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

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

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown
All	252,368	1,538	32,730	50,503	167,451	146	1,795,911	13,237	326,732	274,116	1,180,661	1,165
Age												
5 and younger	78,596	0	1,676	0	76,920	0	529,755	0	16,092	0	513,663	0
6-14	71,139	0	5,817	0	65,322	0	543,076	0	60,459	0	482,617	0
15-20	36,638	0	4,163	7,347	25,128	0	268,199	0	43,322	40,950	183,927	0
21-44	50,007	0	9,411	40,484	81	31	314,508	0	96,635	217,266	454	153
45-64	14,329	4	11,542	2,668	0	115	126,624	29	109,706	15,877	0	1,012
65-74	971	848	119	4	0	0	9,014	8,479	512	23	0	0
75-84	384	382	2	0	0	0	3,148	3,142	6	0	0	0
85 and older	304	304	0	0	0	0	1,587	1,587	0	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	141,434	1,001	16,278	41,626	82,383	146	980,940	8,763	164,473	226,722	579,817	1,165
Male	110,917	537	16,452	8,877	85,051	0	814,953	4,474	162,259	47,394	600,826	0
Unknown	17	0	0	0	17	0	18	0	0	0	18	0
Race												
White	151,533	690	23,381	33,795	93,553	114	1,081,051	5,186	231,943	182,051	660,950	921
African American	40,185	214	5,933	8,460	25,566	12	291,371	1,875	60,625	47,095	181,700	76
Other/unknown	60,650	634	3,416	8,248	48,332	20	423,489	6,176	34,164	44,970	338,011	168
Use of Nursing Facilities^c												
Entire year	400	105	294	1	0	0	3,899	1,065	2,833	1	0	0
Part year	435	54	378	1	0	2	4,254	493	3,740	4	0	17
None	251,533	1,379	32,058	50,501	167,451	144	1,787,758	11,679	320,159	274,111	1,180,661	1,148
Maintenance Assistance Status												
Cash	103,189	813	26,631	31,432	44,313	0	771,842	8,564	275,532	178,671	309,075	0
Medically needy	3,173	288	1,869	421	595	0	20,320	2,428	11,806	2,297	3,789	0
Poverty-related	115,465	34	47	13,489	101,749	146	729,263	134	237	56,094	671,633	1,165
Other/unknown	30,541	403	4,183	5,161	20,794	0	274,486	2,111	39,157	37,054	196,164	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	183,326	1,538	32,241	32,578	116,825	144	1,588,549	13,237	323,870	222,804	1,027,480	1,158
FFS part year, with Rx claims	22,818	0	367	8,024	14,426	1	90,022	0	2,353	27,208	60,459	2
FFS part year, no Rx claims	46,224	0	122	9,901	36,200	1	117,340	0	509	24,104	92,722	5

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

a. Table ND.2 includes the beneficiaries represented by Cell K 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.

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 ND.3
ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC^{a, b}
NONDUAL BENEFICIARIES, KANSAS, 2005

Beneficiary Characteristics	Percentage with at Least One Rx	Mean Number of Rx	Mean Rx \$	\$ per Rx	Mean \$, All Medicaid FFS \$ ^c	Rx \$ as a Percentage of All Medicaid FFS \$ ^d	Number of Beneficiaries
All	54.7	7.0	\$506	\$72	\$3,919	12.9	252,368
Age							
5 and younger	50.7	2.6	133	51	1,910	7.0	78,596
6-14	50.1	4.6	381	84	2,799	13.6	71,139
15-20	57.0	6.4	519	81	4,613	11.2	36,638
21-44	59.9	8.9	666	75	5,370	12.4	50,007
45-64	74.0	35.8	2,452	68	12,949	18.9	14,329
65-74	70.4	34.5	1,945	56	12,422	15.7	971
75-84	59.1	22.8	1,199	53	6,967	17.2	384
85 and older	31.6	16.3	746	46	6,411	11.6	304
Unknown	0.0	0.0	0	0	0	0.0	0
Basis of Eligibility^e							
Aged	63.2	29.8	1,618	54	10,283	15.7	1,538
Disabled	76.9	28.4	2,345	83	15,479	15.1	32,730
Adults	56.2	4.8	231	49	2,538	9.1	50,503
Children	49.8	3.3	218	66	2,010	10.8	167,451
Unknown	71.2	20.3	1,678	83	11,930	14.1	146
Gender							
Female	56.4	7.5	475	63	3,638	13.1	141,434
Male	52.4	6.3	545	86	4,278	12.7	110,917
Unknown	0.0	0.0	0	0	0	0.0	17
Race							
White	58.7	8.6	644	75	4,586	14.0	151,533
African American	48.8	5.6	391	69	3,760	10.4	40,185
Other/unknown	48.5	3.8	235	62	2,358	10.0	60,650
Use of Nursing Facilities^f							
Entire year	95.8	91.5	6,009	66	43,102	13.9	400
Part year	98.2	76.3	5,006	66	54,123	9.2	435
None	54.5	6.8	489	72	3,770	13.0	251,533
Maintenance Assistance Status							
Cash	57.6	10.8	790	74	5,366	14.7	103,189
Medically needy	51.1	10.8	1,058	98	10,146	10.4	3,173
Poverty related	48.6	2.5	125	50	1,603	7.8	115,465
Other/unknown	67.7	11.0	927	84	7,139	13.0	30,541

