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**STATISTICAL COMPENDIUM:
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2005
KANSAS**

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TABLE D.2
CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a, b}
DUAL ELIGIBLE BENEFICIARIES, KANSAS, 2005

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown
All	52,480	28,473	23,702	287	12	6	530,728	277,518	251,123	1,915	125	47
Age												
5 and younger	2	0	2	0	0	0	24	0	24	0	0	0
6-14	13	0	7	0	6	0	129	0	65	0	64	0
15-20	109	0	103	0	6	0	1,176	0	1,115	0	61	0
21-44	10,089	0	9,872	216	0	1	107,686	0	106,227	1,458	0	1
45-64	13,701	2	13,627	69	0	3	143,390	16	142,897	441	0	36
65-74	8,844	8,751	90	1	0	2	88,652	87,847	783	12	0	10
75-84	9,770	9,768	1	1	0	0	96,184	96,168	12	4	0	0
85 and older	9,952	9,952	0	0	0	0	93,487	93,487	0	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	33,376	20,774	12,397	195	4	6	339,171	205,394	132,353	1,329	48	47
Male	19,104	7,699	11,305	92	8	0	191,557	72,124	118,770	586	77	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	42,703	23,379	19,114	197	8	5	431,618	226,240	203,951	1,307	79	41
African American	5,595	2,348	3,189	55	3	0	57,228	23,892	32,943	359	34	0
Other/unknown	4,182	2,746	1,399	35	1	1	41,882	27,386	14,229	249	12	6
Use of Nursing Facilities^c												
Entire year	9,172	8,508	664	0	0	0	92,224	84,923	7,301	0	0	0
Part year	5,096	4,551	545	0	0	0	47,170	41,541	5,629	0	0	0
None	38,212	15,414	22,493	287	12	6	391,334	151,054	238,193	1,915	125	47
Maintenance Assistance Status												
Cash	17,363	6,217	10,926	220	0	0	190,859	69,540	119,835	1,484	0	0
Medically needy	3,964	1,302	2,660	2	0	0	37,323	11,534	25,771	18	0	0
Poverty-related	4,417	1,913	2,445	47	6	6	33,050	13,260	19,389	294	60	47
Other/unknown	26,736	19,041	7,671	18	6	0	269,496	183,184	86,128	119	65	0
Dual Medicare Status^d												
Full dual, all year	47,137	26,082	20,757	280	12	6	486,752	258,650	226,085	1,845	125	47
Full dual, part year	5,343	2,391	2,945	7	0	0	43,976	18,868	25,038	70	0	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	52,317	28,440	23,653	208	10	6	530,032	277,379	250,835	1,662	109	47
FFS part year, with Rx claims	119	12	41	64	2	0	556	55	257	228	16	0
FFS part year, no Rx claims	44	21	8	15	0	0	140	84	31	25	0	0

Source: Data for this table are from the MAX 2005 file for Kansas, released by CMS in 10/2008. This table was produced on 04/23/2009.

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 2005. 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, KANSAS, 2005

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	84.6	53.1	\$3,438	\$65	\$17,685	19.4	52,480
Age							
5 and younger	100.0	143.5	7,915	55	59,633	13.3	2
6-14	84.6	53.5	7,808	146	30,878	25.3	13
15-20	82.6	26.1	3,356	129	18,972	17.7	109
21-44	80.8	35.0	3,463	99	17,215	20.1	10,089
45-64	82.3	54.5	4,273	78	18,788	22.7	13,701
65-74	79.9	54.5	3,106	57	13,118	23.7	8,844
75-84	87.6	62.1	3,249	52	17,269	18.8	9,770
85 and older	93.2	59.7	2,737	46	21,070	13.0	9,952
Unknown	0.0	0.0	0	0	0	0.0	0
Basis of Eligibility^e							
Aged	87.1	58.9	3,026	51	17,322	17.5	28,473
Disabled	81.7	46.5	3,953	85	18,263	21.6	23,702
Adults	80.8	20.2	1,534	76	5,097	30.1	287
Children	100.0	61.7	8,614	140	39,603	21.8	12
Unknown	100.0	31.3	2,866	92	18,120	15.8	6
Gender							
Female	87.9	59.1	3,524	60	17,467	20.2	33,376
Male	79.0	42.7	3,288	77	18,066	18.2	19,104
Unknown	0.0	0.0	0	0	0	0.0	0
Race							
White	85.7	56.1	3,611	64	18,809	19.2	42,703
African American	80.1	41.1	2,821	69	13,920	20.3	5,595
Other/unknown	79.7	38.8	2,499	65	11,248	22.2	4,182
Use of Nursing Facilities^f							
Entire year	98.1	80.7	4,196	52	30,809	13.6	9,172
Part year	97.7	65.9	3,437	52	21,336	16.1	5,096
None	79.7	44.7	3,256	73	14,048	23.2	38,212
Maintenance Assistance Status							
Cash	88.0	46.4	3,293	71	12,596	26.1	17,363
Medically needy	73.7	31.8	3,052	96	7,986	38.2	3,964
Poverty related	27.9	5.8	418	73	1,133	36.9	4,417
Other/unknown	93.4	68.4	4,088	60	25,163	16.2	26,736

Source: Data for this table are from the MAX 2005 file for Kansas, released by CMS in 10/2008. This table was produced on 04/23/2009.

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 eight states (DE, IA, IL, 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 eight states (DE, IA, IL, 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, KANSAS, 2005

Beneficiary Characteristics	Number of Rx, Percentage with:										Number	
	Mean Number of Rx	Mean Rx \$	Rx \$ as a Percentage of All Medicaid	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 \$ ^d	Beneficiaries	Benefit Months
			FFS \$ ^c									
All	5.2	\$340	19.4	15.4	13.0	8.1	23.5	28.1	11.9	\$1,749	52,480	530,728
Age												
5 and younger	12.0	660	13.3	0.0	0.0	0.0	0.0	0.0	100.0	4,969	2	24
6-14	5.4	787	25.3	15.4	7.7	7.7	30.8	30.8	7.7	3,112	13	129
15-20	2.4	311	17.7	17.4	33.9	9.2	28.4	10.1	0.9	1,758	109	1,176
21-44	3.3	325	20.1	19.2	25.2	11.7	24.0	15.4	4.5	1,613	10,089	107,686
45-64	5.2	408	22.7	17.7	13.3	8.3	22.8	25.7	12.2	1,795	13,701	143,390
65-74	5.4	310	23.7	20.1	11.1	7.5	20.8	26.7	13.7	1,309	8,844	88,652
75-84	6.3	330	18.8	12.4	7.9	6.4	22.7	34.5	16.1	1,754	9,770	96,184
85 and older	6.4	291	13.0	6.8	6.9	6.1	27.0	39.6	13.6	2,243	9,952	93,487
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	6.0	311	17.5	12.9	8.5	6.6	23.6	33.9	14.5	1,777	28,473	277,518
Disabled	4.4	373	21.6	18.3	18.2	9.7	23.3	21.4	9.0	1,724	23,702	251,123
Adults	3.0	230	30.1	19.2	29.3	9.1	26.5	12.9	3.1	764	287	1,915
Children	5.9	827	21.8	0.0	25.0	8.3	16.7	33.3	16.7	3,802	12	125
Unknown	4.0	366	15.8	0.0	0.0	50.0	0.0	50.0	0.0	2,313	6	47
Gender												
Female	5.8	347	20.2	12.1	10.9	7.6	24.1	31.3	14.0	1,719	33,376	339,171
Male	4.3	328	18.2	21.0	16.7	8.9	22.5	22.6	8.3	1,802	19,104	191,557
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	5.5	357	19.2	14.3	11.8	7.6	23.3	29.9	13.1	1,861	42,703	431,618
African American	4.0	276	20.3	19.9	18.6	9.6	24.0	20.8	7.1	1,361	5,595	57,228
Other/unknown	3.9	250	22.2	20.3	18.4	10.5	24.8	19.9	6.1	1,123	4,182	41,882
Use of Nursing Facilities ^f												
Entire year	8.0	417	13.6	1.9	3.6	3.8	21.8	44.1	24.7	3,064	9,172	92,224
Part year	7.1	371	16.1	2.3	5.4	6.4	26.4	41.5	18.1	2,305	5,096	47,170
None	4.4	318	23.2	20.3	16.3	9.3	23.5	22.5	8.0	1,372	38,212	391,334
Maintenance Assistance Status												
Cash	4.2	300	26.1	12.0	19.8	11.1	27.2	22.9	7.0	1,146	17,363	190,859
Medically needy	3.4	324	38.2	26.3	19.6	11.4	22.5	16.2	3.9	848	3,964	37,323
Poverty related	0.8	56	36.9	72.1	15.1	4.5	5.4	2.6	0.3	151	4,417	33,050
Other/unknown	6.8	406	16.2	6.6	7.3	6.2	24.2	37.5	18.2	2,496	26,736	269,496

Source: Data for this table are from the MAX 2005 file for Kansas, released by CMS in 10/2008. This table was produced on 04/23/2009.

