

STATISTICAL COMPENDIUM: MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2005 MISSOURI

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TABLE D.2

CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a, b}
DUAL ELIGIBLE BENEFICIARIES, MISSOURI, 2005

		N	umber of B			ES, MISSOU	711, 2005	Num	nber of Ber	efit Mont	hs	
Beneficiary						Other/						Other/
Characteristics	All	Aged	Disabled	Adults	Children	Unknown	All	Aged	Disabled	Adults	Children	Unknown
AII	179,618	90,711	87,399	1,441	41	26	1,865,121	923,171	929,898	11,396	377	279
Age												
5 and younger	3	0	2	0	1	0	34	0	23	0	11	0
6-14	18	0	10	0	8	0	202	0	113	0	89	0
15-20	300	0	272	9	19	0	3,155	0	2,936	54	165	0
21-44	32,850	0	31,776	1,066	6	2	352,357	0	343,721	8,560	53	23
45-64	54,327	0	53,985	323	4	15	572,895	0	570,184	2,507	31	173
65-74	36,207	35,253	906	37	2	9	373,537	365,246	7,960	232	16	83
75-84	32,390	32,107	277	6	0	0	333,018	329,803	3,172	43	0	0
85 and older	23,523	23,351	171	0	1	0	229,923	228,122	1,789	0	12	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	111,148	65,403	44,827	876	16	26	1,165,490	676,313	481,957	6,777	164	279
Male	68,470	25,308	42,572	565	25	0	699,631	246,858	447,941	4,619	213	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	141,968	72,503	68,379	1,038	30	18	1,470,672	734,437	727,137	8,633	282	183
African American	31,802	14,749	16,688	346	11	8	334,648	153,386	178,711	2,360	95	96
Other/unknown	5,848	3,459	2,332	57	0	0	59,801	35,348	24,050	403	0	0
Use of Nursing Facilities ^c												
Entire year	20,884	18,509	2,374	0	1	0	216,275	189,570	26,693	0	12	0
Part year	13,884	11,685	2,199	0	0	0	133,872	110,082	23,790	0	0	0
None	144,850	60,517	82,826	1,441	40	26	1,514,974	623,519	879,415	11,396	365	279
Maintenance Assistance Status	s											
Cash	39,378	15,614	22,475	1,271	18	0	446,449	178,633	257,622	10,046	148	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0
Poverty-related	4,272	1,431	2,699	110	6	26	44,739	14,992	28,554	846	68	279
Other/unknown	135,968	73,666	62,225	60	17	0	1,373,933	729,546	643,722	504	161	0
Dual Medicare Status ^d												
Full dual, all year	173,061	88,046	83,527	1,421	41	26	1,793,278	894,709	886,719	11,194	377	279
Full dual, part year	6,557	2,665	3,872	20	0	0	71,843	28,462	43,179	202	0	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	178,731	90,661	86,793	1,219	32	26	1,860,201	922,884	926,201	10,505	332	279
FFS part year, with Rx claims	720	38	521	153	8	0	4,321	244	3,344	691	42	0
FFS part year, no Rx claims	167	12	85	69	1	0	599	43	353	200	3	0

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 elicibility 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, MISSOURI, 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	90.3	59.9	\$4,047	\$68	\$12,983	31.2	179,618
Age							
5 and younger	100.0	61.0	8,068	132	18,565	43.5	3
6-14	100.0	83.1	15,432	186	41,380	37.3	18
15-20	83.0	28.4	3,636	128	13,017	27.9	300
21-44	88.2	44.9	4,430	99	12,013	36.9	32,850
45-64	91.9	67.2	5,092	76	12,601	40.4	54,327
65-74	87.9	60.5	3,496	58	9,915	35.3	36,207
75-84	90.5	62.8	3,357	53	13,875	24.2	32,390
85 and older	93.4	59.5	2,887	49	18,689	15.4	23,523
Unknown	0.0	0.0	0	0	0	0.0	0
Basis of Eligibility	_/ e						
Aged	90.3	61.2	3,297	54	13,596	24.2	90,711
Disabled	90.6	59.1	4,856	82	12,488	38.9	87,399
Adults	78.6	25.6	1,854	73	4,039	45.9	1,441
Children	82.9	46.5	9,382	202	19,872	47.2	41
Unknown	100.0	56.8	11,027	194	23,928	46.1	26
Gender							
Female	92.8	65.6	4,077	62	13,414	30.4	111,148
Male	86.4	50.6	3,997	79	12,283	32.5	68,470
Unknown	0.0	0.0	0	0	0	0.0	0
Race							
White	91.3	63.6	4,291	67	13,527	31.7	141,968
African American	86.5	45.5	3,144	69	11,317	27.8	31,802
Other/unknown	86.9	47.6	3,029	64	8,826	34.3	5,848
Use of Nursing Fa	cilities ^f						
Entire year	97.7	84.1	4,850	58	31,876	15.2	20,884
Part year	96.7	68.2	3,954	58	21,050	18.8	13,884
None	88.7	55.6	3,940	71	9,486	41.5	144,850
Maintenance Assi	stance Status						
Cash	91.8	62.0	4,324	70	10,677	40.5	39,378
Medically needy	0.0	0.0	0	0	0	0.0	0
Poverty related	67.1	20.4	1,347	66	2,568	52.4	4,272
Other/unknown	90.7	60.5	4,051	67	13,978	29.0	135,968

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

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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, MISSOURI, 2005

			<u>-</u>		Num	ber of Rx, P	ercentage wi	ith:			Numb	er
Beneficiary Characteristics	Mean Number of Rx	Mean Rx \$	Rx \$ as a Percentage of All Medicaid FFS \$ ^c	None		More than 1, but 2 or Less	More than 2, but 5 or Less	More than 5, but 10 or Less	More than 10		Beneficiaries	Benefit Months
All	5.8	\$390	31.2	9.7	11.9	8.2	25.8	31.0	13.5	\$1,250	179,618	1,865,121
Age												
5 and younger	5.4	712	43.5	0.0	0.0	0.0	33.3	66.7	0.0	1,638	3	34
6-14	7.4	1,375	37.3	0.0	11.1	0.0	22.2	44.4	22.2	3,687	18	202
15-20	2.7	346	27.9	17.0	33.3	14.3	22.0	10.0	3.3	1,238	300	3,155
21-44	4.2	413	36.9	11.8	22.2	11.2	25.9	21.4	7.5	1,120	32,850	352,357
45-64	6.4	483	40.4	8.1	10.4	7.7	24.5	32.1	17.2	1,195	54,327	572,895
65-74	5.9	339	35.3	12.1	10.7	7.9	24.9	30.5	14.0	961	36,207	373,537
75-84	6.1	327	24.2	9.5	8.5	7.0	26.2	34.8	14.0	1,350	32,390	333,018
85 and older	6.1	295	15.4	6.6	6.9	7.3	29.8	37.4	11.9	1,912	23,523	229,923
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	324	24.2	9.7	9.0	7.4	26.6	33.8	13.5	1,336	90,711	923,171
Disabled	5.6	456	38.9	9.4	14.7	9.0	25.1	28.3	13.6	1,174	87,399	929,898
Adults	3.2	234	45.9	21.4	24.4	11.1	24.4	15.2	3.5	511	1,441	11,396
Children	5.1	1,020	47.2	17.1	12.2	9.8	19.5	34.1	7.3	2,161	41	377
Unknown	5.3	1,028	46.1	0.0	7.7	7.7	46.2	26.9	11.5	2,230	26	279
Gender												
Female	6.3	389	30.4	7.2	9.6	7.8	26.2	33.9	15.3	1,279	111,148	1,165,490
Male	5.0	391	32.5	13.6	15.6	8.9	25.2	26.2	10.4	1,202	68,470	699,631
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	6.1	414	31.7	8.7	10.5	7.6	25.3	32.7	15.2	1,306	141,968	1,470,672
African American	4.3	299	27.8	13.5	17.5	10.3	27.9	24.3	6.6	1,076	31,802	334,648
Other/unknown	4.7	296	34.3	13.1	15.5	10.7	27.1	25.6	8.0	863	5,848	59,801
Use of Nursing Fa	icilities ^f											
Entire year	8.1	468	15.2	2.3	2.7	4.0	22.2	44.1	24.7	3,078	20,884	216,275
Part year	7.1	410	18.8	3.3	5.4	6.3	27.4	39.9	17.8	2,183	13,884	133,872
None	5.3	377	41.5	11.3	13.8	9.0	26.2	28.2	11.4	907	144,850	1,514,974
Maintenance Assi	stance Status	i										
Cash	5.5	381	40.5	8.2	14.4	8.9	26.1	29.4	13.0	942	39,378	446,449
Medically needy	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Poverty related	2.0	129	52.4	32.9	28.9	11.5	17.3	7.6	1.8	245	4,272	44,739
Other/unknown	6.0	401	29.0	9.3	10.6	7.9	26.0	32.2	14.0	1,383	135,968	1,373,933

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 have been considered.