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

a. Table ND.3 includes beneficiaries represented by Cell K of Table 1.

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

c. In eight states (DE, IA, IL, NE, NY, TX, UT, and WV) the expenditures in this column include only Rx drug expenditures for those enrolled in capitated managed care plans, and not expenditures for other services covered by the plans or long-term-care services not covered by the plans. As a result, the amounts shown in this column for all Medicaid fee-for-service expenditures are lower than they would otherwise be.

d. In eight states (DE, IA, IL, NE, NY, TX, UT, and WV) the Rx share of expenditures for all Medicaid services shown in this column is higher than it would be if all expenditures for these other services, including services provided in capitated managed care plans and long-term-care services, were included.

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

f. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.

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

TABLE ND.4
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a, b}
 NONDUAL BENEFICIARIES, KANSAS, 2005

Beneficiary Characteristics	Mean Number of Rx	Mean Rx \$	Rx \$ as a Percentage of All Medicaid FFS \$ ^c	Number of Rx, Percentage with:						Mean \$, All Medicaid FFS \$ ^d	Number	
				None	More than 0, but 1 or Less	More than 1, but 2 or Less	More than 2, but 5 or Less	More than 5, but 10 or Less	More than 10		Beneficiaries	Benefit Months
All	1.0	\$71	12.9	45.3	40.6	5.9	5.5	2.1	0.6	\$551	252,368	1,795,911
Age												
5 and younger	0.4	20	7.0	49.3	46.1	3.2	1.2	0.1	0.0	283	78,596	529,755
6-14	0.6	50	13.6	49.9	40.1	5.1	4.2	0.7	0.0	367	71,139	543,076
15-20	0.9	71	11.2	43.0	42.2	7.1	6.2	1.4	0.1	630	36,638	268,199
21-44	1.4	106	12.4	40.1	38.4	9.0	8.6	3.2	0.7	854	50,007	314,508
45-64	4.1	277	18.9	26.0	19.3	9.9	21.5	16.5	6.8	1,465	14,329	126,624
65-74	3.7	210	15.7	29.6	17.7	8.9	21.8	15.4	6.6	1,338	971	9,014
75-84	2.8	146	17.2	40.9	19.0	8.1	20.1	9.4	2.6	850	384	3,148
85 and older	3.1	143	11.6	68.4	3.3	4.3	11.2	9.9	3.0	1,228	304	1,587
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	3.5	188	15.7	36.8	16.1	8.2	20.4	13.5	5.1	1,195	1,538	13,237
Disabled	2.8	235	15.1	23.1	29.4	11.8	20.2	11.5	3.9	1,551	32,730	326,732
Adults	0.9	43	9.1	43.8	40.7	8.1	5.9	1.3	0.1	468	50,503	274,116
Children	0.5	31	10.8	50.2	43.0	4.0	2.4	0.3	0.0	285	167,451	1,180,661
Unknown	2.5	210	14.1	28.8	21.2	15.8	25.3	7.5	1.4	1,495	146	1,165
Gender												
Female	1.1	69	13.1	43.6	41.6	6.1	5.6	2.4	0.8	525	141,434	980,940
Male	0.9	74	12.7	47.6	39.4	5.6	5.4	1.7	0.3	582	110,917	814,953
Unknown	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	0	17	18
Race												
White	1.2	90	14.0	41.3	41.3	6.9	6.9	2.7	0.8	643	151,533	1,081,051
African American	0.8	54	10.4	51.2	37.7	4.9	4.4	1.5	0.4	519	40,185	291,371
Other/unknown	0.5	34	10.0	51.5	40.9	3.8	2.9	0.8	0.1	338	60,650	423,489
Use of Nursing Facilities^f												
Entire year	9.4	616	13.9	4.2	1.5	2.3	17.5	40.5	34.0	4,422	400	3,899
Part year	7.8	512	9.2	1.8	6.0	7.6	22.3	38.4	23.9	5,535	435	4,254
None	1.0	69	13.0	45.5	40.7	5.9	5.5	2.0	0.5	530	251,533	1,787,758
Maintenance Assistance Status												
Cash	1.4	106	14.7	42.4	37.5	6.9	8.1	3.9	1.2	717	103,189	771,842
Medically needy	1.7	165	10.4	48.9	25.1	8.2	12.4	4.6	0.8	1,584	3,173	20,320
Poverty related	0.4	20	7.8	51.4	42.7	4.0	1.7	0.1	0.0	254	115,465	729,263
Other/unknown	1.2	103	13.0	32.3	44.8	9.0	10.3	3.0	0.6	794	30,541	274,486