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 eight states (DE, IA, IL, 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 eight states (DE, IA, IL, 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, KANSAS, 2005

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
All	5.2	\$340	\$65	2.0	\$262	\$128	0.1	\$10	\$70	3.0	\$68	\$22
Age												
5 and younger	12.0	660	55	4.4	483	109	0.8	36	47	6.8	141	21
6-14	5.4	787	146	2.6	665	259	0.2	41	195	2.6	81	31
15-20	2.4	311	129	1.2	272	232	0.1	9	84	1.1	31	27
21-44	3.3	325	99	1.4	261	186	0.1	11	106	1.8	53	30
45-64	5.2	408	78	2.1	315	150	0.1	13	95	3.0	80	27
65-74	5.4	310	57	2.1	238	111	0.1	7	58	3.2	64	20
75-84	6.3	330	52	2.5	252	102	0.2	8	50	3.7	70	19
85 and older	6.4	291	46	2.2	212	96	0.2	9	46	3.9	70	18
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility^d												
Aged	6.0	311	51	2.3	234	103	0.2	8	51	3.6	68	19
Disabled	4.4	373	85	1.8	293	162	0.1	12	99	2.4	68	28
Adults	3.0	230	76	1.1	169	154	0.1	5	76	1.9	57	30
Children	5.9	827	140	2.6	725	284	0.2	18	96	3.2	84	26
Unknown	4.0	366	92	1.5	327	214	0.1	2	12	2.3	37	16
Gender												
Female	5.8	347	60	2.2	264	119	0.2	11	64	3.4	72	21
Male	4.3	328	77	1.7	258	148	0.1	9	88	2.4	61	25
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Race												
White	5.5	357	64	2.1	273	128	0.2	11	70	3.2	73	23
African American	4.0	276	69	1.6	219	137	0.1	7	78	2.3	50	21
Other/unknown	3.9	250	65	1.7	202	119	0.1	6	65	2.1	42	20
Use of Nursing Facilities^e												
Entire year	8.0	417	52	2.9	310	106	0.2	11	51	4.9	96	20
Part year	7.1	371	52	2.6	275	104	0.2	12	60	4.3	85	20
None	4.4	318	73	1.8	249	140	0.1	10	80	2.5	59	24
Maintenance Assistance Status												
Cash	4.2	300	71	1.7	237	137	0.1	9	79	2.4	54	23
Medically needy	3.4	324	96	1.4	265	184	0.1	9	101	1.8	50	27
Poverty related	0.8	56	73	0.3	44	149	0.0	2	85	0.5	10	23
Other/unknown	6.8	406	60	2.6	305	119	0.2	12	64	4.0	88	22

Source: Data for this table are from the MAX 2005 file for Kansas, released by CMS in 10/2008. This table was produced on 04/23/2009.

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 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^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, KANSAS, 2005

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per Rx				Users ^e				
	Patented Brand-Name		Off-Patent Brand-Name		Patented Brand-Name		Off-Patent Brand-Name		Patented Brand-Name		Off-Patent Brand-Name		Total Number of Rx	Total Rx \$	Number	As a Percentage of Dual Benes	Number of Benefit Months
	Total	Generic	Total	Generic	Total	Generic	Total	Generic	Total	Generic	Total	Generic					
Anti-infective Agents	0.4	0.1	0.0	0.2	\$29	\$20	\$3	\$6	\$74	\$193	\$79	\$24	124,595	\$9,242,942	29,563	56.3	324,145
Biologicals	0.8	0.0	0.4	0.4	1,475	0	624	851	1865	0	1,750	1,960	102	190,237	11	0.0	129
Antineoplastic Agents	0.6	0.1	0.0	0.4	83	58	0	25	151	496	132	58	10,079	1,517,999	1,766	3.4	18,251
Endocrine/Metabolic Drugs	1.2	0.4	0.1	0.6	52	41	3	8	45	93	33	13	300,284	13,559,626	24,020	45.8	259,322
Cardiovascular Agents	1.9	0.7	0.0	1.2	68	51	1	16	35	76	27	13	654,572	22,877,354	31,546	60.1	335,887
Respiratory Agents	0.7	0.4	0.0	0.3	49	43	1	5	67	101	59	17	130,315	8,721,782	16,364	31.2	178,887
Gastrointestinal Agents	0.9	0.5	0.0	0.4	82	76	0	6	91	148	42	16	214,157	19,399,093	21,787	41.5	235,580
Genitourinary Agents	0.6	0.4	0.0	0.2	40	34	1	6	65	84	59	27	63,423	4,102,212	9,390	17.9	102,051
CNS Drugs	1.5	0.8	0.0	0.7	152	131	2	20	102	165	132	29	473,123	48,449,554	29,703	56.6	317,979
Stimulants/Anti-obesity/Anorexia	0.7	0.4	0.0	0.3	68	59	1	9	104	164	111	30	7,684	799,022	1,065	2.0	11,728
Miscellaneous Psychological/Neurological Agents	0.9	0.9	0.0	0.0	149	148	0	1	159	160	95	63	48,877	7,752,085	5,032	9.6	52,091
Analgesics and Anesthetics	0.9	0.1	0.0	0.8	53	20	7	26	56	152	163	33	272,567	15,141,991	26,627	50.7	287,879
Neuromuscular Agents	1.1	0.3	0.0	0.8	80	49	2	29	74	158	74	39	212,634	15,632,681	17,744	33.8	194,348
Nutritional Products	0.7	0.0	0.0	0.7	13	0	0	12	18	19	23	18	85,260	1,563,509	11,639	22.2	122,759
Hematological Agents	0.9	0.3	0.0	0.6	60	50	1	9	64	168	29	15	92,459	5,957,237	9,445	18.0	99,472
Topical Products	0.4	0.2	0.0	0.2	18	13	0	5	45	80	46	22	83,451	3,789,577	18,635	35.5	206,255
Miscellaneous Products	0.5	0.2	0.0	0.3	128	106	3	19	247	447	209	71	6,360	1,568,652	1,136	2.2	12,266
Unknown Therapeutic Category	0.4	0.0	0.0	0.0	9	0	0	0	25	0	0	0	6,253	157,126	1,545	2.9	17,324
TOTAL NO. OF RX AND RX \$	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	2,786,195	180,422,679	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for Kansas, released by CMS in 10/2008. This table was produced on 04/23/2009.

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.medspan.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 Kansas, 0.3 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.medspan.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 2005.

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.

Dual Eligible Beneficiaries

TABLE D.7
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, KANSAS, 2005

Top 10 Drug Groups	Users			Among Users			
	Total Medicaid Rx \$	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	\$31,936,044	18,332	34.9	201,044	0.8	\$206	\$159
ULCER DRUGS	15,351,648	22,102	42.1	240,596	0.7	96	64
ANTIDEPRESSANTS	13,761,487	30,699	58.5	331,547	0.7	60	42
ANTICONVULSANT	12,952,613	16,211	30.9	179,232	0.8	88	72
ANTIHYPERLIPIDEMIC	9,337,647	13,830	26.4	154,248	0.7	91	61
ANALGESICS - Narcotic	9,257,818	32,234	61.4	351,011	0.5	50	26
ANTIDIABETIC	8,663,026	17,741	33.8	193,579	0.8	58	45
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	7,782,213	6,634	12.6	69,134	0.7	157	113
ANTIASTHMATIC	6,981,313	19,448	37.1	212,608	0.5	70	33
ANTIHYPERTENSIVE	4,573,388	20,683	39.4	223,898	0.7	29	20
Total	120,597,197	197,914		2,156,897	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for Kansas, released by CMS in 10/2008. This table was produced on 04/23/2009.

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 2005. 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 2005. 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); CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement; n.a. = not applicable.