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, MISSOURI, 2005

		All Rx		Patente		I-Name	Off-Pater		id-Name	Gon	eric Dı	niac
5		All KX			Drugs			Drugs			enc Di	ugs
Beneficiary Characteristics	Number of Rx	Rx\$	\$ per Rx	Number of Rx	Rx\$	\$ per Rx	Number of Rx	Rx\$	\$ per Rx	Number of Rx	Rx\$	\$ per Rx
All	5.8	\$390	\$68	2.1	\$283	\$136	0.3	\$22	\$84	3.4	\$84	\$25
Age												
5 and younger	5.4	712	132	2.4	482	198	0.1	3	38	2.9	226	79
6-14	7.4	1,375	186	3.2	1,072	334	0.3	29	89	3.9	274	71
15-20	2.7	346	128	1.2	297	246	0.1	12	89	1.3	36	27
21-44	4.2	413	99	1.6	318	201	0.2	23	124	2.4	71	30
45-64	6.4	483	76	2.3	350	150	0.3	30	109	3.8	103	27
65-74	5.9	339	58	2.1	241	114	0.3	18	70	3.5	80	23
75-84	6.1	327	53	2.2	233	106	0.3	16	56	3.6	77	21
85 and older	6.1	295	49	2.0	203	102	0.3	17	52	3.7	75	20
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	(
Basis of Eligibility	rd											
Aged	6.0	324	54	2.1	229	108	0.3	17	60	3.6	78	22
Disabled	5.6	456	82	2.1	338	165	0.2	27	112	3.3	91	28
Adults	3.2	234	73	1.0	161	154	0.1	19	134	2.0	54	26
Children	5.1	1,020	202	2.4	899	377	0.2	24	98	2.4	98	40
Unknown	5.3	1,028	194	2.1	783	365	0.3	110	322	2.8	96	35
Gender												
Female	6.3	389	62	2.2	278	125	0.3	22	77	3.7	88	24
Male	5.0	391	79	1.8	292	159	0.2	22	101	2.9	77	27
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	(
Race												
White	6.1	414	67	2.2	299	135	0.3	25	85	3.6	90	25
African American	4.3	299	69	1.6	226	145	0.2	13	80	2.6	60	23
Other/unknown	4.7	296	64	1.7	217	125	0.2	15	78	2.7	64	24
Use of Nursing Fa	cilitiese											
Entire year	8.1	468	58	2.9	338	118	0.4	24	61	4.8	106	22
Part year	7.1	410	58	2.4	291	120	0.3	23	71	4.3	95	22
None	5.3	377	71	1.9	275	142	0.2	22	91	3.1	80	26
Maintenance Assi	stance Sta	tus										
Cash	5.5	381	70	2.0	284	142	0.2	18	80	3.2	79	24
Medically needy	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	(
Poverty related	2.0	129	66	0.7	92	139	0.1	8	98	1.2	28	24
Other/unknown	6.0	401	67	2.1	289	135	0.3	24	85	3.5	88	25

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-80a9-4a87-8bc9ad778d7b6615 (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 hidness. 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, MISSOURI, 2005

		nber of R Ionth Am			\$ per	Benefit N		nong		\$ per	·Rx			_		Userse	
Therapeutic Category	F Total	Patented Brand- Name	Brand-	Generic		Patented Brand- Name	Brand-	3eneric	P Total	atented Brand- Name	Brand-	Generic	Total Number of Rx	Total Rx \$	Number	As a Percentage of Dual Benes	Number of Benefit Months
Anti-infective Agents	0.4	0.1	0.0	0.2	\$38	\$28	\$3	\$6	\$99	\$250	\$82	\$28	461,551	\$45,771,507	108,819	60.6	1,200,002
Biologicals	0.1	0.1	0.0	0.0	27	2	11	14	248	25	1,868	477	6,126	1,518,572	4,963	2.8	57,161
Antineoplastic Agents	0.6	0.1	0.0	0.4	116	90	2	23	197	619	307	54	41,637	8,204,450	6,758	3.8	70,977
Endocrine/Metabolic Drugs	1.1	0.4	0.2	0.5	63	46	7	10	57	110	44	19	1,057,965	60,042,545	87,997	49.0	960,675
Cardiovascular Agents	2.1	0.7	0.0	1.3	85	59	1	25	41	82	24	19	2,708,608	111,131,303	120,441	67.1	1,302,337
Respiratory Agents	0.8	0.5	0.0	0.3	59	51	3	6	70	106	67	19	750,768	52,681,288	80,556	44.8	889,513
Gastrointestinal Agents	0.7	0.2	0.0	0.6	41	30	0	10	55	194	48	17	610,348	33,324,713	74,532	41.5	820,656
Genitourinary Agents	0.6	0.4	0.0	0.1	44	39	1	5	77	92	79	33	191,183	14,797,467	30,341	16.9	336,223
CNS Drugs	1.6	0.7	0.0	0.8	146	123	1	23	94	173	84	27	1,820,362	171,754,195	107,972	60.1	1,172,548
Stimulants/Anti-obesity/Anorexia	0.7	0.4	0.0	0.3	87	70	1	16	127	191	70	53	4,465	568,740	594	0.3	6,531
Miscellaneous Psychological/ Neurological Agents Analgesics and Anesthetics	0.9	0.9 0.1	0.0 0.1	0.0 0.7	162 61	161 23	0 16	0 21	175 67	177 161	192 236		151,962 1,055,502	26,587,547 70,449,736	15,522 105,143	8.6 58.5	164,535 1,148,770
Neuromuscular Agents	1.0	0.3	0.1	0.7	85	51	4	29	84	171	86	44	739,276	62,031,432	66,639	37.1	733,947
Nutritional Products	0.7	0.0	0.0	0.6	13	0	1	12	19	24	21	19	342,775	6,612,656	46,990	26.2	510,214
Hematological Agents	0.9	0.3	0.1	0.5	73	61	3	9	83	187	33	20	410,378	34,094,965	42,853	23.9	464,164
Topical Products	0.4	0.2	0.0	0.2	25	18	1	6	57	94	57	26	351,984	20,208,014	72,677	40.5	809,741
Miscellaneous Products	0.4	0.2	0.0	0.2	98	75	9	13	228	417	267	62	27,605	6,289,010	5,928	3.3	64,203
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	10	0	0	0	30	0	0	0	25,494	761,031	6,874	3.8	76,723
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.	10,757,989	726,829,171	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for Missouri, released by CMS in 1/2009. This table was produced on 04/23/2009.

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.

a. Table D.6 includes the beneficiaries represented by Cell G of Table 1. A beneficiary who used drugs from two or more categories was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

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

d. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In Missouri, 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.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615 (October 26, 2007).

e. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 2005.

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

			Users		An	nong Use	rs
Top 10 Drug Groups	Total Medicaid Rx \$	Number of Users	As a Percentage of Dual Beneficiaries	Number of Benefit Months		\$ per Rx	Rx \$ per Benefit Month
ANTIPSYCHOTICS	\$102,014,489	57,280	31.9	636,977	0.7	\$219	\$160
ANTIDEPRESSANTS	54,037,866	117,095	65.2	1,286,421	0.7	63	42
ANTICONVULSANT	50,733,816	55,176	30.7	610,846	0.8	105	83
ANTIHYPERLIPIDEMIC	43,883,987	66,815	37.2	743,820	0.7	88	59
ANALGESICS - Narcotic	41,616,937	137,574	76.6	1,517,141	0.4	61	27
ANTIDIABETIC	37,728,549	71,147	39.6	779,462	0.7	66	48
ANTIASTHMATIC MISC PSYCHOTHERAPEUTIC AND	36,691,285	85,306	47.5	941,456	0.5	80	39
NEUROLOGICAL	26,579,545	19,368	10.8	205,932	0.7	175	129
ANTIVIRAL	24,557,459	11,275	6.3	125,642	0.4	461	195
ANTIHYPERTENSIVE	23,847,845	88,544	49.3	970,025	0.7	35	25
Total	441,691,778	709,580		7,817,722	n.a.	n.a.	n.a.

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.medispan. com/marketing/ContentPage.aspx?contentId=09e011ed-80a9-4a87-8bc9-ad778d7b6615 (October 26, 2007).

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

⁼ Medicaid reimbursement; n.a. = not applicable.

TABLE D.7A MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS COMBINED AND FIRST AND SECOND GROUPS SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c} DUAL ELIGIBLE BENEFICIARIES, MISSOURI, 2005

All Top 10 Drug Groups ANTIPSYCHOTICS ANTIDEPRESSANTS

Beneficiary Characteristics	Number of Rx	Rx \$	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	of Rx	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	of Rx	Mean Rx \$ per Benefit Month
All	4,907,010	\$441,691,778	57,280	31.9	636,977	0.7	\$160	117,095	65.2	1,286,421	0.7	\$42
Female												
All Females	3,189,007	263,057,714	33,124	29.8	367,382	0.7	139	80,113	72.1	882,975	0.7	42
Female, Disabled												
All Ages	1,435,880	141,803,051	18,698	41.7	212,971	0.7	161	42,634	95.1	477,198	0.6	44
5 and younger	10	3,634	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	157	20,355	1	20.0	12	0.6	59	1	20.0	12	1.4	123
15-20	1,604	206,937	43	41.0	509	0.6	147	64	61.0	747	0.5	39
21-44	371,006	43,032,804	7,621	52.4	86,760	0.7	158	13,383	92.0	150,593	0.6	43
45-64	1,043,830	97,190,900	10,904	37.2	124,311	0.7	164	28,794	98.1	321,802	0.7	45
65-74	12,205	893,779	85	16.9	868	0.7	166	263	52.4	2,578	0.7	37
75-84	4,616	295,152	27	14.3	314	0.6	91	84	44.4	969	0.6	35
85 and older	2,452	159,490	17	12.5	197	0.6	73	45	33.1	497	0.7	42
Female, Other Eligibles												
All Ages	1,753,127	121,254,663	14,426	21.8	154,411	0.7	110	37,479	56.5	405,777	0.7	40
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	20	6,662	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	155	17,188	2	11.8	24	1.4	297	2	11.8	13	1.0	72
21-44	9,001	860,895	185	25.7	1,802	0.4	82	479	66.4	4,688	0.5	38
45-64	2,286	191,976	27	18.5	243	0.5	72	94	64.4	864	0.6	40
65-74	663,705	47,152,323	3,990	17.6	44,557	0.7	132	12,628	55.8	141,723	0.7	39
75-84	645,595	44,248,985	5,132	21.9	55,457	0.7	111	12,858	55.0	140,248	0.7	40
85 and older	432,365	28,776,634	5,090	26.2	52,328	0.6	90	11,418	58.8	118,241	0.7	41
Male												
All Males	1,718,003	178,634,064	24,156	35.3	269,595	0.8	189	36,982	54.0	403,446	0.7	41
Male, Disabled												
All Ages	1,147,444	137,582,358	18,863	44.3	214,772	0.8	206	26,368	61.9	291,845	0.6	43
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	107	16,427	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	1,550	209,300	60	35.9	691	0.6	161	55	32.9	625	0.6	35
21-44	394,275	56,712,010	9,374	54.4	107,322	0.8	203	10,726	62.3	120,702	0.6	42
45-64	740,790	79,863,411	9,347	37.9	105,903	0.9	210	15,405	62.5	168,792	0.7	43
65-74	8,463	629,050	65	16.1	653	0.8	124	146	36.1	1,333	0.7	40
75-84	1,614	114,198	13	14.8	155	0.8	141	24	27.3	274	0.6	42
85 and older	645	37,962	4	11.4	48	0.6	67	12	34.3	119	0.5	20