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

a. Table ND.4 includes the beneficiaries represented by Cell K of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

c. In eight states (DE, IA, IL, NE, NY, TX, UT, and WV) the expenditures in this column include only Rx drug expenditures for those enrolled in capitated managed care plans, and not expenditures for other services covered by the plans or long-term-care services not covered by the plans. As a result, the amounts shown in this column for all Medicaid fee-for-service expenditures are lower than they would otherwise be.

d. In eight states (DE, IA, IL, NE, NY, TX, UT, and WV) the Rx share of expenditures for all Medicaid services shown in this column is higher than it would be if all expenditures for these other services, including services provided in capitated managed care plans and long-term-care services, were included.

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

f. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.

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

TABLE ND.5
AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC^{a, b, c}
NONDUAL BENEFICIARIES, KANSAS, 2005

Beneficiary Characteristics	All Rx			Patented Brand-Name Drugs			Off-Patent Brand-Name Drugs			Generic Drugs		
	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx
All	1.0	\$71	\$72	0.4	\$57	\$140	0.0	\$2	\$78	0.5	\$12	\$21
Age												
5 and younger	0.4	20	51	0.1	15	114	0.0	1	50	0.2	4	16
6-14	0.6	50	84	0.3	43	131	0.0	2	78	0.2	5	22
15-20	0.9	71	81	0.4	60	142	0.0	3	74	0.4	9	21
21-44	1.4	106	75	0.5	84	167	0.0	4	77	0.9	19	21
45-64	4.1	277	68	1.5	210	136	0.1	9	99	2.4	59	24
65-74	3.7	210	56	1.5	168	110	0.1	5	53	2.1	37	17
75-84	2.8	146	53	1.2	118	96	0.1	2	37	1.5	26	17
85 and older	3.1	143	46	1.3	108	85	0.1	5	39	1.7	30	17
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility^d												
Aged	3.5	188	54	1.4	151	104	0.1	4	48	1.9	33	17
Disabled	2.8	235	83	1.2	189	155	0.1	7	96	1.5	39	25
Adults	0.9	43	49	0.2	31	127	0.0	2	59	0.6	10	16
Children	0.5	31	66	0.2	25	120	0.0	1	65	0.2	5	19
Unknown	2.5	210	83	0.9	181	190	0.0	1	47	1.6	29	18
Gender												
Female	1.1	69	63	0.4	53	129	0.0	3	71	0.6	13	20
Male	0.9	74	86	0.4	62	153	0.0	2	91	0.4	10	23
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Race												
White	1.2	90	75	0.5	73	142	0.0	3	81	0.7	15	22
African American	0.8	54	69	0.3	43	141	0.0	2	79	0.4	9	20
Other/unknown	0.5	34	62	0.2	27	124	0.0	1	61	0.3	6	18
Use of Nursing Facilities^e												
Entire year	9.4	616	66	3.5	464	133	0.2	17	76	5.7	135	24
Part year	7.8	512	66	2.8	372	133	0.2	14	75	4.8	125	26
None	1.0	69	72	0.4	55	140	0.0	2	78	0.5	11	21
Maintenance Assistance Status												
Cash	1.4	106	74	0.6	84	147	0.0	4	85	0.8	19	23
Medically needy	1.7	165	98	0.6	137	223	0.0	3	83	1.0	25	24
Poverty related	0.4	20	50	0.1	15	103	0.0	1	55	0.2	4	16
Other/unknown	1.2	103	84	0.6	88	137	0.0	3	83	0.5	12	22

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

a. Table ND.5 includes the beneficiaries represented by Cell K of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

c. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In Kansas, 0.3 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, <http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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

e. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.