Dual Eligible Beneficiaries

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, KANSAS, 2005

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 \$ 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 \$ per Benefit Month
All	1,433,327	\$120,597,197	18,332	34.9	201,044	0.8	\$159	22,102	42.1	240,596	0.7	\$64
Female												
All Females	982,391	77,957,917	10,911	32.7	119,338	0.7	140	15,690	47.0	171,225	0.7	64
Female, Disabled												
All Ages	367,433	36,268,888	5,207	42.0	59,742	0.7	162	5,418	43.7	61,977	0.6	64
5 and younger	43	992	0	0.0	0	0.0	0	3	150.0	36	0.7	23
6-14	14	279	0	0.0	0	0.0	0	1	50.0	12	0.3	17
15-20	421	42,246	13	36.1	156	0.5	124	9	25.0	104	0.4	27
21-44	105,103	11,799,536	2,152	46.5	24,714	0.7	157	1,604	34.7	18,495	0.5	55
45-64	260,200	24,303,679	3,030	39.5	34,769	0.7	167	3,763	49.0	43,027	0.6	68
65-74	1,652	122,156	12	21.8	103	0.7	181	38	69.1	303	0.6	65
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
Female, Other Eligibles												
All Ages	614,958	41,689,029	5,704	27.2	59,596	0.8	118	10,272	49.0	109,248	0.7	63
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	50	3,651	2	66.7	24	0.4	40	3	100.0	36	0.6	59
15-20	46	3,007	0	0.0	0	0.0	0	1	100.0	12	0.8	91
21-44	1,948	179,207	44	26.3	376	0.6	133	35	21.0	346	0.3	27
45-64	617	38,339	12	35.3	114	0.2	30	12	35.3	97	0.4	39
65-74	174,262	12,481,083	1,320	23.4	14,470	0.8	143	2,706	48.1	30,252	0.6	67
75-84	220,732	15,134,119	1,985	28.7	21,056	0.8	120	3,493	50.5	37,625	0.7	65
85 and older	217,303	13,849,623	2,341	28.5	23,556	0.7	101	4,022	48.9	40,880	0.8	59
Male												
All Males	450,936	42,639,280	7,421	38.8	81,706	0.8	186	6,412	33.6	69,371	0.7	64
Male, Disabled												
All Ages	259,282	29,024,613	5,265	46.6	60,197	0.8	206	3,238	28.6	36,740	0.6	68
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	27	1,032	0	0.0	0	0.0	0	1	20.0	5	1.0	20
15-20	990	166,749	51	76.1	596	0.6	202	6	9.0	72	0.5	42
21-44	98,649	12,076,912	2,603	49.6	29,829	0.8	196	1,191	22.7	13,647	0.6	64
45-64	158,689	16,707,911	2,598	43.6	29,638	0.9	217	2,028	34.1	22,890	0.7	70
65-74	927	72,009	13	37.1	134	0.9	179	12	34.3	126	0.9	50
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

Dual Eligible Beneficiaries

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, KANSAS, 2005

All Top 10 Drug Groups				ANTIPSYCHOTICS				ULCER DRUGS				
Beneficiary Characteristics	Number of Rx	Rx \$	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean		Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean	
						Number of Rx	Mean \$ per Rx				Number of Rx	Mean \$ per Rx
Male, Other Eligibles												
All Ages	191,654	13,614,667	2,156	27.6	21,509	0.8	129	3,174	40.7	32,631	0.7	61
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	42	2,199	0	0.0	0	0.0	0	3	100.0	28	0.3	10
15-20	57	7,036	2	40.0	24	0.5	32	1	20.0	7	1.0	10
21-44	719	88,607	7	14.0	51	0.4	86	10	20.0	81	0.4	49
45-64	390	26,437	8	20.0	78	0.3	60	6	15.0	37	0.8	56
65-74	74,621	5,613,908	708	22.7	7,573	0.9	165	1,100	35.2	11,939	0.7	63
75-84	74,676	5,186,974	860	30.1	8,547	0.7	122	1,189	41.7	12,275	0.7	60
85 and older	41,149	2,689,506	571	33.1	5,236	0.7	92	865	50.1	8,264	0.7	59
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 2005 file for Kansas, released by CMS in 10/2008. This table was produced on 04/23/2009.

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 2005. 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 2005. 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 benefit; \$ = Medicaid reimbursement.

Dual Eligible Beneficiaries

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, KANSAS, 2005

Beneficiary Characteristics	ANTIDEPRESSANTS					ANTICONVULSANT					ANTIHYPERTENSIVE				
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	30,699	58.5	331,547	0.7	\$42	16,211	30.9	179,232	0.8	\$72	13,830	26.4	154,248	0.7	\$61
Female															
All Females	21,875	65.5	236,948	0.7	42	10,365	31.1	114,483	0.8	67	9,300	27.9	104,060	0.7	60
Female, Disabled															
All Ages	9,383	75.7	106,797	0.6	42	5,822	47.0	66,228	0.8	85	3,466	28.0	39,621	0.6	55
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	16	44.4	192	0.4	21	12	33.3	144	0.4	54	5	13.9	54	0.3	11
21-44	3,268	70.6	37,308	0.6	41	2,250	48.6	25,623	0.8	94	618	13.4	7,103	0.6	51
45-64	6,054	78.9	68,911	0.6	43	3,544	46.2	40,339	0.8	79	2,815	36.7	32,201	0.6	56
65-74	45	81.8	386	0.7	45	16	29.1	122	0.8	50	28	50.9	263	0.7	66
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
Female, Other Eligibles															
All Ages	12,492	59.5	130,151	0.8	41	4,543	21.7	48,255	0.8	43	5,834	27.8	64,439	0.7	63
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	100.0	12	1.3	44	1	100.0	12	0.3	54	0	0.0	0	0.0	0
21-44	108	64.7	900	0.4	34	57	34.1	473	0.7	82	15	9.0	143	0.6	52
45-64	29	85.3	255	0.4	27	14	41.2	82	0.5	44	5	14.7	43	0.5	53
65-74	3,052	54.2	33,515	0.7	39	1,458	25.9	16,221	0.8	50	2,311	41.0	26,188	0.7	61
75-84	4,202	60.8	44,431	0.8	42	1,631	23.6	17,369	0.8	42	2,289	33.1	25,235	0.7	67
85 and older	5,100	62.0	51,038	0.8	42	1,382	16.8	14,098	0.8	35	1,214	14.8	12,830	0.7	61
Male															
All Males	8,824	46.2	94,599	0.7	41	5,846	30.6	64,749	0.9	81	4,530	23.7	50,188	0.7	61
Male, Disabled															
All Ages	5,185	45.9	58,518	0.7	42	4,196	37.1	47,806	0.9	92	2,481	21.9	28,471	0.7	59
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	2	40.0	17	0.4	34
15-20	28	41.8	306	0.6	26	25	37.3	296	0.7	93	2	3.0	24	0.7	91
21-44	2,293	43.7	26,166	0.6	40	1,891	36.1	21,739	0.9	97	732	14.0	8,512	0.7	56
45-64	2,851	47.9	31,911	0.7	44	2,269	38.1	25,666	0.9	88	1,732	29.1	19,777	0.7	61
65-74	13	37.1	135	0.8	50	11	31.4	105	0.9	49	13	37.1	141	0.6	51
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

Dual Eligible Beneficiaries

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, KANSAS, 2005

Beneficiary Characteristics	ANTIDEPRESSANTS					ANTICONVULSANT					ANTIHYPERLIPIDEMIC				
	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
Male, Other Eligibles															
All Ages	3,639	46.7	36,081	0.7	40	1,650	21.2	16,943	0.8	50	2,049	26.3	21,717	0.7	63
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	10	1.4	119	1	33.3	10	0.7	49	1	33.3	12	0.1	6
15-20	0	0.0	0	0.0	0	3	60.0	36	1.0	172	0	0.0	0	0.0	0
21-44	31	62.0	253	0.5	28	12	24.0	108	0.3	43	10	20.0	84	0.8	62
45-64	17	42.5	137	0.5	42	11	27.5	92	0.5	39	8	20.0	53	0.5	52
65-74	1,137	36.4	12,080	0.7	41	671	21.5	7,225	0.9	60	965	30.9	10,586	0.7	63
75-84	1,446	50.7	14,202	0.7	39	639	22.4	6,539	0.8	45	798	28.0	8,462	0.7	65
85 and older	1,007	58.4	9,399	0.8	41	313	18.1	2,933	0.7	34	267	15.5	2,520	0.7	62
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 2005 file for Kansas, released by CMS in 10/2008. This table was produced on 04/23/2009.

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 2005. 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 2005. 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 benefit; \$ = Medicaid reimbursement.

