users		Among Users			
		Number of Users	As a Percentage of Dual Beneficiaries	Number of Benefit Months	Number of Rx per Benefit Month	\$ per Rx	Rx \$ per Benefit Month
ANTIPSYCHOTICS	\$43,337,761	29,968	27.0 %	334,638	0.7	\$197	\$130
ULCER DRUGS	32,200,293	48,600	43.8	546,216	0.5	108	59
ANTIHYPERTENSIVE	20,667,222	31,955	28.8	367,659	0.6	96	56
ANTIDIABETIC	19,900,582	43,201	39.0	487,769	0.6	64	41
ANTIDEPRESSANTS	19,312,892	47,818	43.1	534,378	0.6	61	36
ANTIHYPERTENSIVE	19,114,241	63,988	57.7	724,183	0.6	43	26
ANALGESICS - ANTI-INFLAMMATORY	18,017,115	44,757	40.4	517,266	0.4	92	35
ANTICONVULSANT	17,452,835	26,141	23.6	295,501	0.7	86	59
ANALGESICS - Narcotic	13,333,981	73,629	66.4	837,410	0.4	42	16
NEUROLOGICAL	13,103,932	14,023	12.6	150,747	0.6	140	87
Total	216,440,854	424,080		4,795,767	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2004 file for Louisiana, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004. 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 2004. 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); 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^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 2004

Beneficiary Characteristics	All Top 10 Drug Groups		ANTIPSYCHOTICS					ULCER DRUGS				
	Number of Rx	Rx \$	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	2,606,114	\$216,440,854	29,968	27.0 %	334,638	0.7	\$130	48,600	43.8 %	546,216	0.5	\$59
Female	1,869,697	149,362,978	18,031	24.6	200,741	0.6	115	35,505	48.4	401,144	0.5	59
Disabled	521,446	47,323,481	6,747	30.4	78,833	0.6	137	9,750	44.0	113,464	0.5	52
5 and younger	7	320	0	0.0	0	0.0	0	2	100.0	18	0.3	17
6-14	44	2,139	0	0.0	0	0.0	0	1	16.7	12	0.8	11
15-20	1,083	109,210	13	10.7	135	0.8	193	34	27.9	408	0.3	26
21-44	142,150	14,271,315	2,914	34.0	34,105	0.6	133	2,819	32.8	33,079	0.4	41
45-64	373,670	32,608,816	3,790	28.6	44,291	0.6	139	6,788	51.2	78,840	0.5	56
65-74	4,492	331,681	30	15.2	302	0.8	153	106	53.5	1,107	0.5	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
Other Eligibles	1,348,251	102,039,497	11,284	22.1	121,908	0.6	100	25,755	50.4	287,680	0.6	62
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	39	2,148	0	0.0	0	0.0	0	2	66.7	24	0.6	23
15-20	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	1,718	137,181	27	13.7	255	0.5	74	48	24.4	503	0.3	32
45-64	980	87,451	8	14.8	90	0.4	116	24	44.4	217	0.4	37
65-74	491,847	36,870,914	2,903	16.3	32,838	0.7	114	8,895	50.1	102,671	0.5	59
75-84	513,957	38,965,850	4,314	23.3	46,759	0.7	103	9,508	51.3	106,383	0.6	62
85 and older	339,710	25,975,953	4,032	27.7	41,966	0.6	87	7,278	49.9	77,882	0.7	67
Male	736,410	67,077,648	11,937	31.8	133,897	0.7	152	13,095	34.8	145,072	0.5	58
Disabled	376,430	39,439,930	7,780	37.1	90,370	0.7	172	5,911	28.2	67,577	0.5	54
5 and younger	35	1,554	0	0.0	0	0.0	0	5	62.5	55	0.3	26
6-14	48	2,143	0	0.0	0	0.0	0	2	22.2	23	0.5	14
15-20	1,148	133,517	43	22.6	515	0.5	142	37	19.5	427	0.3	26
21-44	147,143	17,200,490	3,884	36.9	45,577	0.7	170	2,307	21.9	26,707	0.4	48
45-64	225,971	21,922,810	3,829	37.8	44,050	0.7	174	3,509	34.7	39,863	0.5	58
65-74	2,068	177,547	24	21.4	228	0.7	143	50	44.6	490	0.5	66
75-84	17	1,869	0	0.0	0	0.0	0	1	100.0	12	0.3	109
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	359,980	27,637,718	4,157	25.0	43,527	0.7	111	7,184	43.2	77,495	0.6	61
5 and younger	3	390	0	0.0	0	0.0	0	1	100.0	12	0.3	33
6-14	4	104	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	1	8	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	1,042	88,269	14	21.2	121	0.3	132	18	27.3	194	0.2	19
45-64	666	51,280	9	18.8	89	0.3	68	18	37.5	192	0.4	53
65-74	179,438	13,772,403	1,712	21.1	18,773	0.7	130	3,281	40.4	36,900	0.6	60
75-84	124,386	9,533,196	1,551	27.9	15,990	0.7	102	2,533	45.5	26,826	0.6	61
85 and older	54,440	4,192,068	871	30.8	8,554	0.6	85	1,333	47.2	13,371	0.7	68
Unknown	7	228	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2004 file for Louisiana, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004. 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 2004. 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^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 2004