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

TABLE ND 6

	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per Rx				Users ^e				
Therapeutic Category	Total	Patented Brand- Name	Off- Brand- Name	Generic	Total	Patented Brand- Name	Off- Brand- Name	Generic	Total	Patented Brand- Name	Off- Brand- Name	Generic	Total Number of Rx	Total Rx \$	Number of Users	As a Percentage of All Benes	Number of Benefit Months
Anti-infective Agents	0.3	0.1	0.0	0.2	\$12	\$7	\$1	\$4	\$44	\$103	\$59	\$21	231,512	\$10,290,248	92,828	36.8	887,300
Biologicals	0.5	0.4	0.0	0.0	544	460	65	19	1174	1,124	1,572	1,484	1,837	2,155,790	447	0.2	3,966
Antineoplastic Agents	0.5	0.2	0.0	0.3	138	121	0	17	269	701	59	51	3,417	917,505	651	0.3	6,638
Endocrine/Metabolic Drugs	0.5	0.2	0.0	0.3	25	18	2	5	52	102	73	19	154,616	8,025,706	32,443	12.9	316,714
Cardiovascular Agents	1.1	0.4	0.0	0.7	43	34	0	9	39	83	30	12	190,544	7,336,911	16,613	6.6	170,372
Respiratory Agents	0.4	0.2	0.0	0.2	22	20	0	3	58	96	38	15	193,284	11,116,765	50,921	20.2	495,978
Gastrointestinal Agents	0.5	0.3	0.0	0.2	50	47	0	3	102	160	36	16	87,391	8,897,628	17,858	7.1	177,689
Genitourinary Agents	0.3	0.1	0.0	0.1	15	11	1	3	53	85	56	22	19,880	1,063,273	7,461	3.0	70,328
CNS Drugs	1.0	0.6	0.0	0.4	117	107	1	9	118	183	82	24	307,383	36,396,049	31,492	12.5	310,791
Stimulants/Anti-obesity/Anorexia	0.8	0.6	0.0	0.1	67	64	0	4	90	101	41	30	92,078	8,258,476	12,214	4.8	122,515
Miscellaneous Psychological/ Neurological Agents	0.4	0.3	0.0	0.1	122	116	0	6	314	363	102	84	3,760	1,181,865	926	0.4	9,707
Analgesics and Anesthetics	0.5	0.1	0.0	0.4	23	9	2	11	46	164	189	26	199,068	9,160,178	42,110	16.7	402,873
Neuromuscular Agents	0.8	0.4	0.0	0.4	72	57	2	14	92	159	84	33	138,738	12,729,731	17,180	6.8	177,163
Nutritional Products	0.4	0.0	0.0	0.3	5	1	0	4	15	22	17	14	32,160	490,653	10,881	4.3	91,798
Hematological Agents	0.6	0.2	0.0	0.4	173	166	1	6	280	726	34	15	17,822	4,996,689	2,891	1.1	28,964
Topical Products	0.2	0.1	0.0	0.1	8	5	0	3	40	81	42	21	88,377	3,569,212	43,843	17.4	436,553
Miscellaneous Products	0.5	0.2	0.0	0.3	91	60	6	25	195	397	244	86	4,596	897,112	972	0.4	9,839
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	11	0	0	0	51	0	0	0	2,307	117,193	972	0.4	10,339
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.	1,768,770	127,600,984	n.a.	n.a.	n.a.

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

a. Table ND.6 includes the beneficiaries represented by Cell K of Table 1. 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.

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

d. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In Kansas, 0.3 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, <http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad77d87b6615> (October 26, 2007).

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

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

Nondual Beneficiaries

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

Top 10 Drug Groups	Users			Among Users			
	Total Medicaid Rx \$	Number of Users	As a Percentage of All Beneficiaries	Number of Benefit Months	Number of Rx per Benefit Month	\$ per Rx	Rx \$ per Benefit Month
ANTIPSYCHOTICS	\$26,551,020	18,165	7.2	195,254	0.6	\$224	\$136
ANTICONVULSANT	11,979,315	14,468	5.7	153,767	0.7	112	78
ANTIDEPRESSANTS	8,361,181	28,016	11.1	282,259	0.5	60	30
STIMULANTS/ANTI-OBESITY/ANOREXIANTS	8,258,502	14,528	5.8	148,087	0.6	90	56
ANTIASTHMATIC	8,189,530	43,368	17.2	432,920	0.3	68	19
ULCER DRUGS	6,421,301	15,390	6.1	156,664	0.4	101	41
ANALGESICS - Narcotic	5,602,013	44,723	17.7	434,259	0.3	41	13
MISC. HEMATOLOGICAL	3,759,066	970	0.4	10,252	0.6	643	367
ANTIDIABETIC	3,723,667	8,334	3.3	86,952	0.6	67	43
ANTHYPERLIPIDEMIC	3,049,410	5,587	2.2	60,657	0.6	91	50
Total	85,895,005	193,549		1,961,071	n.a.	n.a.	n.a.