Dual Eligible Beneficiaries

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, KANSAS, 2005

Beneficiary Characteristics	ANALGESICS - Narcotic					ANTIDIABETIC					MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL				
	Number of Users	Users as % of Dual Benes	Number of Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	32,234	61.4	351,011	0.5	\$26	17,741	33.8	193,579	0.8	\$45	6,634	12.6	69,134	0.7	\$113
Female															
All Females	23,488	70.4	256,828	0.5	25	12,272	36.8	134,380	0.8	44	4,748	14.2	49,696	0.7	119
Female, Disabled															
All Ages	10,046	81.0	114,339	0.5	31	4,085	33.0	46,271	0.7	50	704	5.7	8,001	0.5	206
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	0.2	1	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	14	38.9	162	0.2	2	4	11.1	45	1.1	70	2	5.6	24	0.2	7
21-44	3,474	75.0	39,616	0.4	30	857	18.5	9,694	0.6	46	195	4.2	2,229	0.4	199
45-64	6,506	84.8	74,083	0.5	32	3,191	41.6	36,171	0.7	52	503	6.6	5,713	0.5	211
65-74	51	92.7	466	0.4	12	33	60.0	361	0.8	48	4	7.3	35	0.3	35
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
Female, Other Eligibles															
All Ages	13,442	64.1	142,489	0.6	20	8,187	39.0	88,109	0.8	41	4,044	19.3	41,695	0.8	102
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	100.0	12	0.8	5	1	100.0	12	0.7	57	0	0.0	0	0.0	0
21-44	130	77.8	1,156	0.5	19	21	12.6	224	0.6	35	4	2.4	32	0.3	170
45-64	46	135.3	430	0.5	13	15	44.1	141	0.5	40	4	11.8	48	0.3	65
65-74	3,893	69.1	43,355	0.5	20	2,933	52.1	32,725	0.8	45	533	9.5	5,693	0.7	89
75-84	4,487	64.9	48,536	0.6	19	3,085	44.6	33,288	0.8	40	1,538	22.2	15,939	0.8	104
85 and older	4,885	59.4	49,000	0.6	22	2,132	25.9	21,719	0.8	37	1,965	23.9	19,983	0.8	105
Male															
All Males	8,746	45.8	94,183	0.5	30	5,469	28.6	59,199	0.8	46	1,886	9.9	19,438	0.7	97
Male, Disabled															
All Ages	5,054	44.7	56,397	0.5	36	2,548	22.5	28,911	0.7	50	479	4.2	5,377	0.5	97
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	13	19.4	156	0.1	1	1	1.5	12	0.9	44	0	0.0	0	0.0	0
21-44	2,111	40.3	24,007	0.4	31	663	12.6	7,619	0.7	47	158	3.0	1,811	0.3	72
45-64	2,913	48.9	32,082	0.5	40	1,866	31.3	21,094	0.7	52	319	5.4	3,542	0.6	110
65-74	17	48.6	152	0.6	34	18	51.4	186	0.8	56	2	5.7	24	0.3	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

Dual Eligible Beneficiaries

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, KANSAS, 2005

Beneficiary Characteristics	ANALGESICS - Narcotic										ANTIDIABETIC					MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL			
	Number of Users	Users as % of Dual Benes	Number of Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month				
Male, Other Eligibles																			
All Ages	3,692	47.3	37,786	0.5	20	2,921	37.5	30,288	0.8	42	1,407	18.0	14,061	0.8	97				
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	2	66.7	22	0.1	1	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	54	108.0	476	0.6	104	7	14.0	60	1.1	140	2	4.0	24	0.5	126				
45-64	26	65.0	208	0.7	24	4	10.0	12	1.0	36	1	2.5	3	0.3	48				
65-74	1,393	44.6	15,171	0.5	19	1,214	38.9	13,152	0.8	46	325	10.4	3,469	0.7	95				
75-84	1,354	47.5	13,782	0.5	20	1,200	42.1	12,421	0.8	40	610	21.4	6,097	0.8	95				
85 and older	863	50.0	8,127	0.5	15	496	28.8	4,643	0.8	34	469	27.2	4,468	0.8	101				
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 2005 file for Kansas, released by CMS in 10/2008. This table was produced on 04/23/2009.

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 2005. 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 2005. 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 benefit; \$ = Medicaid reimbursement.

Dual Eligible Beneficiaries

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, KANSAS, 2005

Beneficiary Characteristics	ANTIASTHMATIC					ANTIHYPERTENSIVE					Number of Beneficiaries	Number of Benefit Months
	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	19,448	37.1	212,608	0.5	\$33	20,683	39.4	223,898	0.7	\$20	52,480	530,728
Female												
All Females	13,600	40.7	149,899	0.5	32	14,391	43.1	156,059	0.7	21	33,376	339,171
Female, Disabled												
All Ages	5,516	44.5	63,136	0.4	30	3,637	29.3	41,197	0.6	19	12,397	132,353
5 and younger	1	50.0	12	0.1	4	3	150.0	36	0.5	3	2	24
6-14	0	0.0	0	0.0	0	2	100.0	24	0.4	3	2	24
15-20	8	22.2	93	0.5	31	3	8.3	34	0.4	40	36	394
21-44	1,647	35.6	18,901	0.3	23	645	13.9	7,336	0.6	15	4,629	49,990
45-64	3,826	49.9	43,802	0.4	33	2,948	38.4	33,440	0.6	20	7,672	81,441
65-74	34	61.8	328	0.4	34	36	65.5	327	0.6	24	55	468
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Female, Other Eligibles												
All Ages	8,084	38.5	86,763	0.5	34	10,754	51.3	114,862	0.7	22	20,979	206,818
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
6-14	0	0.0	0	0.0	0	2	66.7	24	0.9	23	3	36
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12
21-44	30	18.0	259	0.3	19	19	11.4	157	0.4	14	167	1,147
45-64	5	14.7	56	0.3	31	9	26.5	106	0.5	20	34	235
65-74	2,601	46.2	29,004	0.5	37	3,082	54.7	34,270	0.7	22	5,631	57,630
75-84	2,695	39.0	29,292	0.5	35	3,724	53.8	40,385	0.7	23	6,916	69,386
85 and older	2,753	33.5	28,152	0.5	29	3,918	47.6	39,920	0.8	22	8,227	78,372
Male												
All Males	5,848	30.6	62,709	0.5	34	6,292	32.9	67,839	0.7	18	19,104	191,557
Male, Disabled												
All Ages	2,671	23.6	30,021	0.4	34	2,764	24.4	31,174	0.7	18	11,305	118,770
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
6-14	0	0.0	0	0.0	0	2	40.0	24	0.7	15	5	41
15-20	13	19.4	152	0.4	23	11	16.4	124	0.6	10	67	721
21-44	911	17.4	10,552	0.4	29	801	15.3	9,131	0.6	18	5,243	56,237
45-64	1,739	29.2	19,246	0.5	36	1,936	32.5	21,763	0.7	18	5,955	61,456
65-74	8	22.9	71	1.2	76	14	40.0	132	0.6	9	35	315
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

Dual Eligible Beneficiaries

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, KANSAS, 2005

Beneficiary Characteristics	ANTIASTHMATIC					ANTIHYPERTENSIVE					Number of Beneficiaries	Number of Benefit Months
	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		
Male, Other Eligibles												
All Ages	3,177	40.7	32,688	0.5	35	3,528	45.2	36,665	0.7	19	7,799	72,787
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
6-14	1	33.3	12	0.1	2	2	66.7	16	0.5	8	3	28
15-20	0	0.0	0	0.0	0	1	20.0	6	0.2	1	5	49
21-44	15	30.0	144	0.2	13	7	14.0	64	0.5	6	50	312
45-64	6	15.0	29	0.4	32	8	20.0	66	0.5	17	40	258
65-74	1,197	38.3	13,162	0.6	39	1,355	43.4	14,746	0.7	20	3,123	30,239
75-84	1,188	41.6	11,954	0.5	33	1,450	50.8	14,941	0.7	18	2,853	26,786
85 and older	770	44.6	7,387	0.5	32	705	40.9	6,826	0.7	18	1,725	15,115
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 2005 file for Kansas, released by CMS in 10/2008. This table was produced on 04/23/2009.

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 2005. 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 2005. 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.

Dual Eligible Beneficiaries

TABLE D.8
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BENEFICIARY CHARACTERISTIC^{a, b}
 DUAL ELIGIBLE BENEFICIARIES, KANSAS, 2005

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	\$417	8.0	9,172	92,224
Age				
0-64	657	9.2	657	7,245
65-74	525	9.1	1,042	10,892
75-84	452	8.6	2,780	27,906
85 and older	334	7.2	4,693	46,181
Unknown	0	0.0	0	0
Gender				
Female	405	8.0	6,782	68,982
Male	454	8.0	2,390	23,242
Unknown	0	0.0	0	0
Race				
White	416	8.1	8,382	84,287
African American	443	7.6	413	4,254
Other/unknown	424	7.7	377	3,683
Basis of Eligibility^c				
Aged	397	7.9	8,508	84,923
Disabled	653	9.2	664	7,301
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 2005 file for Kansas, released by CMS in 10/2008. This table was produced on 04/23/2009.

a. Table D.8 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their 2005 Medicaid enrollment. A total of 5,096 beneficiaries who were in nursing facilities for part of their enrollment and their 47,170 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.