Beneficiary Characteristics	ANTIHYPERTENSIVE					ANTIDIABETIC					ANTIDEPRESSANTS				
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	31,955	28.8 %	367,659	0.6	\$56	43,201	39.0 %	487,769	0.6	\$41	47,818	43.1 %	534,378	0.6	\$36
Female	23,466	32.0	270,984	0.6	56	32,391	44.2	367,337	0.6	41	35,102	47.9	393,915	0.6	36
Disabled	6,060	27.3	70,658	0.5	50	8,271	37.3	95,676	0.6	42	12,897	58.2	149,086	0.5	33
5 and younger	1	50.0	12	0.1	1	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	1	16.7	12	1.4	78	0	0.0	0	0.0	0
15-20	5	4.1	60	0.4	34	11	9.0	132	0.7	64	34	27.9	387	0.5	34
21-44	917	10.7	10,739	0.5	43	1,465	17.1	17,031	0.5	40	4,448	51.8	51,686	0.5	33
45-64	5,048	38.1	58,937	0.5	52	6,657	50.2	77,129	0.6	43	8,324	62.8	96,149	0.5	34
65-74	89	44.9	910	0.5	48	137	69.2	1,372	0.6	43	91	46.0	864	0.5	27
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
Other Eligibles	17,406	34.0	200,326	0.6	58	24,120	47.2	271,661	0.7	40	22,205	43.4	244,829	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	1	33.3	12	0.5	37	0	0.0	0	0.0	0	1	33.3	12	0.8	30
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	15	7.6	156	0.4	46	14	7.1	141	0.7	57	80	40.6	757	0.4	26
45-64	12	22.2	116	0.6	63	24	44.4	213	0.4	28	30	55.6	291	0.5	40
65-74	8,210	46.2	95,502	0.6	56	10,673	60.1	122,905	0.6	42	7,588	42.7	86,585	0.6	33
75-84	6,644	35.9	76,490	0.6	60	8,988	48.5	101,075	0.7	40	8,178	44.1	90,110	0.6	38
85 and older	2,524	17.3	28,050	0.6	60	4,421	30.3	47,327	0.7	36	6,328	43.4	67,074	0.7	41
Male	8,489	22.6	96,675	0.6	56	10,810	28.8	120,432	0.6	41	12,716	33.8	140,463	0.6	37
Disabled	3,983	19.0	46,085	0.6	53	4,583	21.9	52,102	0.6	42	7,135	34.0	81,554	0.5	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	1	11.1	12	0.3	24	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	7	3.7	84	0.4	29	4	2.1	48	0.4	37	26	13.7	304	0.5	37
21-44	1,207	11.5	14,150	0.5	47	1,190	11.3	13,685	0.6	39	3,350	31.8	38,814	0.5	37
45-64	2,741	27.1	31,595	0.6	56	3,338	33.0	37,919	0.6	43	3,721	36.8	42,064	0.6	37
65-74	27	24.1	244	0.7	80	51	45.5	450	0.6	36	38	33.9	372	0.7	36
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
Other Eligibles	4,506	27.1	50,590	0.6	59	6,227	37.5	68,330	0.7	41	5,581	33.6	58,909	0.6	38
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	15	22.7	131	0.4	37	17	25.8	144	0.6	57	38	57.6	329	0.5	23
21-44	14	29.2	127	0.4	35	17	35.4	156	0.4	20	21	43.8	207	0.4	35
45-64	2,630	32.4	30,219	0.6	58	3,341	41.2	37,818	0.7	42	2,416	29.8	26,563	0.6	36
65-74	1,460	26.2	16,133	0.6	59	2,070	37.2	22,276	0.7	39	2,062	37.0	21,496	0.7	38
75-84	387	13.7	3,980	0.7	60	782	27.7	7,936	0.6	37	1,044	36.9	10,314	0.7	40
85 and older															
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2004 file for Louisiana, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004. 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 2004. 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^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 2004

Beneficiary Characteristics	ANTIHYPERTENSIVE					ANALGESICS - ANTI-INFLAMMATORY					ANTICONVULSANT				
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	63,988	57.7 %	724,183	0.6	\$26	44,757	40.4 %	517,266	0.4	\$35	26,141	23.6 %	295,501	0.7	\$59
Female	46,638	63.6	530,458	0.6	27	33,400	45.6	386,802	0.4	37	16,696	22.8	189,051	0.7	54
Disabled	10,759	48.5	124,806	0.5	24	10,607	47.9	124,288	0.3	30	7,469	33.7	86,419	0.7	69
5 and younger	1	50.0	6	0.2	2	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	2	33.3	24	0.5	42	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	16	13.1	192	0.4	22	37	30.3	426	0.1	4	26	21.3	312	1.0	135
21-44	2,081	24.2	24,035	0.5	21	3,456	40.3	40,597	0.2	19	2,886	33.6	33,629	0.7	77
45-64	8,526	64.3	99,129	0.6	25	7,032	53.1	82,359	0.3	35	4,513	34.1	52,065	0.7	64
65-74	133	67.2	1,420	0.5	20	82	41.4	906	0.4	30	44	22.2	413	0.5	31
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
Other Eligibles	35,879	70.2	405,652	0.6	28	22,793	44.6	262,514	0.4	40	9,227	18.0	102,632	0.6	42
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	33.3	12	0.6	66	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	36	18.3	340	0.4	14	61	31.0	616	0.2	12	45	22.8	378	0.5	76
45-64	36	66.7	339	0.5	21	34	63.0	307	0.3	30	14	25.9	119	0.4	43
65-74	13,946	78.5	161,536	0.6	28	9,337	52.5	109,471	0.4	37	3,560	20.0	40,679	0.6	46
75-84	13,546	73.1	153,777	0.6	28	8,330	45.0	96,111	0.4	41	3,516	19.0	39,020	0.7	40
85 and older	8,314	57.0	89,648	0.7	28	5,031	34.5	56,009	0.5	46	2,092	14.4	22,436	0.7	36
Male	17,350	46.1	193,725	0.6	25	11,356	30.2	130,452	0.3	29	9,445	25.1	106,450	0.7	68
Disabled	7,386	35.2	83,728	0.6	23	5,806	27.7	67,609	0.3	23	6,340	30.2	73,002	0.8	77
5 and younger	2	25.0	24	0.5	3	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	3	33.3	36	0.4	22	0	0.0	0	0.0	0	2	22.2	22	0.8	34
15-20	25	13.2	277	0.5	15	26	13.7	312	0.2	9	32	16.8	376	0.7	67
21-44	2,382	22.6	27,159	0.5	21	2,508	23.8	29,338	0.2	17	3,002	28.5	34,853	0.7	84
45-64	4,907	48.5	55,649	0.6	25	3,236	32.0	37,589	0.3	27	3,283	32.4	37,572	0.8	71
65-74	65	58.0	559	0.5	25	36	32.1	370	0.4	35	21	18.8	179	0.7	57
75-84	2	200.0	24	0.5	23	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
Other Eligibles	9,964	59.9	109,997	0.6	25	5,550	33.4	62,843	0.4	36	3,105	18.7	33,448	0.7	48
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	50.0	12	0.3	9	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	20	30.3	159	0.4	19	27	40.9	253	0.3	17	25	37.9	238	0.5	69
45-64	22	45.8	209	0.5	24	25	52.1	256	0.2	15	11	22.9	105	0.4	38
65-74	5,169	63.7	58,514	0.6	25	2,933	36.1	33,897	0.4	33	1,612	19.9	17,969	0.7	52
75-84	3,401	61.1	37,221	0.6	26	1,794	32.2	20,299	0.4	38	1,064	19.1	11,053	0.7	44
85 and older	1,351	47.8	13,882	0.6	25	771	27.3	8,138	0.5	41	393	13.9	4,083	0.7	37
Unknown	0	0.0	0	0.0	0	1	50.0	12	0.1	8	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2004 file for Louisiana, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004. 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 2004. 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); 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^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 2004