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

a. Table ND.7 includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2005. A beneficiary who used drugs from two or more groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2005. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispn.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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

Nondual Beneficiaries

TABLE ND.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}
 NONDUAL BENEFICIARIES, KANSAS, 2005

Beneficiary Characteristics	All Top 10 Drug Groups			ANTIPSYCHOTICS				ANTICONVULSANT				
	Number of Rx	Rx \$	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	871,249	\$85,895,005	18,165	7.2	195,254	0.6	\$136	14,468	5.7	153,767	0.7	\$78
Female												
All Females	490,789	42,631,731	8,347	5.9	89,302	0.6	125	8,375	5.9	88,173	0.7	72
Female, Disabled												
All Ages	300,491	28,877,203	4,800	29.5	53,852	0.6	145	5,373	33.0	60,322	0.7	81
5 and younger	2,737	215,450	12	1.7	140	0.5	58	90	12.8	969	0.8	74
6-14	16,627	1,906,926	471	25.9	5,173	0.6	123	482	26.5	5,446	0.8	114
15-20	16,557	1,763,179	528	32.3	5,881	0.6	114	487	29.8	5,474	0.8	97
21-44	88,993	9,448,620	1,836	35.9	20,707	0.6	146	2,063	40.4	23,299	0.7	89
45-64	175,059	15,504,964	1,949	28.1	21,919	0.7	157	2,241	32.3	25,041	0.7	63
65-74	518	38,064	4	5.4	32	1.1	286	10	13.5	93	0.7	33
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles												
All Ages	190,298	13,754,528	3,547	2.8	35,450	0.5	95	3,002	2.4	27,851	0.5	54
5 and younger	13,516	880,450	45	0.1	480	0.5	88	107	0.3	969	0.5	42
6-14	43,434	3,995,156	1,056	3.3	11,502	0.5	111	502	1.6	5,300	0.6	80
15-20	37,926	3,241,991	1,181	6.3	12,383	0.5	101	691	3.7	7,038	0.6	72
21-44	71,515	3,921,671	1,027	3.0	8,758	0.3	61	1,418	4.2	11,712	0.4	36
45-64	10,074	680,695	106	6.0	897	0.4	61	154	8.7	1,387	0.5	40
65-74	10,550	822,776	95	16.7	1,034	0.9	169	101	17.8	1,118	0.8	52
75-84	1,986	132,279	19	8.7	220	0.6	63	19	8.7	216	0.5	29
85 and older	1,297	79,510	18	8.5	176	1.2	95	10	4.7	111	0.6	23
Male												
All Males	380,460	43,263,274	9,818	8.9	105,952	0.6	145	6,093	5.5	65,594	0.7	86
Male, Disabled												
All Ages	212,285	24,940,582	5,328	32.4	59,163	0.7	160	4,112	25.0	46,023	0.8	93
5 and younger	4,038	1,039,603	62	6.4	662	0.5	97	122	12.6	1,360	0.6	63
6-14	47,245	5,648,732	1,652	41.3	18,321	0.6	133	932	23.3	10,531	0.8	95
15-20	29,540	3,756,817	995	39.4	11,144	0.7	151	657	26.0	7,434	0.9	121
21-44	56,611	7,496,122	1,624	37.7	18,239	0.7	186	1,417	32.9	16,010	0.9	105
45-64	74,635	6,974,572	982	21.3	10,709	0.7	175	980	21.3	10,673	0.7	57
65-74	216	24,736	13	28.9	88	0.7	203	4	8.9	15	0.9	63
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Nondual Beneficiaries

TABLE ND.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}
 NONDUAL BENEFICIARIES, KANSAS, 2005

Beneficiary Characteristics	All Top 10 Drug Groups			ANTIPSYCHOTICS				ANTICONVULSANT				
	Number of Rx	Rx \$	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month
Male, Other Eligibles												
All Ages	168,175	18,322,692	4,490	4.8	46,789	0.6	127	1,981	2.1	19,571	0.6	69
5 and younger	21,053	1,747,760	130	0.3	1,399	0.4	89	154	0.4	1,466	0.4	39
6-14	81,706	9,198,318	2,400	7.2	25,853	0.6	135	805	2.4	8,601	0.6	73
15-20	41,777	4,864,962	1,670	12.2	17,021	0.6	121	629	4.6	6,288	0.7	85
21-44	12,446	1,609,644	166	2.4	1,308	0.4	90	266	3.9	2,051	0.4	35
45-64	5,089	383,171	46	4.5	383	0.4	79	78	7.7	612	0.5	36
65-74	3,777	343,827	50	17.7	559	0.8	154	32	11.3	377	0.8	59
75-84	1,537	131,420	14	8.6	142	0.7	154	15	9.2	152	0.9	46
85 and older	790	43,590	14	15.4	124	0.6	47	2	2.2	24	1.0	34
Unknown	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

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

a. Table ND.7A includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2005. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2005. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispn.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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

Nondual Beneficiaries

TABLE ND.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}
 NONDUAL BENEFICIARIES, KANSAS, 2005