Dual Eligible Beneficiaries

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, KANSAS, 2005

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per Rx				Users				
	Patented Brand-	Off- Patent Brand-			Patented Brand-	Off- Patent Brand-			Patented Brand-	Off- Patent Brand-			Total Number of Rx	Total Rx \$	Number of Users	As a Percentage of Dual All-Year Nursing Facility Residents	Number of Benefit Months
	Total	Name	Name	Generic	Total	Name	Name	Generic	Total	Name	Name	Generic					
Anti-infective Agents	0.4	0.1	0.0	0.3	\$16	\$8	\$3	\$5	\$41	\$80	\$78	\$20	27,829	\$1,132,690	6,760	73.7	71,261
Biologicals	0.0	0.0	0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0.0	0
Antineoplastic Agents	0.6	0.1	0.0	0.5	67	33	1	33	106	343	164	63	2,972	315,529	479	5.2	4,714
Endocrine/Metabolic Drugs	1.4	0.5	0.1	0.8	51	37	4	9	37	80	32	12	73,008	2,671,065	5,047	55.0	52,489
Cardiovascular Agents	2.3	0.6	0.0	1.7	61	39	1	21	26	66	22	12	174,768	4,584,000	7,343	80.1	75,226
Respiratory Agents	0.8	0.4	0.0	0.4	43	37	0	6	56	92	50	17	27,820	1,561,374	3,425	37.3	36,013
Gastrointestinal Agents	1.1	0.5	0.0	0.6	76	67	0	9	67	127	26	15	57,629	3,842,596	4,849	52.9	50,503
Genitourinary Agents	0.7	0.5	0.0	0.3	46	38	1	8	62	81	61	29	21,054	1,313,294	2,688	29.3	28,652
CNS Drugs	1.8	1.0	0.0	0.8	152	130	0	21	85	129	51	28	127,724	10,869,406	6,952	75.8	71,539
Stimulants/Anti-obesity/Anorexia	0.8	0.2	0.0	0.6	46	36	0	10	56	167	24	16	1,381	77,960	164	1.8	1,706
Miscellaneous Psychological/ Neurological Agents	1.1	1.1	0.0	0.0	156	156	0	0	138	138	0	32	25,850	3,568,057	2,198	24.0	22,866
Analgesics and Anesthetics	1.1	0.2	0.1	0.9	49	18	6	24	43	96	107	28	59,376	2,570,165	5,149	56.1	52,980
Neuromuscular Agents	1.3	0.3	0.0	1.0	75	35	1	39	56	114	50	38	47,738	2,666,287	3,379	36.8	35,525
Nutritional Products	0.9	0.0	0.0	0.9	15	0	0	15	17	16	23	17	31,999	543,299	3,510	38.3	36,230
Hematological Agents	1.3	0.3	0.0	0.9	65	52	1	12	51	152	26	13	32,132	1,632,469	2,468	26.9	25,062
Topical Products	0.5	0.2	0.0	0.3	20	13	1	6	39	73	44	20	26,279	1,037,499	4,914	53.6	52,877
Miscellaneous Products	0.3	0.1	0.0	0.2	19	11	3	5	66	164	131	26	929	61,383	301	3.3	3,247
Unknown Therapeutic Category	0.4	0.0	0.0	0.0	7	0	0	0	18	0	0	0	1,928	34,140	424	4.6	4,665
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.	740,416	38,481,213	n.a.	n.a.	n.a.

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, KANSAS, 2005

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 per	Number of Rx per Benefit Month	\$ per Rx	Rx \$ per Benefit Month
ANTIPSYCHOTICS	\$6,651,364	4,374	47.7	46,425	0.9	\$160	\$143
ANTIDEPRESSANTS	3,818,526	7,366	80.3	76,645	0.9	56	50
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	3,570,083	2,813	30.7	29,317	0.9	138	122
ULCER DRUGS	3,250,421	4,831	52.7	50,685	0.8	77	64
ANTICONVULSANT	1,758,231	2,942	32.1	31,367	1.0	57	56
ANTIDIABETIC	1,603,594	3,386	36.9	35,607	1.0	47	45
ANALGESICS - Narcotic	1,526,627	5,508	60.1	56,518	0.7	38	27
ANTIHYPERLIPIDEMIC	1,335,821	1,755	19.1	18,813	0.8	84	71
ANTIASTHMATIC	1,322,930	3,860	42.1	40,581	0.6	59	33
ANTIHYPERTENSIVE	983,256	4,231	46.1	44,038	0.9	25	22
Total	25,820,853	41,066		429,996	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for Kansas, released by CMS in 10/2008. This table was produced on 04/23/2009.

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 2005. A total of 5,096 beneficiaries who were in nursing facilities for part of their enrollment and their 47,170 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 2005. 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 2005 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.

Dual Eligible Beneficiaries

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, KANSAS, 2005

All Top 10 Drug Groups				ANTIPSYCHOTICS				ANTIDEPRESSANTS				
Beneficiary Characteristics	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	360,609	\$25,820,853	4,374	47.7	46,425	0.9	\$143	7,366	80.3	76,645	0.9	\$50
Female												
All Females	265,089	18,481,239	3,078	45.4	32,949	0.9	135	5,510	81.2	57,776	0.9	50
Female, Disabled												
All Ages	18,034	1,633,216	217	67.6	2,421	1.1	222	324	100.9	3,595	1.0	63
64 or younger	17,958	1,629,225	217	68.0	2,421	1.1	221	321	100.6	3,565	1.0	63
65-74	76	3,991	0	0.0	0	0.0	0	3	150.0	30	1.0	56
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
Female, Other Eligibles												
All Ages	247,055	16,848,023	2,861	44.3	30,528	0.9	128	5,186	80.3	54,181	0.9	49
64 or younger	87	5,067	1	100.0	12	0.2	5	1	100.0	12	0.9	67
65-74	33,643	2,482,306	433	69.7	4,787	1.0	165	618	99.5	6,551	0.9	52
75-84	87,808	6,184,644	1,019	52.9	11,009	0.9	132	1,754	91.1	18,537	0.9	51
85 and older	125,517	8,176,006	1,408	36.0	14,720	0.8	113	2,813	71.9	29,081	0.9	47
Male												
All Males	95,520	7,339,614	1,296	54.2	13,476	0.9	164	1,856	77.7	18,869	0.9	49
Male, Disabled												
All Ages	19,403	1,939,978	274	79.9	3,173	1.2	253	313	91.3	3,551	0.9	57
64 or younger	19,179	1,930,280	273	81.0	3,161	1.2	254	310	92.0	3,526	0.9	57
65-74	224	9,698	1	16.7	12	1.0	7	3	50.0	25	1.0	62
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
Male, Other Eligibles												
All Ages	76,117	5,399,636	1,022	49.9	10,303	0.8	136	1,543	75.4	15,318	0.9	48
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	20,169	1,594,732	301	72.9	3,223	0.9	170	345	83.5	3,659	0.9	54
75-84	33,099	2,307,421	412	48.2	4,137	0.8	133	667	78.1	6,658	0.9	46
85 and older	22,849	1,497,483	309	39.6	2,943	0.8	104	531	68.1	5,001	0.9	45
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 2005 file for Kansas, released by CMS in 10/2008. This table was produced on 04/23/2009.

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 2005. A total of 5,096 beneficiaries who were in nursing facilities for part of their enrollment and their 47,170 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 2005. 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 2005 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, KANSAS, 2005

Beneficiary Characteristics	MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL					ULCER DRUGS					ANTICONVULSANT				
	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	2,813	30.7	29,317	0.9	\$122	4,831	52.7	50,685	0.8	\$64	2,942	32.1	31,367	1.0	\$56
Female															
All Females	2,095	30.9	21,945	0.9	122	3,595	53.0	37,942	0.8	63	1,994	29.4	21,400	1.0	51
Female, Disabled															
All Ages	56	17.4	580	0.9	327	194	60.4	2,172	0.8	62	247	76.9	2,762	1.2	87
64 or younger	56	17.6	580	0.9	327	194	60.8	2,172	0.8	62	247	77.4	2,762	1.2	87
65-74	0	0.0	0	0.0	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	0.0	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
Female, Other Eligibles															
All Ages	2,039	31.6	21,365	0.9	116	3,401	52.6	35,770	0.8	63	1,747	27.0	18,638	0.9	46
64 or younger	1	100.0	12	0.1	11	1	100.0	12	0.8	59	1	100.0	12	1.0	34
65-74	185	29.8	1,885	0.8	111	345	55.6	3,755	0.8	71	349	56.2	3,829	1.0	60
75-84	747	38.8	7,824	0.9	117	1,049	54.5	11,177	0.8	67	663	34.4	7,102	1.0	46
85 and older	1,106	28.3	11,644	0.9	117	2,006	51.3	20,826	0.8	60	734	18.8	7,695	0.9	39
Male															
All Males	718	30.0	7,372	0.9	122	1,236	51.7	12,743	0.8	67	948	39.7	9,967	1.0	66
Male, Disabled															
All Ages	51	14.9	560	0.8	241	186	54.2	2,108	0.9	79	278	81.0	3,165	1.2	93
64 or younger	51	15.1	560	0.8	241	183	54.3	2,072	0.9	80	277	82.2	3,164	1.2	93
65-74	0	0.0	0	0.0	0	3	50.0	36	0.9	28	1	16.7	1	2.0	14
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
Male, Other Eligibles															
All Ages	667	32.6	6,812	0.9	112	1,050	51.3	10,635	0.8	65	670	32.7	6,802	0.9	54
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	126	30.5	1,379	0.9	111	223	54.0	2,346	0.8	62	215	52.1	2,254	1.0	66
75-84	302	35.4	3,097	0.9	112	408	47.8	4,213	0.8	67	286	33.5	2,939	0.9	53
85 and older	239	30.6	2,336	0.9	112	419	53.7	4,076	0.9	65	169	21.7	1,609	0.8	38
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 2005 file for Kansas, released by CMS in 10/2008. This table was produced on 04/23/2009.