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, MISSOURI, 2005

All Top 10 Drug Groups ANTIPSYCHOTICS ANTIDEPRESSANTS

Beneficiary Characteristics	Number of Rx	Rx \$	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	of Rx	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	of Rx	Mean Rx \$ per Benefit Month
Male, Other Eligibles												
All Ages	570,559	41,051,706	5,293	20.4	54,823	0.7	121	10,614	41.0	111,601	0.7	38
5 and younger	10	4,547	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	32	9,166	0	0.0	0	0.0	0	2	66.7	24	0.6	6
15-20	163	28,008	3	27.3	29	1.3	296	7	63.6	70	0.6	39
21-44	4,687	459,169	52	14.7	523	0.4	102	191	54.1	1,958	0.5	39
45-64	2,929	245,118	28	14.3	282	0.5	144	103	52.6	1,003	0.5	38
65-74	292,818	21,633,643	2,132	16.8	23,145	0.8	147	4,646	36.7	50,850	0.7	37
75-84	193,204	13,488,839	1,993	22.9	20,440	0.7	107	3,645	41.8	38,032	0.7	39
85 and older	76,716	5,183,216	1,085	27.6	10,404	0.6	90	2,020	51.3	19,664	0.7	38
Unknown	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

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

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

TABLE D.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, MISSOURI, 2005

		ANTIC	CONVULSA	NT			ANTIH	YPERLIPIDE	MIC			ANALG	ESICS - Nar	cotic	
Beneficiary Characteristics	Number of Users	Users as % of Dual	Number of Benefit N Months Among Users	Mean Number of Rx per F Benefit Month		Number of Users	Users as % of Dual Benes	Number of Benefit N Months Among Users	Mean Number of Rx per Benefit Month		Number of Users		Number of Benefit N Months Among Users	Mean Number of Rx per Benefit Month	
All	55,176	30.7	610,846	0.8	\$83	66,815	37.2	743,820	0.7	\$59	137,574	76.6	1,517,141	0.4	\$27
Female															
All Females	33,873	30.5	375,607	0.8	79	42,582	38.3	477,748	0.7	59	92,570	83.3	1,028,197	0.4	25
Female, Disabled															
All Ages	21,070	47.0	236,861	0.8	95	17,304	38.6	193,977	0.6	56	46,919	104.7	526,557	0.4	29
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	100.0	23	0.1	1
6-14	2	40.0	24	1.5	266	0	0.0	0	0.0	0	2	40.0	24	0.6	6
15-20	43	41.0	500	0.7	106	1	1.0	10	0.3	22	71	67.6	831	0.2	3
21-44	7,662	52.7	86,395	0.8	105	2,702	18.6	30,626	0.6	49	14,373	98.8	162,219	0.4	25
45-64	13,203	45.0	148,315	0.8	89	14,245	48.6	159,596	0.6	57	31,933	108.8	357,885	0.5	31
65-74	111	22.1	1,069	0.7	60	247	49.2	2,464	0.7	61	369	73.5	3,613	0.4	18
75-84	38	20.1	437	0.7	48	82	43.4	964	0.8	74	109	57.7	1,262	0.4	10
85 and older	11	8.1	121	1.0	68	27	19.9	317	0.7	65	60	44.1	700	0.3	18
Female, Other Eligibles															
All Ages	12,803	19.3	138,746	0.8	53	25,278	38.1	283,771	0.7	61	45,651	68.8	501,640	0.5	21
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	C
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	40.0	24	0.1	1
15-20	1	5.9	12	2.1	422	1	5.9	12	0.8	66	5	29.4	35	0.1	1
21-44	221	30.7	2,177	0.6	72	46	6.4	459	0.5	39	626	86.8	6,252	0.4	23
45-64	36	24.7	344	0.5	41	35	24.0	311	0.5	39	128	87.7	1,202	0.4	35
65-74	4,971	22.0	55,593	0.7	61	11,992	53.0	135,694	0.7	61	17,596	77.8	198,362	0.4	21
75-84	4,738	20.3	51,494	0.8	49	9,624	41.1	108,165	0.7	62	15,978	68.3	177,352	0.5	20
85 and older	2,836	14.6	29,126	0.8	42	3,580	18.4	39,130	0.7	59	11,316	58.3	118,413	0.5	21
Male															
All Males	21,303	31.1	235,239	0.8	89	24,233	35.4	266,072	0.7	60	45,004	65.7	488,944	0.5	33
Male, Disabled															
All Ages	16,492	38.7	184,012	0.8	98	14,923	35.1	164,201	0.7	58	31,346	73.6	343,261	0.5	39
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	C
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	20.0	12	0.1	1
15-20	46	27.5	525	0.7	86	6	3.6	71	0.3	15	78	46.7	910	0.2	11
21-44	7,117	41.3	80,397	0.8	106	3,668	21.3	41,634	0.6	51	11,389	66.1	127,335	0.4	35
45-64	9,213	37.4	101,931	0.8	92	11,040	44.8	120,540	0.7	60	19,589	79.5	212,308	0.5	42
65-74	99	24.5	964	0.9	88	172	42.6	1,551	0.8	71	242	59.9	2,163	0.4	18
75-84	11	12.5	129	0.9	85	25	28.4	292	0.7	57	31	35.2	359	0.3	4
85 and older	6	17.1	66	0.8	47	12	34.3	113	0.8	67	16	45.7	174	0.4	14

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, MISSOURI, 2005

		ANTIC	CONVULSAN	ΙT			ANTIHY	PERLIPIDE!	MIC			ANALG	SESICS - Naro	cotic	
			Number of	Mean				Number of	Mean				Number of	Mean	
		Users	Benefit N	lumber of	Mean		Users	Benefit N	lumber of	Mean		Users	Benefit N	Number of	Mean
		as %	Months		Rx \$ per		as %	Months		Rx \$ per		as %	Months		Rx \$ per
Denefician: Characteristics	Number of	of Dual	Among	Benefit		Number of	of Dual	Among				of Dual	Among		Benefit
Beneficiary Characteristics	Users	Benes	Users	Month	Month	Users	Benes	Users	Month	Month	Users	Benes	Users	Month	Month
Male, Other Eligibles															
All Ages	4,811	18.6	51,227	0.8	57	9,310	35.9	101,871	0.7	62	13,658	52.7	145,683	0.4	20
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	100.0	11	0.1	1
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	33.3	12	0.3	25
15-20	3	27.3	35	0.5	101	0	0.0	0	0.0	0	2	18.2	21	0.1	1
21-44	97	27.5	1,000	0.5	72	61	17.3	647	0.5	39	303	85.8	3,074	0.5	47
45-64	39	19.9	377	0.5	62	58	29.6	556	0.5	50	170	86.7	1,657	0.5	27
65-74	2,553	20.1	27,980	0.8	62	5,531	43.6	61,209	0.7	62	7,088	55.9	77,427	0.4	22
75-84	1,542	17.7	16,215	0.8	52	2,955	33.9	32,155	0.7	62	4,270	49.0	45,482	0.4	17
85 and older	577	14.7	5,620	0.8	43	705	17.9	7,304	0.7	60	1,823	46.3	17,999	0.4	16
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 Missouri, released by CMS in 1/2009. This table was produced on 04/23/2009.

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.

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

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, MISSOURI, 2005

		AN	TIDIABETIC	;	-			TIASTHMATIC			MISC		OTHERAPE IROLOGICA		
Beneficiary Characteristics	Number of Users	Users as % of Dual	Number of Benefit Months Among Users		Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit N Months Among Users			Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Benefit	Mean Rx \$ per Benefit Month
All	71,147	39.6	779,462	0.7	\$48	85,306	47.5	941,456	0.5	\$39	19,368	10.8	205,932	0.7	\$129
Female															
All Females	47,528	42.8	524,401	0.7	48	57,178	51.4	635,520	0.5	38	14,232	12.8	152,550	0.7	132
Female, Disable	d														
All Ages	18,403	41.1	204,765	0.7	53	27,350	61.0	307,639	0.5	38	1,665	3.7	18,713	0.6	305
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	O
6-14	2	40.0	24	0.1	16	6	120.0	72	0.4	20	0	0.0	0	0.0	0
15-20	3	2.9	36	0.9	116	48	45.7	514	0.3	60	2	1.9	24	1.0	155
21-44	3,206	22.0	35,906	0.6	49	6,815	46.8	77,223	0.4	29	404	2.8	4,574	0.5	381
45-64	14,791	50.4	164,602	0.7	55	20,041	68.3	225,350	0.5	41	1,201	4.1	13,502	0.6	289
65-74	260	51.8	2,582	0.8	51	329	65.5	3,222	0.5	43	23	4.6	227	0.7	124
75-84	102	54.0	1,170	0.7	42	79	41.8	898	0.4	31	19	10.1	198	0.7	81
85 and older	39	28.7	445	0.8	46	32	23.5	360	0.4	37	16	11.8	188	0.7	100
Female, Other E	ligibles														
All Ages	29,125	43.9	319,636	0.8	44	29,828	45.0	327,881	0.5	38	12,567	18.9	133,837	0.8	108
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	O
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	2	11.8	14	0.2	39	2	11.8	24	0.6	64	0	0.0	0	0.0	0
21-44	98	13.6	894	0.5	43	211	29.3	2,134	0.4	28	10	1.4	105	0.6	584
45-64	55	37.7	500	0.6	37	52	35.6	443	0.4	38	1	0.7	12	0.1	1
65-74	12,805	56.6	143,270	0.8	48	12,674	56.0	142,869	0.5	44	1,684	7.4	18,448	0.7	108
75-84	10,869	46.5	119,542	0.8	42	10,028	42.9	110,448	0.5	37	5,221	22.3	56,386	0.8	106
85 and older	5,296	27.3	55,416	0.8	37	6,861	35.3	71,963	0.4	28	5,651	29.1	58,886	0.8	108
Male															
All Males	23,619	34.5	255,061	0.7	50	28,128	41.1	305,936	0.5	41	5,136	7.5	53,382	0.7	121
Male, Disabled															
All Ages	13,351	31.4	145,630	0.7	54	15,632	36.7	172,272	0.5	40	1,203	2.8	13,400	0.6	175
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	O
6-14	0	0.0	0	0.0	0	3	60.0	36	0.5	18	0	0.0	0	0.0	0
15-20	5	3.0	54	0.6	13	20	12.0	232	0.3	19	0	0.0	0	0.0	0
21-44	2,860	16.6	32,069	0.7	52	4,386	25.5	49,676	0.4	31	383	2.2	4,377	0.5	210
45-64	10,256	41.6	111,387	0.7	55	10,973	44.5	119,870	0.5	44	789	3.2	8,700	0.6	161
65-74	192	47.5	1,726	0.8	59	205	50.7	1,975	0.6	47	16	4.0	151	0.7	101
75-84	27	30.7	313	0.8	36	31	35.2	353	0.4	29	10	11.4	112	0.7	110
85 and older	11	31.4	81	0.9	54	14	40.0	130	0.6	45	5	14.3	60	0.7	100