Beneficiary Characteristics	ANALGESICS - Narcotic					MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL					Number of Beneficiaries	Number of Benefit Months
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean of Rx per Benefit Month	Mean Rx \$ per Benefit Month		
All	73,629	66.4 %	837,410	0.4	\$16	14,023	12.6 %	150,747	0.6	\$87	110,889	1,213,053
Female	53,142	72.5	606,838	0.4	15	10,794	14.7	116,892	0.6	88	73,292	806,208
Disabled	19,712	88.9	229,211	0.4	18	803	3.6	9,308	0.4	140	22,163	250,333
	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	18
5 and younger	2	33.3	24	0.2	2	0	0.0	0	0.0	0	6	72
6-14	68	55.7	789	0.1	2	0	0.0	0	0.0	0	122	1,394
15-20	7,006	81.6	81,655	0.3	17	210	2.4	2,466	0.3	153	8,582	97,468
21-44	12,489	94.2	145,230	0.4	20	585	4.4	6,752	0.5	137	13,253	149,614
45-64	147	74.2	1,513	0.4	14	8	4.0	90	0.4	56	198	1,767
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	33,430	65.4	377,627	0.4	13	9,991	19.5	107,584	0.6	84	51,129	555,875
Other Eligibles	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
5 and younger	2	66.7	24	0.1	1	0	0.0	0	0.0	0	3	36
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
15-20	172	87.3	1,593	0.3	17	1	0.5	12	0.1	14	197	1,558
21-44	53	98.1	502	0.5	45	0	0.0	0	0.0	0	54	450
45-64	13,093	73.7	151,403	0.4	13	1,501	8.4	16,629	0.6	73	17,772	200,506
65-74	12,287	66.3	139,179	0.4	13	4,226	22.8	45,714	0.7	84	18,526	203,520
75-84	7,823	53.7	84,926	0.4	14	4,263	29.2	45,229	0.7	87	14,577	149,805
85 and older												
Male	20,486	54.5	230,560	0.4	18	3,229	8.6	33,855	0.6	83	37,595	406,821
Disabled	11,841	56.5	135,478	0.4	21	547	2.6	6,156	0.5	90	20,970	232,657
	5	62.5	60	0.1	1	0	0.0	0	0.0	0	8	82
5 and younger	1	11.1	12	0.2	2	0	0.0	0	0.0	0	9	105
6-14	58	30.5	645	0.2	3	1	0.5	12	0.1	8	190	2,153
15-20	5,575	53.0	64,288	0.4	21	152	1.4	1,754	0.4	112	10,528	117,712
21-44	6,123	60.5	69,663	0.4	23	385	3.8	4,302	0.5	81	10,122	111,644
45-64	78	69.6	798	0.5	24	9	8.0	88	0.6	78	112	949
65-74	1	100.0	12	0.1	1	0	0.0	0	0.0	0	1	12
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	8,645	52.0	95,082	0.4	13	2,682	16.1	27,699	0.6	82	16,625	174,164
Other Eligibles	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	18
6-14	1	50.0	2	0.5	4	0	0.0	0	0.0	0	2	4
15-20	95	143.9	876	0.5	28	2	3.0	19	0.2	12	66	523
21-44	41	85.4	402	0.4	17	1	2.1	12	0.3	45	48	442
45-64	4,445	54.8	50,258	0.4	14	699	8.6	7,584	0.6	75	8,114	88,655
65-74	2,788	50.1	30,294	0.4	12	1,219	21.9	12,534	0.6	83	5,566	57,527
75-84	1,275	45.1	13,250	0.3	11	761	26.9	7,550	0.7	86	2,826	26,983
85 and older												
Unknown	1	50.0	12	0.5	11	0	0.0	0	0.0	0	2	24

Source: Data for this table are from the MAX 2004 file for Louisiana, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004. 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 2004. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispn.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^{a, b}
 DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 2004

Beneficiary Characteristics	Rx \$ per Benefit Month	Number of Rx per Benefit Month	Number of All-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents
All	\$520	8.1	17,062	174,794
Age				
0-64	672	8.7	1,697	18,634
65-74	593	8.8	2,801	29,630
75-84	537	8.5	5,673	58,184
85 and older	434	7.3	6,891	68,346
Unknown	0	0.0	0	0
Gender				
Female	512	8.2	12,045	123,778
Male	541	7.8	5,017	51,016
Unknown	0	0.0	0	0
Race				
White	540	8.5	11,077	112,835
African American	481	7.2	4,475	47,521
Other/unknown	499	7.7	1,510	14,438
Basis of Eligibility^c				
Aged	502	8.0	15,335	155,930
Disabled	671	8.7	1,727	18,864
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 2004 file for Louisiana, released by CMS in 02/2008. This table was produced on 03/25/2008.

a. Table D.8 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their 2004 Medicaid enrollment. A total of 9,382 beneficiaries who were in nursing facilities for part of their enrollment and their 93,663 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^{a, b, c, d, e}
 DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 2004

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per Rx				Total Number of Rx	Total Rx \$	Users		
	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic			Number of Users	As a Percentage of Dual All-Year Nursing Facility Residents	Number of Benefit Months
Anti-infective Agents	0.3	0.1	0.0	0.2	\$23	\$15	\$2	\$6	\$67	\$111	\$96	\$32	41,910	\$2,799,903	11,381	66.7 %	121,960
Biologicals	1.0	0.0	1.0	0.0	###	0	8,766	0	8891	0	8,891	0	140	1,244,723	13	0.1	142
Antineoplastic Agents	0.6	0.0	0.0	0.5	73	15	1	57	127	403	197	107	12,514	1,587,687	2,219	13.0	21,849
Endocrine/Metabolic Drugs	1.1	0.5	0.2	0.4	59	45	4	10	52	87	22	22	105,168	5,459,473	8,766	51.4	92,781
Cardiovascular Agents	2.2	0.5	0.2	1.5	81	40	9	32	37	73	50	22	306,408	11,371,620	13,512	79.2	140,609
Respiratory Agents	0.8	0.5	0.0	0.3	46	37	1	8	55	76	42	25	83,522	4,583,208	9,210	54.0	98,925
Gastrointestinal Agents	1.1	0.5	0.1	0.5	88	69	3	16	77	131	37	30	128,515	9,881,999	10,693	62.7	112,816
Genitourinary Agents	0.8	0.5	0.1	0.2	53	41	4	8	69	84	85	34	38,206	2,649,346	4,618	27.1	49,882
CNS Drugs	1.7	0.9	0.0	0.7	159	130	4	25	93	141	80	34	231,685	21,441,922	12,827	75.2	134,868
Stimulants/Anti-obesity/Anorexia	0.6	0.3	0.0	0.3	55	46	1	8	86	164	46	25	1,865	160,440	278	1.6	2,936
Miscellaneous Psychological/																	
Neurological Agents	1.0	1.0	0.0	0.0	137	136	0	1	138	140	113	47	50,282	6,960,305	4,866	28.5	50,754
Analgesics and Anesthetics	1.0	0.4	0.0	0.5	59	49	1	9	61	110	51	18	93,567	5,754,276	9,264	54.3	98,148
Neuromuscular Agents	1.2	0.3	0.3	0.7	80	34	20	26	65	115	78	38	78,869	5,130,321	5,968	35.0	64,275
Nutritional Products	0.9	0.1	0.0	0.8	17	1	1	15	18	17	22	18	82,139	1,490,610	8,347	48.9	88,171
Hematological Agents	1.1	0.4	0.2	0.5	88	74	6	9	83	183	28	18	76,910	6,356,316	6,891	40.4	72,345
Topical Products	0.6	0.3	0.1	0.3	31	20	4	7	50	69	51	28	72,523	3,613,978	10,703	62.7	115,689
Miscellaneous Products	0.3	0.1	0.0	0.3	42	21	1	20	131	403	120	78	1,997	262,237	577	3.4	6,257
Unknown Therapeutic Category	0.5	0.0	0.0	0.0	11	0	0	0	23	0	0	0	9,386	217,783	1,906	11.2	20,727
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.	1,415,606	90,966,147	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2004 file for Louisiana, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004. A total of 9,382 beneficiaries who were in nursing facilities for part of their enrollment and their 93,663 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 2004. 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.medspan.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, 0.5 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.