Beneficiary Characteristics	ANTIDEPRESSANTS					STIMULANTS/ANTI-OBESITY/ANOREXIANTS					ANTIASTHMATIC				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	28,016	11.1	282,259	0.5	\$30	14,528	5.8	148,087	0.6	\$56	43,368	17.2	432,920	0.3	\$19
Female															
All Females	19,017	13.4	188,506	0.5	30	4,224	3.0	42,988	0.6	53	22,597	16.0	226,048	0.3	19
Female, Disabled															
All Ages	8,659	53.2	96,869	0.6	36	1,153	7.1	12,779	0.6	55	6,797	41.8	76,802	0.4	27
5 and younger	11	1.6	122	0.4	6	23	3.3	230	0.4	28	320	45.4	3,612	0.3	22
6-14	366	20.1	3,959	0.5	23	557	30.6	6,059	0.6	56	496	27.2	5,649	0.3	25
15-20	628	38.4	6,834	0.5	31	254	15.5	2,813	0.7	52	414	25.3	4,572	0.3	17
21-44	3,022	59.2	34,072	0.5	36	172	3.4	2,004	0.5	51	1,883	36.9	21,351	0.3	22
45-64	4,621	66.6	51,808	0.6	37	147	2.1	1,673	0.5	64	3,667	52.9	41,477	0.4	32
65-74	11	14.9	74	0.6	15	0	0.0	0	0.0	0	17	23.0	141	0.6	50
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	10,358	8.3	91,637	0.4	23	3,071	2.5	30,209	0.6	51	15,800	12.6	149,246	0.2	15
5 and younger	38	0.1	391	0.3	7	113	0.3	1,188	0.4	36	5,231	13.9	50,793	0.2	13
6-14	1,182	3.7	12,230	0.5	24	2,024	6.3	20,326	0.6	54	4,560	14.2	44,421	0.3	17
15-20	2,506	13.3	24,483	0.4	23	604	3.2	6,046	0.5	48	2,450	13.0	23,781	0.2	14
21-44	5,784	17.1	46,614	0.3	23	301	0.9	2,405	0.4	49	3,030	9.0	25,046	0.3	12
45-64	592	33.5	5,081	0.4	26	27	1.5	220	0.4	51	295	16.7	2,610	0.3	22
65-74	193	33.9	2,183	0.6	25	2	0.4	24	0.8	16	191	33.6	2,123	0.5	27
75-84	38	17.4	407	0.6	31	0	0.0	0	0.0	0	28	12.8	325	0.4	22
85 and older	25	11.7	248	0.8	39	0	0.0	0	0.0	0	15	7.0	147	0.4	18
Male															
All Males	8,999	8.1	93,753	0.5	30	10,304	9.3	105,099	0.6	57	20,771	18.7	206,872	0.3	19
Male, Disabled															
All Ages	4,840	29.4	53,388	0.6	33	3,201	19.5	35,002	0.7	60	4,368	26.5	48,784	0.4	27
5 and younger	25	2.6	265	0.3	9	77	7.9	768	0.4	26	526	54.2	5,715	0.3	23
6-14	887	22.2	9,725	0.6	25	2,059	51.5	22,436	0.7	61	1,206	30.2	13,714	0.3	22
15-20	823	32.6	9,132	0.6	33	836	33.1	9,293	0.7	62	532	21.0	6,057	0.3	27
21-44	1,443	33.5	16,026	0.6	36	165	3.8	1,813	0.7	66	655	15.2	7,411	0.4	24
45-64	1,658	36.0	18,218	0.6	35	64	1.4	692	0.5	43	1,439	31.2	15,797	0.5	35
65-74	4	8.9	22	0.8	9	0	0.0	0	0.0	0	10	22.2	90	0.4	18
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Nondual Beneficiaries

TABLE ND.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}
 NONDUAL BENEFICIARIES, KANSAS, 2005

Beneficiary Characteristics	ANTIDEPRESSANTS					STIMULANTS/ANTI-OBESITY/ANOREXIANTS					ANTIASTHMATIC				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month
Male, Other Eligibles															
All Ages	4,159	4.4	40,365	0.5	26	7,103	7.5	70,097	0.6	56	16,403	17.4	158,088	0.2	17
5 and younger	52	0.1	541	0.3	6	300	0.8	2,916	0.4	30	7,858	20.0	75,670	0.2	14
6-14	1,526	4.6	15,886	0.5	23	5,226	15.8	51,431	0.6	56	5,942	17.9	57,746	0.3	18
15-20	1,646	12.0	16,231	0.5	28	1,500	11.0	15,140	0.6	59	1,951	14.3	19,114	0.3	18
21-44	646	9.4	5,155	0.4	23	66	1.0	526	0.4	34	401	5.9	3,109	0.2	13
45-64	187	18.4	1,490	0.5	29	10	1.0	77	0.8	68	120	11.8	1,038	0.4	27
65-74	61	21.6	665	0.6	34	0	0.0	0	0.0	0	96	33.9	1,037	0.5	43
75-84	22	13.5	208	0.7	33	0	0.0	0	0.0	0	26	16.0	276	0.5	45
85 and older	19	20.9	189	0.8	32	1	1.1	7	1.3	188	9	9.9	98	0.9	37
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