TABLE D.7C MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGEa, b, c

DUAL ELIGIBLE BENEFICIARIES, MISSOURI, 2005

		AN	ITIDIABETIC		-	-	ANT	IASTHMATIC)		MIS		OTHERAPEL IROLOGICAL		
			Number of	Mean				Number of	Mean				Number of	Mean	
		Users	Benefit N	lumber of	Mean		Users	Benefit N	lumber of	Mean		Users	Benefit N	umber of	Mean
		as %	Months		Rx \$ per		as %	Months	Rx per l			as %	Months	Rx per F	
Beneficiary	Number of	of Dual	Among	Benefit	Benefit	Number of	of Dual	Among	Benefit		Number of	of Dual	Among		Benefit
Characteristics	Users	Benes	Users	Month	Month	Users	Benes	Users	Month	Month	Users	Benes	Users	Month	Month
Male, Other Eligi	ibles														
All Ages	10,268	39.6	109,431	0.7	45	12,496	48.3	133,664	0.5	41	3,933	15.2	39,982	0.7	103
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	1	33.3	12	0.1	1	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	1	9.1	12	0.2	2	0	0.0	0	0.0	0
21-44	58	16.4	568	0.6	56	73	20.7	746	0.4	32	2	0.6	22	0.4	154
45-64	41	20.9	378	0.7	49	65	33.2	671	0.4	35	4	2.0	42	0.5	108
65-74	5,635	44.5	61,432	0.7	48	6,334	50.0	69,863	0.6	46	958	7.6	10,192	0.7	100
75-84	3,439	39.4	36,183	0.7	42	4,193	48.1	44,136	0.5	38	1,813	20.8	18,440	0.7	102
85 and older	1,095	27.8	10,870	0.8	38	1,829	46.4	18,224	0.5	32	1,156	29.4	11,286	0.8	106
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 Missouri, released by CMS in 1/2009. 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.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615 (October 26, 2007).

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

TABLE D.7D MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR NINTH AND TENTH TOP DRUG GROUPS SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c} DUAL ELIGIBLE BENEFICIARIES, MISSOURI, 2005 ANTIHYPERTENSIVE

		,	ANTIVIRAL	20/12 22/0		NEFICIARIES		HYPERTENSI	VE			
Beneficiary Characteristics	Number of Users		Number of Benefit I Months Among Users	Mean Number of Rx per F Benefit Month		Number of Users		Number of Benefit N Months Among Users	Mean Number of Rx per F Benefit Month	Mean Rx \$ per Benefit Month	Number of	Number of Benefit Months
All	11,275		125,642	0.4	\$196	88,544	49.3	970,025	0.7	\$25	179,618	1,865,121
Female			,		****	,		,	***	4	,	-,,
All Females	5,679	5.1	63,676	0.3	84	58,627	52.7	646,396	0.7	26	111,148	1,165,490
Female, Disable	,	• • • • • • • • • • • • • • • • • • • •	,	-	-	,		0.10,000	•		,	.,,
All Ages	2,915	6.5	32,953	0.3	144	18,447	41.2	205,564	0.7	24	44,827	481,957
5 and younger	1		12	0.7	301	0	0.0	0	0.0	0	2	23
6-14	3		36	0.4	226	7	140.0	84	0.4	21	5	60
15-20	2		24	0.8	132	24		283	0.5	21	105	1,132
21-44	1,123	7.7	12,678	0.4	154	2,956	20.3	33,236	0.6	18	14,550	157,904
45-64	1,759	6.0	19,917	0.3	139	14,961	51.0	166,657	0.7	25	29,338	314,641
65-74	19	3.8	199	0.3	24	297	59.2	2,960	0.7	25	502	4,579
75-84	2	1.1	15	0.2	14	114	60.3	1,347	0.7	25	189	2,171
85 and older	6	4.4	72	0.1	7	88	64.7	997	0.8	30	136	1,447
Female, Other E	ligibles											
All Ages	2,764	4.2	30,723	0.1	21	40,180	60.6	440,832	0.7	27	66,321	683,533
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
6-14	2	40.0	24	0.5	274	1	20.0	12	0.5	5	5	60
15-20	2	11.8	24	0.2	7	9	52.9	97	0.5	10	17	122
21-44	56	7.8	559	0.3	84	87	12.1	829	0.5	14	721	5,642
45-64	6	4.1	66	0.5	362	56	38.4	503	0.6	25	146	1,177
65-74	808	3.6	9,206	0.2	36	14,660	64.8	164,345	0.7	27	22,625	239,091
75-84	896	3.8	10,126	0.1	13	15,076	64.4	166,779	0.7	27	23,393	245,085
85 and older	994	5.1	10,718	0.1	9	10,291	53.0	108,267	0.8	25	19,414	192,356
Male												
All Males	5,596	8.2	61,966	0.6	310	29,917	43.7	323,629	0.7	22	68,470	699,631
Male, Disabled												
All Ages	4,764	11.2	53,001	0.7	354	16,467	38.7	179,379	0.7	23	42,572	447,941
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
6-14	3	60.0	36	0.8	340	7	140.0	84	0.7	42	5	53
15-20	4	2.4	48	0.4	264	23	13.8	269	0.3	8	167	1,804
21-44	2,354	13.7	26,497	0.7	363	4,128	24.0	46,192	0.6	21	17,226	185,817
45-64	2,391	9.7	26,297	0.7	346	12,010	48.7	130,002	0.7	24	24,647	255,543
65-74	10	2.5	99	0.2	19	225	55.7	2,011	0.7	25	404	3,381
75-84	2	2.3	24	0.1	4	51	58.0	598	0.7	31	88	1,001
85 and older	0	0.0	0	0.0	0	23	65.7	223	0.8	14	35	342

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, MISSOURI, 2005

			ANTIVIRAL				ANTI	HYPERTENSI				
			Number of	Mean				Number of	Mean			
		Users	Benefit N	umber of	Mean		Users	Benefit N	lumber of	Mean		
		as %	Months	Rx per f	Rx \$ per		as %	Months	Rx per F	Rx \$ per		
Beneficiary	Number of	of Dual	Among	Benefit	Benefit	Number of	of Dual	Among	Benefit	Benefit	Number of	Number of
Characteristics	Users	Benes	Users	Month	Month	Users	Benes	Users	Month	Month	Beneficiaries E	Benefit Months
Male, Other Eligi	ibles											
All Ages	832	3.2	8,965	0.2	49	13,450	51.9	144,250	0.7	22	25,898	251,690
5 and younger	1	100.0	11	0.8	413	0	0.0	0	0.0	0	1	11
6-14	2	66.7	24	0.6	363	0	0.0	0	0.0	0	3	29
15-20	3	27.3	21	0.5	514	12	109.1	130	0.4	18	11	97
21-44	8	2.3	59	0.5	268	76	21.5	758	0.5	18	353	2,994
45-64	5	2.6	44	0.4	217	73	37.2	694	0.6	21	196	1,534
65-74	366	2.9	4,067	0.3	80	6,854	54.1	74,922	0.7	23	12,676	126,486
75-84	300	3.4	3,266	0.1	14	4,696	53.9	50,336	0.7	21	8,720	84,761
85 and older	147	3.7	1,473	0.1	12	1,739	44.2	17,410	0.7	19	3,938	35,778
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 Missouri, released by CMS in 1/2009. 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.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615 (October 26, 2007).

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

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

DUAL ELIGIBLE BENEFICIARIES, MISSOURI, 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	\$468	8.1	20,884	216,275
Age				
0-64	719	9.2	2,311	26,073
65-74	575	9.3	2,709	28,904
75-84	477	8.5	6,633	68,519
85 and older	358	7.2	9,231	92,779
Unknown	0	0.0	0	0
Gender				
Female	451	8.1	15,347	159,567
Male	517	8.1	5,537	56,708
Unknown	0	0.0	0	0
Race				
White	472	8.3	17,934	184,681
African American	455	7.3	2,529	27,250
Other/unknown	392	7.4	421	4,344
Basis of Eligibility	:			
Aged	434	8.0	18,509	189,570
Disabled	714	9.2	2,374	26,693
Adults	0	0.0	0	0
Children	123	3.0	1	12
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 2005 file for Missouri, released by CMS in 1/2009. 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 13,884 beneficiaries who were in nursing facilities for part of their enrollment and their 133,872 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 ebecause of disability

or blindness. The children's group includes children receiving foster care and adoptive services.