Bene Mo(s) = benefit month(s); CMS = 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^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 2004

Top 10 Drug Groups in Nursing Facilities	Total Medicaid Rx \$	Users			Among Users		
		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	\$13,710,627	9,199	53.9 %	99,085	0.8	\$170	\$138
ULCER DRUGS	7,905,611	9,361	54.9	99,242	0.8	101	80
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	6,960,338	6,180	36.2	64,721	0.8	138	108
ANTIDEPRESSANTS	6,097,356	11,131	65.2	118,594	0.8	62	51
ANTIDIABETIC	3,652,753	7,482	43.9	79,940	0.8	56	46
ANTICONVULSANT	3,606,568	5,356	31.4	58,264	0.9	68	62
ANALGESICS - ANTI-INFLAMMATORY	3,264,756	5,310	31.1	58,007	0.6	88	56
ANTIHYPERTENSIVE	3,222,752	9,402	55.1	99,102	0.8	41	33
MISC. HEMATOLOGICAL	3,006,932	3,358	19.7	35,558	0.8	106	85
ANTIHYPERLIPIDEMIC	2,673,033	3,284	19.2	35,151	0.8	94	76
Total	54,100,726	70,063		747,664	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2004 file for Louisiana, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004. A total of 9,382 beneficiaries who were in nursing facilities for part of their enrollment and their 93,663 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 2004. 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 2004 Medicaid reimbursement for all-year nursing facility residents in this state. 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 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^{a, b, c, d}
DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 2004

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 Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
All	599,047	\$54,100,726	9,199	53.9 %	99,085	0.8	\$138	9,361	54.9 %	99,242	0.8	\$80
Female	421,895	37,452,471	6,114	50.8	66,040	0.8	130	6,690	55.5	71,316	0.8	80
Disabled	32,220	3,422,424	538	80.1	6,210	0.9	190	432	64.3	4,828	0.8	79
64 or younger	31,787	3,375,226	529	80.2	6,118	0.9	189	423	64.1	4,737	0.8	79
65-74	433	47,198	9	75.0	92	1.0	278	9	75.0	91	0.8	71
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
Other Eligibles	389,675	34,030,047	5,576	49.0	59,830	0.8	123	6,258	55.0	66,488	0.8	80
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	68,316	6,310,010	1,062	70.4	11,861	0.8	158	866	57.4	9,419	0.8	82
75-84	158,708	13,977,947	2,230	54.4	24,151	0.8	127	2,372	57.9	25,418	0.8	80
85 and older	162,651	13,742,090	2,284	39.6	23,818	0.7	102	3,020	52.4	31,651	0.8	80
Male	177,152	16,648,255	3,085	61.5	33,045	0.8	156	2,671	53.2	27,926	0.8	79
Disabled	45,877	4,958,221	931	88.2	10,372	0.9	200	581	55.1	6,355	0.8	80
64 or younger	45,540	4,924,386	920	88.7	10,252	0.9	201	570	55.0	6,268	0.8	80
65-74	337	33,835	11	61.1	120	0.7	137	11	61.1	87	0.8	69
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
Other Eligibles	131,275	11,690,034	2,154	54.4	22,673	0.8	136	2,090	52.8	21,571	0.8	79
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	50,823	4,714,640	836	66.2	9,236	0.9	165	689	54.6	7,479	0.8	80
75-84	52,043	4,533,580	830	52.7	8,646	0.8	124	801	50.9	8,157	0.8	79
85 and older	28,409	2,441,814	488	43.4	4,791	0.7	102	600	53.3	5,935	0.8	79
Unknown	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2004 file for Louisiana, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004. A total of 9,382 beneficiaries who were in nursing facilities for part of their enrollment and their 93,663 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 2004. 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 2004 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.10B
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY
 AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 2004

Beneficiary Characteristics	MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL					ANTIDEPRESSANTS					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 \$
All	6,180	36.2 %	64,721	0.8	\$108	11,131	65.2 %	118,594	0.8	\$51	7,482	43.9 %	79,940	0.8	\$46
Female	4,740	39.4	49,961	0.8	108	8,053	66.9	86,136	0.8	52	5,261	43.7	56,326	0.8	45
Disabled	103	15.3	1,173	0.7	252	565	84.1	6,349	0.9	56	372	55.4	4,087	0.8	48
64 or younger	103	15.6	1,173	0.7	252	560	84.8	6,300	0.9	56	365	55.3	4,019	0.8	48
65-74	0	0.0	0	0.0	0	5	41.7	49	1.1	87	7	58.3	68	0.6	27
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
Other Eligibles	4,637	40.8	48,788	0.8	104	7,488	65.8	79,787	0.8	51	4,889	43.0	52,239	0.8	45
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	451	29.9	4,734	0.8	107	1,190	78.9	12,917	0.9	54	1,032	68.4	11,152	0.9	50
75-84	1,927	47.0	20,349	0.8	105	3,001	73.2	32,264	0.8	53	2,072	50.5	22,327	0.8	45
85 and older	2,259	39.2	23,705	0.8	102	3,297	57.2	34,606	0.8	49	1,785	31.0	18,760	0.8	41
Male	1,440	28.7	14,760	0.8	108	3,078	61.4	32,458	0.8	51	2,221	44.3	23,614	0.8	48
Disabled	128	12.1	1,402	0.7	152	740	70.1	8,092	0.8	55	537	50.9	5,864	0.8	50
64 or younger	126	12.2	1,378	0.7	153	729	70.3	7,972	0.8	55	533	51.4	5,834	0.8	50
65-74	2	11.1	24	0.8	108	11	61.1	120	0.6	32	4	22.2	30	0.8	28
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
Other Eligibles	1,312	33.1	13,358	0.8	103	2,338	59.0	24,366	0.8	49	1,684	42.5	17,750	0.8	47
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	287	22.7	3,072	0.8	102	822	65.1	8,943	0.8	51	644	51.0	6,986	0.9	51
75-84	622	39.5	6,381	0.8	103	988	62.8	10,177	0.8	48	659	41.9	6,919	0.8	46
85 and older	403	35.8	3,905	0.8	104	528	46.9	5,246	0.8	47	381	33.9	3,845	0.7	42
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2004 file for Louisiana, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004. A total of 9,382 beneficiaries who were in nursing facilities for part of their enrollment and their 93,663 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 2004. 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 2004 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispn.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^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 2004