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

a. Table ND.7B includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2005. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2005. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispn.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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

Nondual Beneficiaries

TABLE ND.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}
 NONDUAL BENEFICIARIES, KANSAS, 2005

Beneficiary Characteristics	ULCER DRUGS					ANALGESICS - Narcotic					MISC. HEMATOLOGICAL				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	15,390	6.1	156,664	0.4	\$41	44,723	17.7	434,259	0.3	\$13	970	0.4	10,252	0.6	\$367
Female															
All Females	10,264	7.3	105,121	0.4	42	32,471	23.0	310,640	0.3	12	556	0.4	6,008	0.5	63
Female, Disabled															
All Ages	5,096	31.3	57,581	0.5	56	10,168	62.5	114,714	0.4	24	448	2.8	4,953	0.6	63
5 and younger	133	18.9	1,399	0.4	31	78	11.1	876	0.1	2	1	0.1	12	0.1	4
6-14	144	7.9	1,643	0.5	39	192	10.5	2,193	0.1	2	0	0.0	0	0.0	0
15-20	215	13.1	2,432	0.4	32	491	30.0	5,532	0.2	4	0	0.0	0	0.0	0
21-44	1,537	30.1	17,479	0.5	49	3,726	72.9	42,394	0.4	23	55	1.1	644	0.5	61
45-64	3,057	44.1	34,532	0.6	63	5,667	81.7	63,602	0.5	28	391	5.6	4,296	0.6	63
65-74	10	13.5	96	0.6	46	14	18.9	117	1.2	53	1	1.4	1	1.0	36
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	5,168	4.1	47,540	0.3	25	22,303	17.8	195,926	0.2	5	108	0.1	1,055	0.5	64
5 and younger	812	2.2	6,989	0.2	11	849	2.3	8,638	0.1	1	1	0.0	12	0.2	68
6-14	614	1.9	6,298	0.2	16	1,604	5.0	16,598	0.1	1	1	0.0	12	0.1	3
15-20	1,011	5.4	9,963	0.2	20	4,493	23.9	42,073	0.2	1	1	0.0	4	0.3	9
21-44	2,139	6.3	18,360	0.3	27	14,134	41.9	116,935	0.3	6	25	0.1	159	0.3	78
45-64	273	15.4	2,339	0.4	43	821	46.4	7,166	0.4	16	24	1.4	238	0.4	47
65-74	238	41.8	2,728	0.6	56	302	53.1	3,473	0.4	9	41	7.2	457	0.6	73
75-84	55	25.1	585	0.5	43	66	30.1	735	0.4	8	11	5.0	125	0.4	48
85 and older	26	12.2	278	0.7	72	34	16.0	308	0.8	26	4	1.9	48	0.7	71
Male															
All Males	5,126	4.6	51,543	0.4	39	12,252	11.0	123,619	0.3	16	414	0.4	4,244	0.6	797
Male, Disabled															
All Ages	2,510	15.3	27,813	0.5	52	5,162	31.4	56,821	0.4	26	314	1.9	3,317	0.6	406
5 and younger	145	14.9	1,573	0.4	29	113	11.6	1,286	0.1	1	6	0.6	67	0.9	10,194
6-14	232	5.8	2,614	0.4	39	384	9.6	4,443	0.1	2	3	0.1	36	1.0	4,366
15-20	200	7.9	2,238	0.4	43	488	19.3	5,486	0.2	3	1	0.0	12	0.2	21
21-44	738	17.2	8,221	0.5	52	1,552	36.1	16,990	0.4	27	24	0.6	256	0.6	1,238
45-64	1,190	25.8	13,134	0.6	59	2,615	56.7	28,557	0.6	35	279	6.1	2,943	0.6	64
65-74	5	11.1	33	0.6	26	10	22.2	59	0.3	8	1	2.2	3	0.3	11
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Nondual Beneficiaries

TABLE ND.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}
 NONDUAL BENEFICIARIES, KANSAS, 2005