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

TABLE D.9 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,

BY BRAND STATUS AND THERAPEUTIC CATEGORY^a, b, c, d, e
DUAL ELIGIBLE BENEFICIARIES, MISSOURI, 2005

Number of Rx per Benefit \$ per Benefit Month Among

Month Among Users Users \$ per Rx Users

Therapeutic Category	P Total		Off- Patent Brand- Name G	eneric		Brand-	Off- Patent Brand- Name G	eneric	•		Off- Patent Brand- Name O	Generic	Total Number of Rx	Total Rx \$	Number of	As a Percentage of Dual All-Year Nursing Facility Residents	Number of Benefit Months
Anti-infective Agents	0.4	0.1	0.0	0.2	\$21	\$12	\$4	\$5	\$56	\$123	\$84	\$22	61,402	\$3,429,215	15,155	72.6	164,256
Biologicals	0.1	0.1	0.0	0.0	3	1	0	1	26	21	22	35	2,077	54,377	1,710	8.2	19,563
Antineoplastic Agents	0.6	0.1	0.0	0.5	62	25	1	36	106	367	89	71	7,996	849,040	1,343	6.4	13,670
Endocrine/Metabolic Drugs	1.3	0.4	0.2	0.6	58	37	11	10	45	88	44	16	155,382	6,985,792	11,285	54.0	120,597
Cardiovascular Agents	2.3	0.6	0.0	1.6	68	41	1	27	30	73	17	16	395,999	12,008,588	16,591	79.4	175,710
Respiratory Agents	0.8	0.4	0.0	0.4	43	35	2	6	56	95	61	16	76,309	4,299,312	9,218	44.1	100,096
Gastrointestinal Agents	1.0	0.2	0.0	0.8	36	24	1	12	38	147	37	15	110,276	4,188,256	10,675	51.1	115,628
Genitourinary Agents	0.7	0.5	0.0	0.2	52	45	0	7	74	89	59	35	43,370	3,216,134	5,668	27.1	61,831
CNS Drugs	1.8	0.9	0.0	0.9	163	138	1	24	90	147	55	28	317,842	28,676,164	16,476	78.9	176,452
Stimulants/Anti-obesity/Anorexia	0.6	0.1	0.0	0.4	25	13	0	12	45	123	40	26	111	4,984	17	0.1	196
Miscellaneous Psychological/ Neurological Agents	1.1	1.1	0.0	0.0	163	163	0	0	146	146	0	30	76,139	11,127,179	6,358	30.4	68,169
Analgesics and Anesthetics	1.0	0.2	0.1	0.7	55	21	16	18	53	104	142	25	128,996	6,835,581	11,647	55.8	124,390
Neuromuscular Agents	1.3	0.4	0.1	0.9	94	51	4	38	71	133	69	44	118,165	8,351,169	8,191	39.2	89,198
Nutritional Products	8.0	0.0	0.0	0.8	16	0	1	15	19	24	19	19	78,990	1,512,822	8,911	42.7	94,915
Hematological Agents	1.2	0.3	0.1	0.7	71	57	2	12	60	164	23	16	93,571	5,628,525	7,448	35.7	79,750
Topical Products	0.6	0.2	0.0	0.3	27	19	1	7	47	77	52	23	80,003	3,786,845	12,667	60.7	139,665
Miscellaneous Products	0.3	0.1	0.0	0.2	16	9	1	6	54	111	173	30	4,299	233,907	1,380	6.6	14,770
Unknown Therapeutic Category	0.4	0.0	0.0	0.0	8	0	0	0	21	0	0	0	4,640	97,491	1,088	5.2	11,855
TOTAL NO. OF RX AND RX \$	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	1,755,567	101,285,381	n.a.	n.a.	n.a.

a. Table D.9 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2005. A total of 13,884 beneficiaries who were

in nursing facilities for part of their enrollment and their 133,872 benefit months were excluded from the analysis.

b. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 2005. A beneficiary who used drugs from two or more categories was counted as a user for each category. Therefore, the sum of users across categories may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

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

e. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. For information about this classification method, see Wolters Kluwer Health, http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615 (October 26, 2007).

In Missouri, 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.

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

TABLE D.10 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY TOP-10 DRUG GROUPa, b, c, d

DUAL ELIGIBLE BENEFICIARIES, MISSOURI, 2005

			Users				Among Users
Top 10 Drug Groups in Nursing Facilities	Total Medicaid Rx \$	Number of Users	As a Percentage of All-Year Nursing Facility Residents	Number of Benefit Monthsp	Number of Rx er Benefit Month	\$ per Rx	Rx \$ per Benefit Month
ANTIPSYCHOTICS	\$17,764,590	10,669	51.1	117,531	0.8	\$184	\$151
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	11,127,179	8,264	39.6	89,146	0.9	146	125
ANTIDEPRESSANTS	9,521,225	17,680	84.7	192,436	0.8	59	49
ANTICONVULSANT	6,273,306	7,338	35.1	80,632	1.0	77	78
ANTIDIABETIC	4,195,083	8,789	42.1	95,506	0.9	50	44
ANALGESICS - Narcotic	4,096,690	12,351	59.1	132,173	0.7	47	31
ANTIHYPERLIPIDEMIC	3,387,722	4,839	23.2	53,022	0.8	80	64
ULCER DRUGS	3,278,378	10,763	51.5	117,584	0.8	37	28
ANTIASTHMATIC	3,149,948	9,771	46.8	106,067	0.5	62	30
MISC. HEMATOLOGICAL	2,950,457	3,017	14.4	32,769	0.8	110	90
Total	65,744,578	93,481		1,016,866	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for Missouri, released by CMS in 1/2009. 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 13,884 beneficiaries who were in nursing facilities for part of their enrollment and their 133,872 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.

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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.

_ A	II Top 10 Drug Groups			ANTIPSY	CHOTICS	,		MIS	C PSYCHOTH NEURO	HERAPEUTI LOGICAL	C AND	
Beneficiary Characteristics	Number of Rx	Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Benefit Months	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Benefit Months	Mean Number of Rx	
All	797,115	\$65,744,578	10,669	51.1	117,531	0.8	\$151	8,264	39.6	89,146	0.9	\$125
Female												
All Females	574,314	46,091,283	7,370	48.0	81,347	0.8	140	6,262	40.8	67,980	0.9	126
Female, Disabled												
All Ages	61,238	6,611,654	951	85.2	11,125	1.0	235	221	19.8	2,538	0.8	257
64 or younger	59,791	6,490,030	929	86.3	10,877	1.0	236	206	19.1	2,374	0.8	267
65-74	697	65,062	14	82.4	153	1.0	250	5	29.4	44	0.8	124
75-84	472	34,395	4	40.0	48	0.7	76	4	40.0	48	0.9	122
85 and older	278	22,167	4	30.8	47	0.8	69	6	46.2	72	0.6	94
Female, Other Eligib	les											
All Ages	513,076	39,479,629	6,419	45.1	70,222	0.8	125	6,041	42.4	65,442	0.9	121
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	, C
65-74	81,064	6,948,078	1,062	68.3	11,945	0.9	177	533	34.3	5,864	0.9	128
75-84	205,144	16,032,746	2,498	51.3	27,778	0.8	130	2,434	49.9	26,698	0.9	121
85 and older	226,868	16,498,805	2,859	36.6	30,499	0.7	99	3,074	39.4	32,880	0.9	119
Male												
All Males	222,801	19,653,295	3,299	59.6	36,184	0.9	177	2,002	36.2	21,166	0.8	122
Male, Disabled												
All Ages	67,057	7,213,758	1,135	90.2	13,034	1.0	247	160	12.7	1,812	0.8	179
64 or younger	66,198	7,148,224	1,124	91.0	12,930	1.0	247	153	12.4	1,748	0.8	181
65-74	669	46,594	8	47.1	68	0.9	115	6	35.3	52	0.8	124
75-84	172	17,715	3	60.0	36	1.4	285	1	20.0	12	1.0	151
85 and older	18	1,225	0	0.0	0	0.0	0	0	0.0	0	0.0	, C
Male, Other Eligibles	3											
All Ages	155,744	12,439,537	2,164	50.6	23,150	0.8	137	1,842	43.0	19,354	0.8	117
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	, C
65-74	51,109	4,326,230	695	62.1	7,714	0.9	175	371	33.1	4,030	0.8	118
75-84	64,099	5,081,937	899	51.5	9,583	0.8	128	834	47.8	8,755	0.8	116
85 and older	40,536	3,031,370	570	40.3	5,853	0.7	104	637	45.0	6,569	0.8	117
Unknown	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	, c

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

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 13,884 beneficiaries who were in nursing facilities for part of their enrollment and their 133,872 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).