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 2005. A total of 5,096 beneficiaries who were in nursing facilities for part of their enrollment and their 47,170 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 2005. 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 2005 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^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, KANSAS, 2005

Beneficiary Characteristics	ANTIDIABETIC					ANALGESICS - Narcotic					ANTIHYPERLIPIDEMIC				
	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	3,386	36.9	35,607	1.0	\$45	5,508	60.1	56,518	0.7	\$27	1,755	19.1	18,813	0.8	\$71
Female															
All Females	2,431	35.8	25,813	1.0	44	4,279	63.1	44,272	0.7	28	1,221	18.0	13,233	0.8	70
Female, Disabled															
All Ages	130	40.5	1,477	1.1	63	190	59.2	2,159	1.0	36	86	26.8	971	0.9	73
64 or younger	129	40.4	1,465	1.1	63	190	59.6	2,159	1.0	36	86	27.0	971	0.9	73
65-74	1	50.0	12	1.8	75	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	0.0	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
Female, Other Eligibles															
All Ages	2,301	35.6	24,336	0.9	43	4,089	63.3	42,113	0.7	28	1,135	17.6	12,262	0.8	70
64 or younger	1	100.0	12	1.4	74	3	300.0	36	0.4	25	0	0.0	0	0.0	0
65-74	376	60.5	4,092	1.0	47	420	67.6	4,416	0.8	24	198	31.9	2,192	0.9	73
75-84	901	46.8	9,558	1.0	44	1,274	66.1	13,491	0.8	30	506	26.3	5,464	0.9	73
85 and older	1,023	26.1	10,674	0.9	40	2,392	61.1	24,170	0.7	27	431	11.0	4,606	0.8	65
Male															
All Males	955	40.0	9,794	1.0	48	1,229	51.4	12,246	0.6	22	534	22.3	5,580	0.9	73
Male, Disabled															
All Ages	131	38.2	1,454	1.2	66	173	50.4	1,936	0.7	38	91	26.5	1,043	0.9	73
64 or younger	125	37.1	1,393	1.1	65	170	50.4	1,911	0.7	38	90	26.7	1,031	0.9	73
65-74	6	100.0	61	1.4	90	3	50.0	25	0.8	14	1	16.7	12	0.8	55
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
Male, Other Eligibles															
All Ages	824	40.3	8,340	1.0	45	1,056	51.6	10,310	0.6	20	443	21.6	4,537	0.9	73
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	225	54.5	2,483	0.9	49	205	49.6	2,162	0.7	25	119	28.8	1,239	0.9	74
75-84	361	42.3	3,659	1.0	46	449	52.6	4,429	0.6	20	213	24.9	2,234	0.9	76
85 and older	238	30.5	2,198	0.9	38	402	51.5	3,719	0.6	16	111	14.2	1,064	0.8	66
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 2005 file for Kansas, released by CMS in 10/2008. This table was produced on 04/23/2009.

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 2005. A total of 5,096 beneficiaries who were in nursing facilities for part of their enrollment and their 47,170 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 2005. 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 2005 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^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, KANSAS, 2005

Beneficiary Characteristics	ANTIASTHMATIC						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 \$	All-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents
All	3,860	42.1	40,581	0.6	\$33	4,231	46.1	44,038	0.9	\$22	9,172	92,224
Female												
All Females	2,733	40.3	29,081	0.5	32	3,118	46.0	32,672	0.9	23	6,782	68,982
Female, Disabled												
All Ages	108	33.6	1,241	0.5	30	101	31.5	1,138	0.9	27	321	3,490
64 or younger	108	33.9	1,241	0.5	30	100	31.3	1,126	0.9	27	319	3,472
65-74	0	0.0	0	0.0	0	1	50.0	12	1.1	8	2	18
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
Female, Other Eligibles												
All Ages	2,625	40.6	27,840	0.5	32	3,017	46.7	31,534	0.9	23	6,461	65,492
64 or younger	0	0.0	0	0.0	0	4	400.0	48	0.5	25	1	12
65-74	281	45.2	3,013	0.6	37	310	49.9	3,321	0.9	21	621	6,551
75-84	877	45.5	9,430	0.6	36	939	48.8	10,019	0.9	23	1,926	19,754
85 and older	1,467	37.5	15,397	0.5	28	1,764	45.1	18,146	0.9	23	3,913	39,175
Male												
All Males	1,127	47.2	11,500	0.6	35	1,113	46.6	11,366	0.9	21	2,390	23,242
Male, Disabled												
All Ages	118	34.4	1,343	0.8	47	129	37.6	1,469	0.9	22	343	3,811
64 or younger	118	35.0	1,343	0.8	47	126	37.4	1,433	0.9	23	337	3,761
65-74	0	0.0	0	0.0	0	3	50.0	36	1.0	15	6	50
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
Male, Other Eligibles												
All Ages	1,009	49.3	10,157	0.6	34	984	48.1	9,897	0.8	21	2,047	19,431
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	203	49.2	2,235	0.7	35	222	53.8	2,396	0.9	25	413	4,273
75-84	434	50.8	4,287	0.7	35	459	53.7	4,629	0.8	20	854	8,152
85 and older	372	47.7	3,635	0.5	31	303	38.8	2,872	0.8	18	780	7,006
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 2005 file for Kansas, released by CMS in 10/2008. This table was produced on 04/23/2009.

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 2005. A total of 5,096 beneficiaries who were in nursing facilities for part of their enrollment and their 47,170 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 2005. 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 2005 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispans.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}
KANSAS, 2005

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	27,537	52.5	5.6	296,457	\$79	\$4,150,849	\$14	2.3	52,480
Age									
5 and younger	2	100.0	12.0	24	433	865	36	5.5	2
6-14	8	61.5	7.5	98	222	2,884	29	2.8	13
15-20	35	32.1	3.0	329	72	7,885	24	2.2	109
21-44	3,797	37.6	3.2	32,229	59	593,882	18	1.7	10,089
45-64	6,735	49.2	5.1	69,326	83	1,136,579	16	1.9	13,701
65-74	4,225	47.8	5.0	44,430	68	604,716	14	2.2	8,844
75-84	5,801	59.4	6.8	66,248	85	830,353	13	2.6	9,770
85 and older	6,934	69.7	8.4	83,773	98	973,685	12	3.6	9,952
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Basis of Eligibility^c									
Aged	16,918	59.4	6.8	194,005	84	2,403,331	12	2.8	28,473
Disabled	10,529	44.4	4.3	101,911	73	1,737,752	17	1.9	23,702
Adults	80	27.9	1.3	368	18	5,159	14	1.2	287
Children	7	58.3	13.4	161	372	4,465	28	4.3	12
Unknown	3	50.0	2.0	12	24	142	12	0.8	6
Gender									
Female	19,302	57.8	6.4	214,719	89	2,976,890	14	2.5	33,376
Male	8,235	43.1	4.3	81,738	61	1,173,959	14	1.9	19,104
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Race									
White	23,586	55.2	6.2	263,932	87	3,695,061	14	2.4	42,703
African American	2,266	40.5	3.5	19,328	50	282,312	15	1.8	5,595
Other/unknown	1,685	40.3	3.2	13,197	41	173,476	13	1.7	4,182
Use of Nursing Facilities^d									
Entire year	7,164	78.1	11.0	101,348	135	1,235,015	12	3.2	9,172
Part year	4,019	78.9	7.7	39,268	97	493,120	13	2.8	5,096
None	16,354	42.8	4.1	155,841	63	2,422,714	16	1.9	38,212
Maintenance Assistance Status									
Cash	7,611	43.8	3.9	67,029	56	970,992	14	1.7	17,363
Medically needy	1,353	34.1	2.4	9,370	40	158,619	17	1.3	3,964
Poverty related	445	10.1	0.4	1,755	5	24,224	14	1.3	4,417
Other/unknown	18,128	67.8	8.2	218,303	112	2,997,014	14	2.7	26,736

Source: Data for this table are from the MAX 2005 file for Kansas, released by CMS in 10/2008. This table was produced on 04/23/2009.