Beneficiary Characteristics	ANTICONVULSANT					ANALGESICS - ANTI-INFLAMMATORY					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 \$
All	5,356	31.4 %	58,264	0.9	\$62	5,310	31.1 %	58,007	0.6	\$56	9,402	55.1 %	99,102	0.8	\$33
Female	3,407	28.3	37,290	0.9	57	3,967	32.9	43,407	0.6	58	6,589	54.7	69,562	0.8	33
Disabled	519	77.2	5,984	1.0	83	264	39.3	3,074	0.6	52	354	52.7	3,963	0.8	32
64 or younger	512	77.6	5,904	1.0	84	263	39.8	3,062	0.6	52	346	52.4	3,895	0.8	32
65-74	7	58.3	80	0.8	22	1	8.3	12	0.4	20	8	66.7	68	0.7	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
Other Eligibles	2,888	25.4	31,306	0.9	52	3,703	32.6	40,333	0.7	58	6,235	54.8	65,599	0.8	33
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	715	47.4	7,917	0.9	66	568	37.7	6,333	0.7	61	966	64.1	10,399	0.8	35
75-84	1,204	29.4	13,080	0.9	52	1,403	34.2	15,328	0.6	60	2,435	59.4	26,062	0.8	33
85 and older	969	16.8	10,309	0.8	41	1,732	30.0	18,672	0.6	56	2,834	49.2	29,138	0.8	32
Male	1,949	38.8	20,974	0.9	71	1,343	26.8	14,600	0.6	52	2,813	56.1	29,540	0.8	32
Disabled	758	71.8	8,460	1.0	85	283	26.8	3,218	0.6	44	614	58.2	6,554	0.8	33
64 or younger	755	72.8	8,436	1.0	85	281	27.1	3,203	0.6	44	607	58.5	6,507	0.8	33
65-74	3	16.7	24	0.8	25	2	11.1	15	0.6	54	7	38.9	47	0.4	20
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
Other Eligibles	1,191	30.1	12,514	0.9	61	1,060	26.8	11,382	0.6	54	2,199	55.5	22,986	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	548	43.4	6,016	0.9	69	364	28.8	4,052	0.7	56	798	63.2	8,631	0.8	32
75-84	463	29.4	4,697	0.9	56	405	25.7	4,356	0.6	52	932	59.2	9,604	0.8	31
85 and older	180	16.0	1,801	0.8	47	291	25.9	2,974	0.6	55	469	41.7	4,751	0.8	30
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2004 file for Louisiana, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004. A total of 9,382 beneficiaries who were in nursing facilities for part of their enrollment and their 93,663 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 2004. 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 2004 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispn.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^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 2004

Beneficiary Characteristics	MISC. HEMATOLOGICAL					ANTIHYPERTENSIVE					Benefit Months Among All-Year	
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	All-Year Nursing Facility Residents	Nursing Facility Residents
All	3,358	19.7 %	35,558	0.8	\$85	3,284	19.2 %	35,151	0.8	\$76	17,062	174,794
Female	2,321	19.3	24,709	0.8	85	2,264	18.8	24,273	0.8	76	12,045	123,778
Disabled	93	13.8	1,020	0.8	85	165	24.6	1,884	0.8	76	672	7,502
64 or younger	88	13.3	974	0.8	85	163	24.7	1,865	0.8	76	660	7,394
65-74	5	41.7	46	0.8	92	2	16.7	19	1.0	78	12	108
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
Other Eligibles	2,228	19.6	23,689	0.8	85	2,099	18.5	22,389	0.8	76	11,373	116,276
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	281	18.6	3,086	0.8	89	435	28.8	4,614	0.8	79	1,508	16,018
75-84	815	19.9	8,797	0.8	87	965	23.5	10,389	0.8	78	4,099	42,545
85 and older	1,132	19.6	11,806	0.8	82	699	12.1	7,386	0.8	71	5,766	57,713
Male	1,037	20.7	10,849	0.8	85	1,020	20.3	10,878	0.8	77	5,017	51,016
Disabled	123	11.7	1,268	0.8	91	267	25.3	2,912	0.8	82	1,055	11,362
64 or younger	120	11.6	1,244	0.8	92	264	25.5	2,900	0.8	82	1,037	11,240
65-74	3	16.7	24	0.4	39	3	16.7	12	0.7	72	18	122
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
Other Eligibles	914	23.1	9,581	0.8	84	753	19.0	7,966	0.8	75	3,962	39,654
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	305	24.1	3,304	0.8	87	318	25.2	3,495	0.8	75	1,263	13,382
75-84	372	23.6	3,897	0.8	83	310	19.7	3,206	0.8	77	1,574	15,639
85 and older	237	21.1	2,380	0.8	81	125	11.1	1,265	0.8	72	1,125	10,633
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0

Source: Data for this table are from the MAX 2004 file for Louisiana, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004. A total of 9,382 beneficiaries who were in nursing facilities for part of their enrollment and their 93,663 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 2004. 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 2004 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispn.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^{a,b}
LOUISIANA, 2004