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, MISSOURI, 2005

ANTIDEPRESSANTS ANTICONVULSANT **ANTIDIABETIC** Users as Users as Users as % of All- Number of % of All- Number of % of All- Number of Year Benefit Benefit Year Benefit Year Months Nursing Mean Nursing Months Mean Nursing Months Mean Number of Among Number Mean Number of Beneficiary Facility Among Number Mean Number of Facility Facility Among Number Mean Rx\$ Characteristics Users Residents Users of Rx Rx\$ Users Residents Users of Rx Rx\$ Users Residents Users of Rx ΑII 17.680 84.7 192,436 0.8 \$50 7,338 35.1 80.632 1.0 \$78 8.789 42.1 95.506 0.9 \$44 Female All Females 13,174 85.8 143,460 8.0 49 4,787 31.2 52,429 1.0 71 6.289 41.0 68,588 0.9 43 Female, Disabled All Ages 1.115 99.9 12.797 0.9 58 916 82.1 10.541 1.2 117 560 50.2 6.394 0.9 52 1,080 100.4 12,406 0.9 58 905 84.1 10,444 1.2 117 537 49.9 6,143 0.9 52 64 or younger 65-74 18 105.9 199 0.8 42 5 29.4 45 1.0 61 10 58.8 104 1.0 35 75-84 9 90.0 108 51 4 40.0 39 0.8 15 10 100.0 111 0.7 42 0.8 8 84 54 2 33 3 23.1 32 85 and older 61.5 0.8 15.4 13 0.8 36 0.9 Female, Other Eligibles 130,663 3,871 41,888 5,729 62,194 All Ages 12,059 84.7 0.8 49 27.2 0.9 60 40.3 0.9 42 0 0.0 0 0.0 0 0 0.0 0 0.0 0 0 0.0 0 0.0 0 64 or younger 847 9,460 79 48 1,564 100.6 17,450 54 1,043 67.1 11,531 0.9 65-74 0.9 54.5 1.1 75-84 4,489 92.1 49.182 0.8 49 1,669 34.2 18,237 0.9 61 2.485 51.0 27,431 0.9 43 85 and older 6,006 77.0 64,031 8.0 46 1,355 17.4 14,191 0.9 45 2,201 28.2 23,232 8.0 38 Male All Males 4,506 81.4 48,976 8.0 50 2,551 46.1 28,203 1.0 90 2,500 45.2 26,918 0.9 46 Male, Disabled All Ages 1,205 95.8 13,864 0.9 56 1,079 85.8 12,386 1.2 116 573 45.5 6,550 0.9 49 1,178 95.4 13,599 0.9 56 1.068 86.5 12,283 1.2 116 558 45.2 6,425 0.9 50 64 or younger 65-74 21 123.5 193 8.0 40 11 64.7 103 1.2 66 11 64.7 95 0.5 23 22 75-84 6 120.0 72 0.8 65 0 0.0 0 0.0 0 2 40.0 24 1.0 0 0 0 0 0 0.0 0 2 200.0 6 8.0 68 85 and older 0.0 0.0 0.0 Male, Other Eligibles All Ages 3,301 77.1 35,112 0.8 48 1,472 34.4 15,817 1.0 70 1,927 45.0 20,368 0.9 45 0 0.0 0 64 or younger 0 0.0 0 0.0 0 0 0.0 0 0.0 0 0.0 0 47 65-74 933 83.3 10,401 0.9 52 623 55.6 6,965 1.0 81 654 58.4 7,225 0.9 75-84 1,362 78.1 14,526 49 566 32.4 5,999 0.9 66 826 47.3 8,638 0.8 0.9 44 85 and older 1,006 71.1 10,185 8.0 43 283 20.0 2,853 0.9 52 447 31.6 4,505 0.9 42 0 0.0 0 0.0 0 0 0.0 0 0 0.0 0 Unknown 0 0.0 0 0.0

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 13,884 beneficiaries who were in nursing facilities for part of their enrollment and their 133,872 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, MISSOURI, 2005

		ANALGESI	CS - Narcoti	С			ANTIHYPE	RLIPIDEMIC		ULCER	RDRUGS		,		
Beneficiary Characteristics	Number of Users	Users as % of All-Year Nursing Facility Residents	Benefit Months Among			Number of Users	Users as % of All-Year Nursing Facility Residents	Benefit Months Among			Number of Users	Users as % of All-Year Nursing Facility Residents	Benefit Months Among	Mean Number of Rx	
AII	12,351	59.1	132,173	0.7	\$31	4,839	23.2	53,022	0.8	\$64	10,763	51.5	117,584	0.8	\$28
Female															
All Females	9,498	61.9	101,762	0.7	33	3,296	21.5	36,227	0.8	64	7,966	51.9	87,242	0.8	28
Female, Disable	ed														
All Ages	697	62.5	7,909	0.7	38	339	30.4	3,898	0.8	66	583	52.2	6,750	0.8	30
64 or younger	680	63.2	7,727	0.7	38	329	30.6	3,778	0.8	66	560	52.0	6,515	0.8	30
65-74	10	58.8	108	0.5	5	2	11.8	24	0.3	33	12	70.6	125	0.6	12
75-84	3	30.0	27	0.2	2	6	60.0	72	1.0	86	8	80.0	87	0.9	40
85 and older	4	30.8	47	0.1	1	2	15.4	24	1.0	75	3	23.1	23	1.0	28
Female, Other E	ligibles														
All Ages	8,801	61.8	93,853	0.7	33	2,957	20.8	32,329	0.8	63	7,383	51.9	80,492	0.8	27
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	1,119	72.0	12,372	0.8	40	580	37.3	6,459	0.8	68	880	56.6	9,860	0.7	29
75-84	3,167	65.0	34,407	0.7	34	1,343	27.6	14,714	0.8	64	2,647	54.3	29,230	0.8	27
85 and older	4,515	57.9	47,074	0.6	30	1,034	13.3	11,156	0.8	60	3,856	49.4	41,402	0.8	27
Male															
All Males	2,853	51.5	30,411	0.6	24	1,543	27.9	16,795	0.8	65	2,797	50.5	30,342	0.8	29
Male, Disabled															
All Ages	707	56.2	7,980	0.7	29	471	37.4	5,415	0.8	65	658	52.3	7,521	0.8	32
64 or younger	693	56.1	7,861	0.7	29	465	37.7	5,365	0.8	65	644	52.1	7,401	0.8	32
65-74	13	76.5	116	0.5	33	5	29.4	47	0.7	54	10	58.8	81	0.7	34
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	60.0	36	0.9	9
85 and older	1	100.0	3	0.7	25	1	100.0	3	0.7	51	1	100.0	3	0.7	19
Male, Other Elig	ibles														
All Ages	2,146	50.2	22,431	0.6	22	1,072	25.1	11,380	0.8	65	2,139	50.0	22,821	0.7	28
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	558	49.8	6,129	0.6	26	382	34.1	4,201	0.8	65	592	52.9	6,660	0.8	29
75-84	876	50.2	9,150	0.6	22	463	26.5	4,809	0.8	66	884	50.7	9,451	0.7	27
85 and older	712	50.4	7,152	0.5	19	227	16.1	2,370	0.8	60	663	46.9	6,710	0.7	27
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 Missouri, released by CMS in 1/2009. This table was produced on 04/23/2009.

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.

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 13,884 beneficiaries who were in nursing facilities for part of their enrollment and their 133,872 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.

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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 AGEa, b, c, d DUAL ELIGIBLE BENEFICIARIES, MISSOURI, 2005

> MISC. HEMATOLOGICAL **ANTIASTHMATIC**

												Benefit Months
		Users as %	Number of				Users as %	Number of				Among All-
		of All-Year	Benefit				of All-Year	Benefit			All-Year	Year
		Nursing	Months	Mean			Nursing	Months	Mean		Nursing	Nursing
Beneficiary Characteristics	Number of Users	Facility Residents		Number of Rx	Mean Rx \$	Number of Users	Facility Residents		Number of Rx	Mean Rx \$	Facility Residents	Facility Residents
All	9,771	46.8		0.5	\$30	3,017	14.4		0.8	\$90	20,884	216,275
Female	9,771	40.0	100,007	0.5		3,017	14.4	32,709	0.0	\$90	20,004	210,275
All Females	6,939	45.2	75,760	0.5	29	2,166	14.1	23,570	0.8	91	15,347	159,567
Female, Disable	,	45.2	75,700	0.5	29	2,100	14.1	23,370	0.0	31	15,547	139,307
All Ages	501	44.9	5,764	0.5	35	88	7.9	1,012	0.8	88	1,116	12,575
64 or younger	481	44.9	,	0.5	36	83	7.5	,		86	1,076	12,373
65-74	11	64.7	-,	0.5	34		0.0			0	1,076	171
75-84	5	50.0		0.7		3	30.0			114	10	111
85 and older	4	30.8		0.4	13	2	15.4			122	13	132
Female, Other E		30.0	40	0.2	10	_	10.4	2-1	1.0	122	10	102
All Ages	6,438	45.2	69,996	0.5	28	2,078	14.6	22,558	0.8	91	14,231	146,992
64 or younger	0,430	0.0	,	0.0	0	2,070	0.0			0	0	0
65-74	893	57.4		0.6	40	227	14.6			91	1,555	16,657
75-84	2,314	47.5	-,	0.5	30	760	15.6			94	4,873	51,125
85 and older	3,231	41.4	-,	0.4	24	1,091	14.0		0.8	88	7,803	79,210
Male	-,		- 1, 1			1,001		,			.,	,
All Males	2,832	51.1	30,307	0.5	32	851	15.4	9,199	0.8	89	5,537	56,708
Male, Disabled	_,		,					2,.22			5,551	,
All Ages	556	44.2	6,312	0.5	33	117	9.3	1,352	0.8	90	1,258	14,118
64 or younger	540	43.7	,	0.5	33	113	9.1		0.8	91	1,235	13,912
65-74	11	64.7	98	0.7	37	4	23.5	39	0.6	75	17	143
75-84	1	20.0	12	0.1	8	0	0.0	0	0.0	0	5	60
85 and older	4	400.0	12	0.6	44	0	0.0	0	0.0	0	1	3
Male, Other Elig	ibles											
All Ages	2,276	53.2	23,995	0.5	31	734	17.2	7,847	0.8	88	4,279	42,590
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	624	55.7	6,850	0.5	32	224	20.0	2,479	0.8	88	1,120	11,933
75-84	912	52.3	9,679	0.6	34	277	15.9	2,923	0.8	87	1,745	17,223
85 and older	740	52.3	7,466	0.5	28	233	16.5	2,445	0.8	90	1,414	13,434
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 Missouri, released by CMS in 1/2009. 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 13,884 beneficiaries who were in nursing facilities for part of their enrollment and their 133,872 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.11 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D AMONG DUALS, BY BENEFICIARY CHARACTERISTICa,b MISSOURI, 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	Part D	\$ per	Total Part D Excluded Rx \$	\$ per Part D Per		Total Number of Beneficiaries
All	119,083	66.3	7.9	1,410,364	\$137	\$24,654,087	\$17	3.4	179,618
Age									
5 and younger	3	100.0	19.0	57	517	1,551	27	6.4	3
6-14	18	100.0	14.1	254	906	16,316	64	5.9	18
15-20	142	47.3	3.8	1,127	72	21,646	19	2.0	300
21-44	19,473	59.3	6.2	205,279	119	3,905,608	19	2.7	32,850
45-64	37,806	69.6	9.0	490,280	166	9,012,612	18	3.3	54,327
65-74	23,107	63.8	7.7	279,746	134	4,834,254	17	3.8	36,207
75-84	21,852	67.5	7.9	254,864	125	4,038,586	16	3.7	32,390
85 and older	16,682	70.9	7.6	178,757	120	2,823,514	16	4.2	23,523
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Basis of Eligibility	c								
Aged	60,745	67.0	7.7	702,605	127	11,533,706	16	3.9	90,711
Disabled	57,602	65.9	8.0	702,972	149	13,033,493	19	3.1	87,399
Adults	695	48.2	3.1	4,402	56	81,277	18	3.0	1,441
Children	22	53.7	5.4	221	95	3,909	18	1.0	41
Unknown	19	73.1	6.3	164	65	1,702	10	0.6	26
Gender									
Female	78,959	71.0	8.7	964,465	153	17,029,070	18	3.8	111,148
Male	40,124	58.6	6.5	445,899	111	7,625,017	17	2.8	68,470
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Race									
White	96,512	68.0	8.3	1,175,137	148	20,968,741	18	3.4	141,968
African American	19,060	59.9	6.3	200,235	98	3,129,370	16	3.1	31,802
Other/unknown	3,511	60.0	6.0	34,992	95	555,976	16	3.1	5,848
Use of Nursing Fa	cilities ^d								
Entire year	16,153	77.3	9.0	187,967	158	3,308,256	18	3.3	20,884
Part year	11,137	80.2	8.6	119,042	149	2,067,103	17	3.8	13,884
None	91,793	63.4	7.6	1,103,355	133	19,278,728	17	3.4	144,850
Maintenance Assis	stance Status								
Cash	26,881	68.3	9.6	379,636	154	6,048,915	16	3.6	39,378
Medically needy	0	0.0	0.0	0	0	0	0	0.0	0
Poverty related	1,611	37.7	2.3	9,955	39	164,755	17	2.9	4,272
Other/unknown	90,591	66.6	7.5	1,020,773	136	18,440,417	18	3.3	135,968