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 2005.

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}
KANSAS, 2005

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	0.6	\$8	\$14	\$0	\$2	530,728
Age						
5 and younger	1.0	36	36	0	0	24
6-14	0.8	22	29	0	0	129
15-20	0.3	7	24	0	2	1,176
21-44	0.3	6	18	0	2	107,686
45-64	0.5	8	16	0	3	143,390
65-74	0.5	7	14	0	2	88,652
75-84	0.7	9	13	0	1	96,184
85 and older	0.9	10	12	0	1	93,487
Unknown	0.0	0	0	0	0	0
Basis of Eligibility^c						
Aged	0.7	9	12	0	2	277,518
Disabled	0.4	7	17	0	2	251,123
Adults	0.2	3	14	0	1	1,915
Children	1.3	36	28	0	7	125
Unknown	0.3	3	12	0	0	47
Gender						
Female	0.6	9	14	0	2	339,171
Male	0.4	6	14	0	2	191,557
Unknown	0.0	0	0	0	0	0
Race						
White	0.6	9	14	0	2	431,618
African American	0.3	5	15	0	1	57,228
Other/unknown	0.3	4	13	0	1	41,882
Use of Nursing Facilities^d						
Entire year	1.1	13	12	0	2	92,224
Part year	0.8	10	13	0	2	47,170
None	0.4	6	16	0	2	391,334
Maintenance Assistance Status						
Cash	0.4	5	14	0	2	190,859
Medically needy	0.3	4	17	0	2	37,323
Poverty related	0.1	1	14	0	0	33,050
Other/unknown	0.8	11	14	0	2	269,496

Source: Data for this table are from the MAX 2005 file for Kansas, released by CMS in 10/2008. This table was produced on 04/23/2009.

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 2005.

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}
KANSAS, 2005

Drug Category	Number of Users	Rx \$ per User	Total Rx \$	Rx \$ as a Percentage of All Part D		\$ per Rx	Number Rx as a Percentage of All Part D	
				Excluded Rx \$	Total Number Rx.		Excluded Rx	
All	40,877	\$102	\$4,150,849	100.0	296,457	\$14	100.0	
Anorexia or weight loss/gain	11	344	3,781	0.1	37	102	0.0	
Fertility drugs	0	0	0	0.0	0	0	0.0	
Drugs for cosmetic purposes	5	10	49	0.0	6	8	0.0	
Cough and cold medications	145	81	11,740	0.3	390	30	0.1	
Vitamins and minerals	11,478	132	1,517,183	36.6	84,578	18	28.5	
Non-prescription drugs	16,446	77	1,261,415	30.4	126,915	10	42.8	
Barbiturates	521	74	38,584	0.9	5,814	7	2.0	
Benzodiazepines	11,300	91	1,033,620	24.9	74,521	14	25.1	
Other Part D Excl Rx Drugs	971	293	284,477	6.9	4,196	68	1.4	

Source: Data for this table are from the MAX 2005 file for Kansas, released by CMS in 10/2008. This table was produced on 04/23/2009.

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 2005. A user is a beneficiary who had at least one prescription filled for a Part D excluded drug in 2005. 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.

Dual Eligible Beneficiaries

SUPPLEMENTAL TABLE 1
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES^{a, b}
 KANSAS, 2005

Total Number of Dual Eligible Beneficiaries: 52,480
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries: \$180,422,679
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary: \$3,437

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	8,061	15.4	\$0	0.0
1-500	7,618	14.5	1,519,378	0.8
501-1,000	4,335	8.3	3,202,324	1.8
1,001-1,500	3,525	6.7	4,388,285	2.4
1,501-2,000	3,110	5.9	5,428,283	3.0
2,001-2,500	2,797	5.3	6,285,610	3.5
2,501-3,000	2,429	4.6	6,673,563	3.7
3,001-3,500	2,258	4.3	7,315,445	4.1
3,501-4,000	1,970	3.8	7,386,377	4.1
4,001-4,500	1,837	3.5	7,803,674	4.3
4,501-5,000	1,657	3.2	7,865,687	4.4
5,001-5,500	1,482	2.8	7,782,584	4.3
5,501-6,000	1,328	2.5	7,634,676	4.2
6,001-6,500	1,193	2.3	7,456,804	4.1
6,501-7,000	1,088	2.1	7,337,959	4.1
7,001-7,500	880	1.7	6,391,504	3.5
7,501-8,000	786	1.5	6,092,110	3.4
8,001-8,500	693	1.3	5,714,644	3.2
8,501-9,000	591	1.1	5,169,610	2.9
9,001-9,500	539	1.0	4,984,270	2.8
9,501-10,000	481	0.9	4,693,627	2.6
10,001+	3,822	7.3	59,296,265	32.9

Source: Data for this table are from the MAX 2005 file for Kansas, released by CMS in 10/2008. This table was produced on 04/23/2009.

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 2005.

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}
 KANSAS, 2005

Total Number of Disabled Dual Eligible Beneficiaries, Age < 65: 23,611
 Total Pharmacy Reimbursement for Disabled Dual Eligible Beneficiaries, Age < 65: \$93,403,493
 Mean Pharmacy Reimbursement per Disabled Dual Eligible Beneficiary, Age < 65: \$3,955

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Disabled Dual Beneficiaries,		Percent of Total Pharmacy Reimbursement
		Age < 65	Pharmacy Reimbursement	
\$0	4,337	18.4	0	0.0
1-500	3,719	15.8	678,848	0.7
501-1,000	1,724	7.3	1,261,294	1.4
1,001-1,500	1,330	5.6	1,655,895	1.8
1,501-2,000	1,130	4.8	1,970,217	2.1
2,001-2,500	1,048	4.4	2,352,083	2.5
2,501-3,000	870	3.7	2,382,391	2.6
3,001-3,500	817	3.5	2,650,375	2.8
3,501-4,000	709	3.0	2,663,143	2.9
4,001-4,500	674	2.9	2,859,574	3.1
4,501-5,000	638	2.7	3,025,445	3.2
5,001-5,500	560	2.4	2,946,090	3.2
5,501-6,000	515	2.2	2,960,618	3.2
6,001-6,500	476	2.0	2,982,063	3.2
6,501-7,000	447	1.9	3,016,092	3.2
7,001-7,500	409	1.7	2,971,916	3.2
7,501-8,000	388	1.6	3,007,056	3.2
8,001-8,500	327	1.4	2,694,843	2.9
8,501-9,000	285	1.2	2,492,211	2.7
9,001-9,500	276	1.2	2,553,520	2.7
9,501-10,000	257	1.1	2,509,523	2.7
10,001+	2,675	11.3	43,770,296	46.9

Source: Data for this table are from the MAX 2005 file for Kansas, released by CMS in 10/2008. This table was produced on 04/23/2009.

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 2005.

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}
 KANSAS, 2005

Total Number of Dual Eligible Beneficiaries, Age 65+: 28,566
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65+: \$86,450,801
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65+: \$3,026

Annual Pharmacy Reimbursement per Beneficiary	Percent of Dual Beneficiaries, Age 65		Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
	Number of Beneficiaries	+		
\$0	3,671	12.9	0	0.0
1-500	3,795	13.3	823,429	1.0
501-1,000	2,577	9.0	1,918,549	2.2
1,001-1,500	2,167	7.6	2,697,370	3.1
1,501-2,000	1,968	6.9	3,436,641	4.0
2,001-2,500	1,743	6.1	3,920,728	4.5
2,501-3,000	1,552	5.4	4,271,786	4.9
3,001-3,500	1,436	5.0	4,648,394	5.4
3,501-4,000	1,254	4.4	4,696,873	5.4
4,001-4,500	1,156	4.0	4,914,300	5.7
4,501-5,000	1,016	3.6	4,826,328	5.6
5,001-5,500	917	3.2	4,810,627	5.6
5,501-6,000	809	2.8	4,651,364	5.4
6,001-6,500	714	2.5	4,456,081	5.2
6,501-7,000	636	2.2	4,288,105	5.0
7,001-7,500	466	1.6	3,382,496	3.9
7,501-8,000	398	1.4	3,085,054	3.6
8,001-8,500	366	1.3	3,019,801	3.5
8,501-9,000	303	1.1	2,651,329	3.1
9,001-9,500	262	0.9	2,421,737	2.8
9,501-10,000	222	0.8	2,164,623	2.5
10,001+	1,138	4.0	15,365,186	17.8

Source: Data for this table are from the MAX 2005 file for Kansas, released by CMS in 10/2008. This table was produced on 04/23/2009.