Beneficiary Characteristics	Number of Beneficiaries with at Least One Part D Excluded Rx	Percentage of Beneficiaries with at Least One Part D Excluded Rx	Number of Part D Excluded Rx per Beneficiary	Total Number Part D Excluded Rx	Part D Excluded Rx \$ per Beneficiary	Total Part D Excluded Rx \$	\$ per Part D Excluded Rx	Part D Excluded Rx \$ as a Percentage of All Dual Rx \$	Total Number of Beneficiaries
All	56,593	51.0 %	4.6	506,366	\$123	\$13,588,670	\$27	3.6 %	110,889
Age									
5 and younger	8	72.7	10.4	114	548	6,032	53	12.8	11
6-14	15	75.0	6.6	132	153	3,065	23	3.3	20
15-20	113	36.0	2.0	630	121	38,057	60	6.7	314
21-44	7,563	39.0	3.0	57,938	85	1,637,718	28	3.1	19,374
45-64	11,909	50.7	4.7	110,689	152	3,565,354	32	4.0	23,478
65-74	12,912	49.3	4.3	112,563	104	2,720,852	24	3.1	26,196
75-84	13,593	56.4	5.2	125,700	132	3,171,189	25	3.7	24,093
85 and older	10,480	60.2	5.7	98,600	141	2,446,403	25	4.2	17,403
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Basis of Eligibility^c									
Aged	36,819	54.7	5.0	335,508	123	8,303,518	25	3.6	67,370
Disabled	19,618	45.5	3.9	169,978	122	5,266,005	31	3.7	43,135
Adults	133	38.9	2.0	690	37	12,667	18	2.1	342
Children	7	77.8	7.6	68	317	2,849	42	7.0	9
Unknown	16	48.5	3.7	122	110	3,631	30	1.7	33
Gender									
Female	40,817	55.7	5.0	368,410	135	9,902,662	27	3.8	73,292
Male	15,775	42.0	3.7	137,955	98	3,685,989	27	3.2	37,595
Unknown	1	50.0	0.5	1	10	19	19	2.4	2
Race									
White	26,095	56.5	5.7	263,398	141	6,527,442	25	3.5	46,170
African American	23,445	46.4	3.7	184,655	112	5,667,411	31	3.9	50,543
Other/unknown	7,053	49.8	4.1	58,313	98	1,393,817	24	3.1	14,176
Use of Nursing Facilities^d									
Entire year	11,865	69.5	8.5	144,245	225	3,835,877	27	4.2	17,062
Part year	6,934	73.9	6.7	62,620	189	1,775,936	28	4.4	9,382
None	37,794	44.8	3.5	299,501	94	7,976,857	27	3.3	84,445
Maintenance Assistance Status									
Cash	32,568	46.6	3.8	261,976	106	7,376,886	28	3.5	69,842
Medically needy	68	54.0	4.4	556	97	12,282	22	3.1	126
Poverty related	961	33.8	1.5	4,321	33	93,262	22	2.6	2,841
Other/unknown	22,996	60.4	6.3	239,513	160	6,106,240	25	3.8	38,080

Table D11

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2004 file for Louisiana, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004.

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^{a,b}
LOUISIANA, 2004

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	\$11	\$27	\$0	\$3	1,213,053
Age						
5 and younger	1.0	54	53	0	0	112
6-14	0.6	13	23	0	0	231
15-20	0.2	11	60	0	1	3,551
21-44	0.3	8	28	0	3	217,273
45-64	0.4	14	32	0	4	262,162
65-74	0.4	9	24	0	2	291,877
75-84	0.5	12	25	0	2	261,059
85 and older	0.6	14	25	0	2	176,788
Unknown	0.0	0	0	0	0	0
Basis of Eligibility^c						
Aged	0.5	11	25	0	2	726,916
Disabled	0.4	11	31	0	3	483,014
Adults	0.2	5	18	0	2	2,780
Children	0.9	39	42	0	0	73
Unknown	0.5	13	30	0	8	270
Gender						
Female	0.5	12	27	0	3	806,208
Male	0.3	9	27	0	2	406,821
Unknown	0.0	1	19	0	0	24
Race						
White	0.5	13	25	0	4	492,926
African American	0.3	10	31	0	1	565,193
Other/unknown	0.4	9	24	0	2	154,934
Use of Nursing Facilities^d						
Entire year	0.8	22	27	0	4	174,794
Part year	0.7	19	28	0	3	93,663
None	0.3	8	27	0	2	944,596
Maintenance Assistance Status						
Cash	0.3	9	28	0	2	790,271
Medically needy	0.5	11	22	0	4	1,101
Poverty related	0.1	3	22	0	1	29,856
Other/unknown	0.6	16	25	0	4	391,825

Source: Data for this table are from the MAX 2004 file for Louisiana, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004.

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^{a,b,c}
LOUISIANA, 2004

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
All	83,226	\$163	\$13,588,670	100.0 %	506,366	\$27	100.0 %
Anorexia or weight loss/gain	0	0	0	0.0	0	0	0.0
Fertility drugs	0	0	0	0.0	0	0	0.0
Drugs for cosmetic purposes	0	0	0	0.0	0	0	0.0
Cough and cold medications	11,124	61	676,753	5.0	25,701	26	5.1
Vitamins and minerals	30,906	131	4,046,389	29.8	221,260	18	43.7
Non-prescription drugs	9,719	45	436,855	3.2	46,978	9	9.3
Barbiturates	1,822	108	196,155	1.4	17,673	11	3.5
Benzodiazepines	24,405	136	3,313,371	24.4	168,860	20	33.3
Other Part D Excl Rx Drugs	5,250	937	4,919,147	36.2	25,894	190	5.1

Source: Data for this table are from the MAX 2004 file for Louisiana, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004. A user is a beneficiary who had at least one prescription filled for a Part D excluded drug in 2004. 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^{a, b}
 LOUISIANA, 2004

Total Number of Dual Eligible Beneficiaries	110,889
Total Pharmacy Reimbursement for Dual Eligible Beneficiaries	\$374,242,175
Mean Pharmacy Reimbursement per Dual Eligible Beneficiary	\$3,375

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	11,637	10.5 %	\$0	0.0 %
1-500	14,500	13.1	3,176,856	0.8
501-1,000	9,847	8.9	7,339,891	2.0
1,001-1,500	8,509	7.7	10,591,782	2.8
1,501-2,000	7,548	6.8	13,182,389	3.5
2,001-2,500	7,051	6.4	15,844,929	4.2
2,501-3,000	6,339	5.7	17,396,630	4.6
3,001-3,500	5,771	5.2	18,746,420	5.0
3,501-4,000	5,208	4.7	19,522,047	5.2
4,001-4,500	4,531	4.1	19,230,056	5.1
4,501-5,000	4,126	3.7	19,564,701	5.2
5,001-5,500	3,400	3.1	17,831,188	4.8
5,501-6,000	3,070	2.8	17,635,706	4.7
6,001-6,500	2,633	2.4	16,434,404	4.4
6,501-7,000	2,360	2.1	15,916,319	4.3
7,001-7,500	1,970	1.8	14,262,630	3.8
7,501-8,000	1,664	1.5	12,881,780	3.4
8,001-8,500	1,424	1.3	11,741,540	3.1
8,501-9,000	1,222	1.1	10,680,988	2.9
9,001-9,500	1,072	1.0	9,915,590	2.6
9,501-10,000	897	0.8	8,744,188	2.3
10,001+	6,110	5.5	93,602,141	25.0

Source: Data for this table are from the MAX 2004 file for Louisiana, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004.