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

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} MISSOURI, 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	0.8	\$13	\$17	\$0	\$3	1,865,121
Age						
5 and younger	1.7	46	27	0	0	34
6-14	1.3	81	64	0	0	202
15-20	0.4	7	19	0	1	3,155
21-44	0.6	11	19	0	4	352,357
45-64	0.9	16	18	0	4	572,895
65-74	0.7	13	17	0	3	373,537
75-84	0.8	12	16	0	2	333,018
85 and older	0.8	12	16	0	2	229,923
Unknown	0.0	0	0	0	0	0
Basis of Eligibility	С					
Aged	0.8	12	16	0	2	923,171
Disabled	0.8	14	19	0	4	929,898
Adults	0.4	7	18	0	3	11,396
Children	0.6	10	18	0	0	377
Unknown	0.6	6	10	0	3	279
Gender						
Female	0.8	15	18	0	4	1,165,490
Male	0.6	11	17	0	3	699,631
Unknown	0.0	0	0	0	0	0
Race						
White	0.8	14	18	0	4	1,470,672
African American	0.6	9	16	0	1	334,648
Other/unknown	0.6	9	16	0	2	59,801
Use of Nursing Fac	cilities ^d					
Entire year	0.9	15	18	0	3	216,275
Part year	0.9	15	17	0	3	133,872
None	0.7	13	17	0	3	1,514,974
Maintenance Assis	stance Status					
Cash	0.9	14	16	0	3	446,449
Medically needy	0.0	0	0	0	0	0
Poverty related	0.2	4	17	0	1	44,739
Other/unknown	0.7	13	18	0	3	1,373,933

Source: Data for this table are from the MAX 2005 file for Missouri, released by CMS in 1/2009. This table was produced on 04/23/2009.

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.

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; nonprescription (OTC) medications; prescription strains 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.

or blindness. The children's group includes children receiving foster care and adoptive services.

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.

TABLE D.13
USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D FOR SELECTED DRUG CATEGORIES AMONG DUALS a,b,c MISSOURI, 2005

Drug Category	Number of Users	Rx \$ per User	Total Rx \$	Rx \$ as a Percentage of All Part D Excluded Rx \$	Total Number Rx.	\$ per Rx	Number Rx as a Percentage of All Part D Excluded Rx
All	210,128	\$117	\$24,654,087	100.0	1,410,364	\$17	100.0
Anorexia or weight loss/gain	0	0	0	0.0	0	0	0.0
Fertility drugs	0	0	0	0.0	0	0	0.0
Drugs for cosmetic purposes	79	28	2,230	0.0	147	15	0.0
Cough and cold medications	35,951	80	2,887,468	11.7	107,113	27	7.6
Vitamins and minerals	41,758	140	5,829,732	23.6	296,722	20	21.0
Non-prescription drugs	74,221	101	7,512,680	30.5	569,649	13	40.4
Barbiturates	1,483	102	151,053	0.6	15,851	10	1.1
Benzodiazepines	51,418	122	6,297,724	25.5	398,411	16	28.2
Other Part D Excl Rx Drugs	5,218	378	1,973,200	8.0	22,471	88	1.6

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.

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.

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

Total Number of Dual Eligible Beneficiaries: 179,618

Total Pharmacy Reimbursement for Dual Eligible Beneficiaries: \$726,829,171

Mean Pharmacy Reimbursement per Dual Eligible Beneficiary: \$4,046

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	17,352	9.7	\$0	0.0
1-500	23,515	13.1	4,981,343	0.7
501-1,000	14,471	8.1	10,714,966	1.5
1,001-1,500	12,577	7.0	15,652,863	2.2
1,501-2,000	11,313	6.3	19,743,646	2.7
2,001-2,500	10,203	5.7	22,943,871	3.2
2,501-3,000	9,248	5.1	25,396,331	3.5
3,001-3,500	8,498	4.7	27,574,636	3.8
3,501-4,000	7,665	4.3	28,701,761	3.9
4,001-4,500	7,027	3.9	29,828,609	4.1
4,501-5,000	6,362	3.5	30,211,504	4.2
5,001-5,500	5,515	3.1	28,932,181	4.0
5,501-6,000	5,006	2.8	28,748,695	4.0
6,001-6,500	4,467	2.5	27,890,815	3.8
6,501-7,000	4,026	2.2	27,147,685	3.7
7,001-7,500	3,415	1.9	24,739,279	3.4
7,501-8,000	3,065	1.7	23,720,082	3.3
8,001-8,500	2,809	1.6	23,157,044	3.2
8,501-9,000	2,326	1.3	20,336,282	2.8
9,001-9,500	2,182	1.2	20,167,753	2.8
9,501-10,000	1,851	1.0	18,038,043	2.5
10,001+	16,725	9.3	268,201,782	36.9

Source: Data for this table are from the MAX 2005 file for Missouri, released by CMS in 1/2009. 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

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 $65^{\rm a},\,{\rm b},\,{\rm c}$ MISSOURI, 2005

Total Number of Disabled Dual Eligible Beneficiaries, Age < 65: 86,045

Total Pharmacy Reimbursement for Disabled Dual Eligible Beneficiaries, Age < 65: \$420,312,055

Mean Pharmacy Reimbursement per Disabled Dual Eligible Beneficiary, Age < 65: \$4,884

		Percent of Disabled Dual Beneficiaries,		Percent of Total Pharmacy
Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Age < 65	Pharmacy Reimbursement	Reimbursement
\$0	8,047	9.4	0	0.0
1-500	11,910	13.8	2,389,964	0.6
501-1,000	6,433	7.5	4,741,069	1.1
1,001-1,500	5,275	6.1	6,559,953	1.6
1,501-2,000	4,662	5.4	8,130,408	1.9
2,001-2,500	4,128	4.8	9,293,779	2.2
2,501-3,000	3,689	4.3	10,134,076	2.4
3,001-3,500	3,485	4.1	11,307,704	2.7
3,501-4,000	3,132	3.6	11,723,182	2.8
4,001-4,500	2,906	3.4	12,343,302	2.9
4,501-5,000	2,715	3.2	12,899,169	3.1
5,001-5,500	2,435	2.8	12,778,420	3.0
5,501-6,000	2,234	2.6	12,832,288	3.1
6,001-6,500	2,088	2.4	13,038,017	3.1
6,501-7,000	1,984	2.3	13,381,272	3.2
7,001-7,500	1,739	2.0	12,601,382	3.0
7,501-8,000	1,613	1.9	12,480,181	3.0
8,001-8,500	1,531	1.8	12,624,839	3.0
8,501-9,000	1,318	1.5	11,520,281	2.7
9,001-9,500	1,269	1.5	11,725,141	2.8
9,501-10,000	1,094	1.3	10,664,372	2.5
10,001+	12,358	14.4	207,143,256	49.3

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

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} MISSOURI, 2005

Total Number of Dual Eligible Beneficiaries, Age 65+: 92,120
Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65+: \$303,249,786
Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65+: \$3,291