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 2005.

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}
 KANSAS, 2005

Total Number of Dual Eligible Beneficiaries, Age 65-74: 8,844
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65-74: \$27,467,601
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65-74: \$3,105

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age		Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
		65-74			
\$0	1,778	20.1		0	0.0
1-500	1,136	12.8		229,633	0.8
501-1,000	677	7.7		507,142	1.8
1,001-1,500	551	6.2		686,649	2.5
1,501-2,000	521	5.9		915,188	3.3
2,001-2,500	449	5.1		1,009,531	3.7
2,501-3,000	395	4.5		1,089,607	4.0
3,001-3,500	359	4.1		1,162,268	4.2
3,501-4,000	344	3.9		1,286,060	4.7
4,001-4,500	292	3.3		1,241,637	4.5
4,501-5,000	261	3.0		1,240,127	4.5
5,001-5,500	246	2.8		1,289,453	4.7
5,501-6,000	237	2.7		1,367,274	5.0
6,001-6,500	204	2.3		1,272,847	4.6
6,501-7,000	206	2.3		1,389,089	5.1
7,001-7,500	161	1.8		1,169,473	4.3
7,501-8,000	131	1.5		1,014,849	3.7
8,001-8,500	116	1.3		957,412	3.5
8,501-9,000	98	1.1		858,564	3.1
9,001-9,500	95	1.1		874,533	3.2
9,501-10,000	89	1.0		868,481	3.2
10,001+	498	5.6		7,037,784	25.6

Source: Data for this table are from the MAX 2005 file for Kansas, released by CMS in 10/2008. This table was produced on 04/23/2009.

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 2005.

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}
 KANSAS, 2005

Total Number of Dual Eligible Beneficiaries, Age 75-84: 9,770
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 75-84: \$31,741,900
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 75-84: \$3,248

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 75-84	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	1,215	12.4	0	0.0
1-500	1,146	11.7	245,808	0.8
501-1,000	810	8.3	607,167	1.9
1,001-1,500	713	7.3	886,377	2.8
1,501-2,000	634	6.5	1,105,110	3.5
2,001-2,500	601	6.2	1,352,253	4.3
2,501-3,000	518	5.3	1,427,610	4.5
3,001-3,500	491	5.0	1,586,462	5.0
3,501-4,000	413	4.2	1,548,718	4.9
4,001-4,500	440	4.5	1,873,507	5.9
4,501-5,000	378	3.9	1,798,702	5.7
5,001-5,500	365	3.7	1,912,027	6.0
5,501-6,000	312	3.2	1,790,157	5.6
6,001-6,500	271	2.8	1,689,812	5.3
6,501-7,000	238	2.4	1,603,514	5.1
7,001-7,500	169	1.7	1,227,888	3.9
7,501-8,000	156	1.6	1,209,289	3.8
8,001-8,500	148	1.5	1,220,886	3.8
8,501-9,000	112	1.1	981,374	3.1
9,001-9,500	107	1.1	991,451	3.1
9,501-10,000	83	0.8	808,445	2.5
10,001+	450	4.6	5,875,343	18.5

Source: Data for this table are from the MAX 2005 file for Kansas, released by CMS in 10/2008. This table was produced on 04/23/2009.

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 2005.

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}
 KANSAS, 2005

Total Number of Dual Eligible Beneficiaries, Age 85+: 9,952
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 85+: \$27,241,300
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 85+: \$2,737

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 85		Percent of Total Pharmacy Reimbursement
			+ Pharmacy Reimbursement	
\$0	678	6.8	0	0.0
1-500	1,513	15.2	347,988	1.3
501-1,000	1,090	11.0	804,240	3.0
1,001-1,500	903	9.1	1,124,344	4.1
1,501-2,000	813	8.2	1,416,343	5.2
2,001-2,500	693	7.0	1,558,944	5.7
2,501-3,000	639	6.4	1,754,569	6.4
3,001-3,500	586	5.9	1,899,664	7.0
3,501-4,000	497	5.0	1,862,095	6.8
4,001-4,500	424	4.3	1,799,156	6.6
4,501-5,000	377	3.8	1,787,499	6.6
5,001-5,500	306	3.1	1,609,147	5.9
5,501-6,000	260	2.6	1,493,933	5.5
6,001-6,500	239	2.4	1,493,422	5.5
6,501-7,000	192	1.9	1,295,502	4.8
7,001-7,500	136	1.4	985,135	3.6
7,501-8,000	111	1.1	860,916	3.2
8,001-8,500	102	1.0	841,503	3.1
8,501-9,000	93	0.9	811,391	3.0
9,001-9,500	60	0.6	555,753	2.0
9,501-10,000	50	0.5	487,697	1.8
10,001+	190	1.9	2,452,059	9.0

Source: Data for this table are from the MAX 2005 file for Kansas, released by CMS in 10/2008. This table was produced on 04/23/2009.

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 2005.

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, KANSAS, 2005

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Blind/ Disabled	Adults	Children	Other/ Unknown	All	Aged	Blind/ Disabled	Adults	Children	Other/ Unknown
All	52,674	28,585	23,732	339	12	6	538,703	281,237	254,349	2,940	130	47
Age												
5 and younger	2	0	2	0	0	0	24	0	24	0	0	0
6-14	13	0	7	0	6	0	131	0	65	0	66	0
15-20	109	0	103	0	6	0	1,180	0	1,116	0	64	0
21-44	10,125	0	9,872	252	0	1	109,399	0	107,166	2,232	0	1
45-64	13,747	2	13,657	85	0	3	145,927	16	145,183	692	0	36
65-74	8,879	8,786	90	1	0	2	90,441	89,636	783	12	0	10
75-84	9,815	9,813	1	1	0	0	97,494	97,478	12	4	0	0
85 and older	9,984	9,984	0	0	0	0	94,107	94,107	0	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	33,512	20,857	12,418	227	4	6	343,873	207,844	133,986	1,948	48	47
Male	19,162	7,728	11,314	112	8	0	194,830	73,393	120,363	992	82	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	42,842	23,459	19,135	235	8	5	437,626	229,078	206,379	2,046	82	41
African American	5,630	2,365	3,197	65	3	0	58,470	24,365	33,507	562	36	0
Other/unknown	4,202	2,761	1,400	39	1	1	42,607	27,794	14,463	332	12	6
Use of Nursing Facilities^c												
Entire year	9,172	8,508	664	0	0	0	92,224	84,923	7,301	0	0	0
Part year	5,096	4,551	545	0	0	0	47,228	41,585	5,643	0	0	0
None	38,406	15,526	22,523	339	12	6	399,251	154,729	241,405	2,940	130	47
Maintenance Assistance Status												
Cash	17,431	6,234	10,931	266	0	0	192,229	69,775	120,042	2,412	0	0
Medically needy	3,964	1,302	2,660	2	0	0	37,456	11,563	25,875	18	0	0
Poverty related	4,422	1,915	2,446	49	6	6	37,751	15,419	21,898	324	63	47
Other/unknown	26,857	19,134	7,695	22	6	0	271,267	184,480	86,534	186	67	0
Dual Status^d												
Full dual, all year	47,331	26,194	20,787	332	12	6	489,675	260,033	226,602	2,863	130	47
Full dual, part year	5,343	2,391	2,945	7	0	0	49,028	21,204	27,747	77	0	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	52,317	28,440	23,653	208	10	6	534,978	279,671	253,482	1,669	109	47
FFS part year, with Rx claims	119	12	41	64	2	0	1,250	136	455	638	21	0
FFS part year, no Rx claims	44	21	8	15	0	0	438	211	88	139	0	0
MC all year, with Rx claims	1	0	0	1	0	0	2	0	0	2	0	0
MC all year, no Rx claims	193	112	30	51	0	0	2,035	1,219	324	492	0	0

Source: Data for this table are from the MAX 2005 file for Kansas, released by CMS in 10/2008. This table was produced on 04/23/2009.

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 2005. 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, KANSAS, 2005

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	52,674	538,703	52,480	530,728	0	7,975
Fee-for-service (FFS) all year	52,317	534,978	52,317	530,032	0	4,946
FFS part year, with Rx claims	119	1,250	119	556	0	694
FFS part year, with no Rx claims	44	438	44	140	0	298
Managed care (MC) all year, with Rx claims	1	2	0	0	0	2
MC all year, with no Rx claims	193	2,035	0	0	0	2,035

Source: Data for this table are from the MAX 2005 file for Kansas, released by CMS in 10/2008. This table was produced on 04/23/2009.

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.

Dual Eligible Beneficiaries