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

SUPPLEMENTAL TABLE 1A
 MEDICAID PHARMACY REIMBURSEMENT FOR DISABLED DUAL ELIGIBLE BENEFICIARIES UNDER AGE 65^{a, b, c}
 LOUISIANA, 2004

Total Number of Disabled Dual Eligible Beneficiaries, Age < 65	42,824
Total Pharmacy Reimbursement for Disabled Dual Eligible Beneficiaries, Age < 65	\$141,174,969
Mean Pharmacy Reimbursement per Disabled Dual Eligible Beneficiary, Age < 65	\$3,297

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Disabled Dual Beneficiaries, Age < 65	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	6,432	15.0 %	0	0.0 %
1-500	7,467	17.4	1,512,971	1.1
501-1,000	3,852	9.0	2,839,339	2.0
1,001-1,500	3,084	7.2	3,833,035	2.7
1,501-2,000	2,497	5.8	4,347,533	3.1
2,001-2,500	2,239	5.2	5,035,704	3.6
2,501-3,000	1,944	4.5	5,333,915	3.8
3,001-3,500	1,760	4.1	5,710,472	4.0
3,501-4,000	1,584	3.7	5,937,713	4.2
4,001-4,500	1,291	3.0	5,471,522	3.9
4,501-5,000	1,210	2.8	5,742,417	4.1
5,001-5,500	1,025	2.4	5,378,295	3.8
5,501-6,000	924	2.2	5,309,309	3.8
6,001-6,500	789	1.8	4,924,710	3.5
6,501-7,000	701	1.6	4,727,623	3.3
7,001-7,500	613	1.4	4,442,056	3.1
7,501-8,000	553	1.3	4,284,678	3.0
8,001-8,500	509	1.2	4,196,830	3.0
8,501-9,000	439	1.0	3,838,853	2.7
9,001-9,500	418	1.0	3,865,461	2.7
9,501-10,000	340	0.8	3,317,176	2.3
10,001+	3,153	7.4	51,125,357	36.2

Source: Data for this table are from the MAX 2004 file for Louisiana, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004.

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

c. This table is limited to dual eligible beneficiaries who were under age 65 and also indicated as disabled in the MAX files. Therefore, dual eligible beneficiaries under age 65 in "adults" or "children" basis-of-eligibility categories in Table D.2 are excluded because they were not classified as disabled in the MAX files. Disabled dual eligible beneficiaries age 65 and older are included in Supplemental Tables 1B through 1E, depending on their age.

SUPPLEMENTAL TABLE 1B
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 AND OLDER^{a, b}
 LOUISIANA, 2004

Total Number of Dual Eligible Beneficiaries, Age 65+	67,692
Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65+	\$232,213,594
Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65+	\$3,430

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 65+	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	5,148	7.6 %	0	0.0 %
1-500	6,920	10.2	1,643,734	0.7
501-1,000	5,948	8.8	4,463,775	1.9
1,001-1,500	5,396	8.0	6,722,595	2.9
1,501-2,000	5,024	7.4	8,788,146	3.8
2,001-2,500	4,798	7.1	10,776,742	4.6
2,501-3,000	4,383	6.5	12,029,934	5.2
3,001-3,500	4,001	5.9	13,003,692	5.6
3,501-4,000	3,620	5.3	13,569,397	5.8
4,001-4,500	3,230	4.8	13,715,820	5.9
4,501-5,000	2,911	4.3	13,797,917	5.9
5,001-5,500	2,369	3.5	12,421,555	5.3
5,501-6,000	2,144	3.2	12,314,707	5.3
6,001-6,500	1,838	2.7	11,472,145	4.9
6,501-7,000	1,655	2.4	11,161,513	4.8
7,001-7,500	1,355	2.0	9,806,318	4.2
7,501-8,000	1,108	1.6	8,573,670	3.7
8,001-8,500	912	1.3	7,519,404	3.2
8,501-9,000	782	1.2	6,833,396	2.9
9,001-9,500	654	1.0	6,050,129	2.6
9,501-10,000	557	0.8	5,427,012	2.3
10,001+	2,939	4.3	42,121,993	18.1

Source: Data for this table are from the MAX 2004 file for Louisiana, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004.

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 ^{a, b}
 LOUISIANA, 2004

Total Number of Dual Eligible Beneficiaries, Age 65-74	26,196
Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65-74	\$87,218,594
Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65-74	\$3,330

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 65-74	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	2,600	9.9 %	0	0.0 %
1-500	2,884	11.0	661,421	0.8
501-1,000	2,285	8.7	1,711,385	2.0
1,001-1,500	2,037	7.8	2,533,326	2.9
1,501-2,000	1,912	7.3	3,337,811	3.8
2,001-2,500	1,810	6.9	4,064,328	4.7
2,501-3,000	1,614	6.2	4,427,540	5.1
3,001-3,500	1,488	5.7	4,842,310	5.6
3,501-4,000	1,315	5.0	4,926,967	5.6
4,001-4,500	1,170	4.5	4,971,034	5.7
4,501-5,000	1,068	4.1	5,066,153	5.8
5,001-5,500	821	3.1	4,303,926	4.9
5,501-6,000	771	2.9	4,434,929	5.1
6,001-6,500	643	2.5	4,014,505	4.6
6,501-7,000	585	2.2	3,942,950	4.5
7,001-7,500	483	1.8	3,493,487	4.0
7,501-8,000	393	1.5	3,038,437	3.5
8,001-8,500	317	1.2	2,615,377	3.0
8,501-9,000	286	1.1	2,500,895	2.9
9,001-9,500	233	0.9	2,155,110	2.5
9,501-10,000	224	0.9	2,182,797	2.5
10,001+	1,257	4.8	17,993,906	20.6

Source: Data for this table are from the MAX 2004 file for Louisiana, released by CMS in 02/2008. This table was produced on 03/25/2008.