	F	Percent of Dual Beneficiaries, Age 65		Percent of Total Pharmacy
Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	+	Pharmacy Reimbursement	Reimbursement
\$0	9,008	9.8	0	0.0
1-500	11,172	12.1	2,515,182	0.8
501-1,000	7,897	8.6	5,870,491	1.9
1,001-1,500	7,204	7.8	8,970,347	3.0
1,501-2,000	6,568	7.1	11,468,296	3.8
2,001-2,500	6,020	6.5	13,526,502	4.5
2,501-3,000	5,519	6.0	15,152,328	5.0
3,001-3,500	4,972	5.4	16,134,945	5.3
3,501-4,000	4,509	4.9	16,888,455	5.6
4,001-4,500	4,091	4.4	17,357,830	5.7
4,501-5,000	3,625	3.9	17,206,088	5.7
5,001-5,500	3,060	3.3	16,047,820	5.3
5,501-6,000	2,749	3.0	15,784,852	5.2
6,001-6,500	2,365	2.6	14,764,943	4.9
6,501-7,000	2,029	2.2	13,679,013	4.5
7,001-7,500	1,664	1.8	12,050,544	4.0
7,501-8,000	1,442	1.6	11,162,263	3.7
8,001-8,500	1,271	1.4	10,474,618	3.5
8,501-9,000	997	1.1	8,719,702	2.9
9,001-9,500	905	1.0	8,369,594	2.8
9,501-10,000	753	0.8	7,334,664	2.4
10,001+	4,300	4.7	59,771,309	19.7

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} MISSOURI, 2005

Total Number of Dual Eligible Beneficiaries, Age 65-74: 36,207

Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65-74: \$126,591,708

Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65-74: \$3,496

		Percent of Dual Beneficiaries, Age		Percent of Total Pharmacy
Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	65-74	Pharmacy Reimbursement	Reimbursement
\$0	4,377	12.1	0	0.0
1-500	4,547	12.6	957,210	0.8
501-1,000	2,876	7.9	2,138,804	1.7
1,001-1,500	2,610	7.2	3,244,989	2.6
1,501-2,000	2,331	6.4	4,073,974	3.2
2,001-2,500	2,122	5.9	4,770,432	3.8
2,501-3,000	1,907	5.3	5,240,281	4.1
3,001-3,500	1,804	5.0	5,846,161	4.6
3,501-4,000	1,609	4.4	6,025,117	4.8
4,001-4,500	1,487	4.1	6,308,868	5.0
4,501-5,000	1,320	3.6	6,268,650	5.0
5,001-5,500	1,127	3.1	5,911,101	4.7
5,501-6,000	1,032	2.9	5,921,445	4.7
6,001-6,500	914	2.5	5,715,765	4.5
6,501-7,000	792	2.2	5,340,596	4.2
7,001-7,500	686	1.9	4,962,612	3.9
7,501-8,000	604	1.7	4,680,949	3.7
8,001-8,500	530	1.5	4,373,086	3.5
8,501-9,000	426	1.2	3,725,004	2.9
9,001-9,500	422	1.2	3,901,966	3.1
9,501-10,000	348	1.0	3,389,388	2.7
10,001+	2,336	6.5	33,795,310	26.7

Source: Data for this table are from the MAX 2005 file for Missouri, released by CMS in 1/2009. 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

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} MISSOURI, 2005

Total Number of Dual Eligible Beneficiaries, Age 75-84: 32,390
Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 75-84: \$108,741,462
Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 75-84: \$3,357

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries Percent of Dual Be	meficiaries Age 75-84	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	3,085	9.5	0	0.0
1-500	3,607	11.1	828,286	0.8
501-1,000	2,578	8.0	1,925,300	1.8
1,001-1,500	2,499	7.7	3,113,131	2.9
1,501-2,000	2,279	7.0	3,979,892	3.7
2,001-2,500	2,147	6.6	4,822,019	4.4
2,501-3,000	2,000	6.2	5,490,866	5.0
3,001-3,500	1,801	5.6	5,851,236	5.4
3,501-4,000	1,658	5.1	6,212,901	5.7
4,001-4,500	1,471	4.5	6,240,885	5.7
4,501-5,000	1,339	4.1	6,350,591	5.8
5,001-5,500	1,138	3.5	5,972,536	5.5
5,501-6,000	1,031	3.2	5,925,161	5.4
6,001-6,500	913	2.8	5,691,152	5.2
6,501-7,000	774	2.4	5,216,886	4.8
7,001-7,500	617	1.9	4,472,079	4.1
7,501-8,000	531	1.6	4,107,929	3.8
8,001-8,500	466	1.4	3,836,636	3.5
8,501-9,000	397	1.2	3,475,197	3.2
9,001-9,500	335	1.0	3,098,766	2.8
9,501-10,000	277	0.9	2,697,924	2.5
10,001+	1,447	4.5	19,432,089	17.9

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} MISSOURI, 2005

Total Number of Dual Eligible Beneficiaries, Age 85+: 23,523

Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 85+: \$67,916,616

Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 85+: \$2,887

	Р	ercent of Dual Beneficiaries, Age 85		Percent of Total Pharmacy
Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	+	Pharmacy Reimbursement	Reimbursement
\$0	1,546	6.6	0	0.0
1-500	3,018	12.8	729,686	1.1
501-1,000	2,443	10.4	1,806,387	2.7
1,001-1,500	2,095	8.9	2,612,227	3.8
1,501-2,000	1,958	8.3	3,414,430	5.0
2,001-2,500	1,751	7.4	3,934,051	5.8
2,501-3,000	1,612	6.9	4,421,181	6.5
3,001-3,500	1,367	5.8	4,437,548	6.5
3,501-4,000	1,242	5.3	4,650,437	6.8
4,001-4,500	1,133	4.8	4,808,077	7.1
4,501-5,000	966	4.1	4,586,847	6.8
5,001-5,500	795	3.4	4,164,183	6.1
5,501-6,000	686	2.9	3,938,246	5.8
6,001-6,500	538	2.3	3,358,026	4.9
6,501-7,000	463	2.0	3,121,531	4.6
7,001-7,500	361	1.5	2,615,853	3.9
7,501-8,000	307	1.3	2,373,385	3.5
8,001-8,500	275	1.2	2,264,896	3.3
8,501-9,000	174	0.7	1,519,501	2.2
9,001-9,500	148	0.6	1,368,862	2.0
9,501-10,000	128	0.5	1,247,352	1.8
10,001+	517	2.2	6,543,910	9.6

Source: Data for this table are from the MAX 2005 file for Missouri, released by CMS in 1/2009. 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, MISSOURI, 2005

	Number of Beneficiaries					Number of Benefit Months						
Beneficiary Characteristics	All	Aged	Blind/ Disabled	Adults	Children	Other/ Unknown	All	Aged	Blind/ Disabled	Adults	Children	Other/ Unknown
All	180,245	90,855	87,451	1,858	55	26	1,875,778	924,872	933,511	16,526	590	279
Age												
5 and younger	3	0	2	0	1	0	36	0	24	0	12	0
6-14	20	0	11	0	9	0	234	0	132	0	102	0
15-20	314	0	274	11	29	0	3,440	0	3,011	94	335	0
21-44	33,174	0	31,812	1,352	8	2	358,657	0	346,291	12,269	74	23
45-64	54,460	0	53,996	444	5	15	575,099	0	571,109	3,778	39	173
65-74	36,257	35,293	908	45	2	9	374,215	365,792	7,983	341	16	83
75-84	32,441	32,158	277	6	0	0	333,645	330,429	3,172	44	0	0
85 and older	23,576	23,404	171	0	1	0	230,452	228,651	1,789	0	12	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	111,593	65,522	44,872	1,150	23	26	1,173,266	677,750	484,657	10,304	276	279
Male	68,652	25,333	42,579	708	32	0	702,512	247,122	448,854	6,222	314	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	142,298	72,549	68,404	1,287	40	18	1,476,488	734,959	729,331	11,584	431	183
African American	32,073	14,845	16,711	496	13	8	338,982	154,528	179,923	4,300	135	96
Other/unknown	5,874	3,461	2,336	75	2	0	60,308	35,385	24,257	642	24	0
Use of Nursing Facilities ^c												
Entire year	20,884	18,509	2,374	0	1	0	216,277	189,570	26,695	0	12	0
Part year	13,884	11,685	2,199	0	0	0	133,939	110,128	23,811	0	0	0
None	145,477	60,661	82,878	1,858	54	26	1,525,562	625,174	883,005	16,526	578	279
Maintenance Assistance Statu	s											
Cash	39.827	15,629	22,496	1,681	21	0	452,485	178,845	258,502	14.943	195	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0
Poverty related	4,276	1,431	2,700	112	7	26	45,061	14,992	28,700	1,009	81	279
Other/unknown	136,142	,	62,255	65	27	0	,	731,035	646,309	574	314	0
Dual Status ^d	,	,	,				, ,	,	,			
Full dual, all year	173,685	88,190	83,578	1.837	54	26	1,803,740	896,410	890,161	16.312	578	279
Full dual, part year	6,560	2,665	3,873	21	1	0	72,038	28,462	43,350	214	12	0
Managed Care (MC) Status	-,	_,,	2,212		•	•	,	,	,			_
Fee-for-service (FFS) all year	178,731	90,661	86,793	1,219	32	26	1,860,201	922,884	926,201	10,505	332	279
FFS part year, with Rx claims	720	38	521	1,213	8	0	7,922	414	5,903	1,515	90	0
FFS part year, no Rx claims	167	12	85	69	1	0	1,491	106	811	567	7	0
MC all year, with Rx claims	51	1	26	22	2	0	562	11	302	225	24	0
MC all year, no Rx claims	576	143	26	395	12	0	5,602	1,457	294	3,714	137	0

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.

are not consistent with basis or engionity.

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, MISSOURI, 2005

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 Number of Number of Number of Number of Number of **Beneficiary Characteristics** Beneficiaries Benefit Months Beneficiaries Benefit Months Beneficiaries Benefit Months ΑII 180,245 1,875,778 179,618 1,865,121 0 10,657 178,731 1,860,201 178,731 1,860,201 0 0 Fee-for-service (FFS) all year FFS part year, with Rx claims 720 4,321 3,601 7,922 720 0 FFS part year, with no Rx claims 167 1,491 167 892 599 Managed care (MC) all year, with Rx claims 51 562 0 0 562 0 5,602 0 0 MC all year, with no Rx claims 576 0 5,602

Source: Data for this table are from the MAX 2005 file for Missouri, released by CMS in 1/2009. 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 Medicard Services; FFS = fee-for-service pharmacy benefit; MAX = Medicard Analytic Extract; MC = managed care; Rx = pharmacy benefit.