- 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 2004.
- 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^{a, b}
 LOUISIANA, 2004

Total Number of Dual Eligible Beneficiaries, Age 75-84	24,093
Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 75-84	\$86,718,739
Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 75-84	\$3,599

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 75-84	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	1,629	6.8 %	0	0.0 %
1-500	2,183	9.1	529,502	0.6
501-1,000	1,999	8.3	1,506,141	1.7
1,001-1,500	1,893	7.9	2,358,268	2.7
1,501-2,000	1,811	7.5	3,173,662	3.7
2,001-2,500	1,706	7.1	3,823,050	4.4
2,501-3,000	1,617	6.7	4,443,931	5.1
3,001-3,500	1,418	5.9	4,605,965	5.3
3,501-4,000	1,312	5.4	4,916,719	5.7
4,001-4,500	1,225	5.1	5,199,083	6.0
4,501-5,000	1,070	4.4	5,071,690	5.8
5,001-5,500	880	3.7	4,616,577	5.3
5,501-6,000	817	3.4	4,683,851	5.4
6,001-6,500	701	2.9	4,377,104	5.0
6,501-7,000	616	2.6	4,153,705	4.8
7,001-7,500	497	2.1	3,597,675	4.1
7,501-8,000	451	1.9	3,489,107	4.0
8,001-8,500	352	1.5	2,901,288	3.3
8,501-9,000	296	1.2	2,584,885	3.0
9,001-9,500	258	1.1	2,387,013	2.8
9,501-10,000	214	0.9	2,084,885	2.4
10,001+	1,148	4.8	16,214,638	18.7

Source: Data for this table are from the MAX 2004 file for Louisiana, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004.

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^{a, b}
 LOUISIANA, 2004

Total Number of Dual Eligible Beneficiaries, Age 85+	17,403
Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 85+	\$58,276,261
Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 85+	\$3,349

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 85+	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	919	5.3 %	0	0.0 %
1-500	1,853	10.6	452,811	0.8
501-1,000	1,664	9.6	1,246,249	2.1
1,001-1,500	1,466	8.4	1,831,001	3.1
1,501-2,000	1,301	7.5	2,276,673	3.9
2,001-2,500	1,282	7.4	2,889,364	5.0
2,501-3,000	1,152	6.6	3,158,463	5.4
3,001-3,500	1,095	6.3	3,555,417	6.1
3,501-4,000	993	5.7	3,725,711	6.4
4,001-4,500	835	4.8	3,545,703	6.1
4,501-5,000	773	4.4	3,660,074	6.3
5,001-5,500	668	3.8	3,501,052	6.0
5,501-6,000	556	3.2	3,195,927	5.5
6,001-6,500	494	2.8	3,080,536	5.3
6,501-7,000	454	2.6	3,064,858	5.3
7,001-7,500	375	2.2	2,715,156	4.7
7,501-8,000	264	1.5	2,046,126	3.5
8,001-8,500	243	1.4	2,002,739	3.4
8,501-9,000	200	1.1	1,747,616	3.0
9,001-9,500	163	0.9	1,508,006	2.6
9,501-10,000	119	0.7	1,159,330	2.0
10,001+	534	3.1	7,913,449	13.6

Source: Data for this table are from the MAX 2004 file for Louisiana, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004.

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

APPENDIX TABLE A.3
CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY^{a, b}
DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 2004

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Disabled	Adults	Children	Unknown	All	Aged	Disabled	Adults	Children	Unknown
All	110,889	67,370	43,135	342	9	33	1,213,053	726,916	483,014	2,780	73	270
Age												
5 and younger	11	0	10	0	1	0	112	0	100	0	12	0
6-14	20	0	15	0	5	0	231	0	177	0	54	0
15-20	314	0	312	0	2	0	3,551	0	3,547	0	4	0
21-44	19,374	0	19,111	256	1	6	217,273	0	215,192	2,037	3	41
45-64	23,478	0	23,376	85	0	17	262,162	0	261,270	731	0	161
65-74	26,196	25,875	310	1	0	10	291,877	289,081	2,716	12	0	68
75-84	24,093	24,092	1	0	0	0	261,059	261,047	12	0	0	0
85 and older	17,403	17,403	0	0	0	0	176,788	176,788	0	0	0	0
Unknown	0	0	0	0	0	0		0	0	0	0	0
Gender												
Female	73,292	50,865	22,163	228	3	33	806,208	553,763	250,333	1,806	36	270
Male	37,595	16,505	20,970	114	6	0	406,821	173,153	232,657	974	37	0
Unknown	2	0	2	0	0	0	24	0	24	0	0	0
Race												
White	46,170	28,350	17,652	150	3	15	492,926	295,569	196,088	1,130	20	119
African American	50,543	28,481	21,869	170	6	17	565,193	316,862	246,658	1,481	53	139
Other/unknown	14,176	10,539	3,614	22	0	1	154,934	114,485	40,268	169	0	12
Use of Nursing Facilities^c												
Entire year	17,062	15,335	1,727	0	0	0	174,794	155,930	18,864	0	0	0
Part year	9,382	8,395	986	1	0	0	93,663	83,366	10,285	12	0	0
None	84,445	43,640	40,422	341	9	33	944,596	487,620	453,865	2,768	73	270
Maintenance Assistance Status												
Cash	69,842	39,353	30,277	212	0	0	790,271	449,324	339,135	1,812	0	0
Medically needy	126	77	36	13	0	0	1,101	684	308	109	0	0
Poverty related	2,841	1,087	1,617	97	7	33	29,856	11,753	17,104	680	49	270
Other/unknown	38,080	26,853	11,205	20	2	0	391,825	265,155	126,467	179	24	0
Dual Status^d												
Full dual, all year	106,333	64,920	41,053	318	9	33	1,162,700	699,705	460,132	2,520	73	270
Full dual, part year	4,556	2,450	2,082	24	0	0	50,353	27,211	22,882	260	0	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	110,889	67,370	43,135	342	9	33	1,213,053	726,916	483,014	2,780	73	270
FFS part year, with Rx claims	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
MC all year, with Rx claims	0	0	0	0	0	0		0	0	0	0	0
MC all year, no Rx claims	0	0	0	0	0	0		0	0	0	0	0

Source: Data for this table are from the MAX 2004 file for Louisiana, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004. 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; MC = managed care; Rx = pharmacy benefit.

APPENDIX TABLE A.4
 MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS^a
 DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 2004

Beneficiary Characteristics	Beneficiaries and Benefit Months in Cell F of Table 1		Included in Cell G of Table 1		Excluded from Cell G of Table 1	
	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months
All	110,889	1,213,053	110,889	1,213,053	0	0
Fee-for-service (FFS) all year	110,889	1,213,053	110,889	1,213,053	0	0
FFS part year, with Rx claims	0	0	0	0	0	0
FFS part year, with no Rx claims	0	0	0	0	0	0
Managed care (MC) all year, with Rx claims	0	0	0	0	0	0
MC all year, with no Rx claims	0	0	0	0	0	0

Source: Data for this table are from the MAX 2004 file for Louisiana, released by CMS in 02/2008. This table was produced on 03/25/2008.

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.