Beneficiary Characteristics	ULCER DRUGS					ANALGESICS - Narcotic					MISC. HEMATOLOGICAL				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month
Male, Other Eligibles															
All Ages	2,616	2.8	23,730	0.3	25	7,090	7.5	66,798	0.2	7	100	0.1	927	0.6	2,195
5 and younger	1,015	2.6	8,509	0.2	11	1,240	3.2	12,860	0.1	1	8	0.0	79	0.9	3,468
6-14	525	1.6	5,459	0.2	18	1,641	5.0	17,093	0.1	1	2	0.0	13	1.6	45,607
15-20	402	2.9	3,905	0.3	29	1,729	12.6	16,797	0.1	1	3	0.0	29	0.8	12,499
21-44	414	6.1	3,337	0.3	40	1,938	28.3	15,219	0.4	17	14	0.2	99	0.5	7,702
45-64	130	12.8	1,106	0.4	56	390	38.3	3,182	0.6	32	29	2.8	244	0.5	54
65-74	82	29.0	913	0.5	58	99	35.0	1,105	0.3	6	21	7.4	226	0.5	48
75-84	30	18.4	312	0.5	63	39	23.9	406	0.5	25	17	10.4	173	0.7	81
85 and older	18	19.8	189	0.7	53	14	15.4	136	0.8	25	6	6.6	64	0.7	80
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

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

a. Table ND.7C includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2005. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2005. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispn.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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

Nondual Beneficiaries

TABLE ND.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}
 NONDUAL BENEFICIARIES, KANSAS, 2005

Beneficiary Characteristics	ANTIDIABETIC					ANTIHYPERTENSIVE					Number of Beneficiaries	Number of Benefit Months
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month		
All	8,334	3.3	86,952	0.6	\$43	5,587	2.2	60,657	0.6	\$50	252,368	1,795,911
Female												
All Females	5,847	4.1	61,093	0.6	42	3,625	2.6	39,732	0.5	50	141,434	980,940
Female, Disabled												
All Ages	3,991	24.5	44,679	0.7	45	2,770	17.0	31,504	0.6	52	16,278	164,473
5 and younger	1	0.1	12	1.9	299	2	0.3	24	0.3	6	705	6,638
6-14	34	1.9	358	0.6	37	1	0.1	12	0.1	4	1,821	19,082
15-20	79	4.8	868	0.5	27	10	0.6	115	0.6	32	1,635	16,871
21-44	908	17.8	10,284	0.6	43	522	10.2	5,997	0.5	44	5,108	53,521
45-64	2,957	42.6	33,100	0.7	47	2,224	32.1	25,274	0.6	55	6,934	68,049
65-74	12	16.2	57	0.8	43	11	14.9	82	0.5	56	74	309
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	3
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Female, Other Eligibles												
All Ages	1,856	1.5	16,414	0.5	33	855	0.7	8,228	0.5	42	125,156	816,467
5 and younger	15	0.0	134	0.4	48	29	0.1	269	0.1	3	37,655	251,934
6-14	141	0.4	1,327	0.5	31	7	0.0	59	0.4	37	32,172	236,822
15-20	202	1.1	1,858	0.5	33	26	0.1	262	0.2	17	18,803	125,076
21-44	920	2.7	7,394	0.5	29	325	1.0	2,871	0.3	30	33,757	182,889
45-64	247	14.0	1,946	0.6	33	195	11.0	1,650	0.5	45	1,768	10,982
65-74	261	45.9	2,953	0.7	44	199	35.0	2,280	0.6	58	569	5,867
75-84	51	23.3	599	0.7	35	54	24.7	623	0.6	56	219	1,822
85 and older	19	8.9	203	0.8	28	20	9.4	214	0.7	51	213	1,075
Male												
All Males	2,487	2.2	25,859	0.7	45	1,962	1.8	20,925	0.6	50	110,917	814,953
Male, Disabled												
All Ages	1,764	10.7	19,263	0.7	44	1,510	9.2	16,818	0.6	53	16,452	162,259
5 and younger	2	0.2	24	1.2	286	7	0.7	75	0.1	3	971	9,454
6-14	63	1.6	709	0.8	56	7	0.2	77	0.4	22	3,996	41,377
15-20	37	1.5	418	0.7	51	25	1.0	286	0.5	35	2,528	26,451
21-44	366	8.5	4,087	0.6	41	348	8.1	3,996	0.6	47	4,303	43,114
45-64	1,289	28.0	13,950	0.7	44	1,120	24.3	12,364	0.6	55	4,608	41,657
65-74	7	15.6	75	0.6	25	3	6.7	20	0.8	45	45	203
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	3
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0

Nondual Beneficiaries

TABLE ND.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
 NONDUAL BENEFICIARIES, KANSAS, 2005

Beneficiary Characteristics	ANTIDIABETIC					ANTIHYPERTENSIVE					Number of Beneficiaries	Number of Benefit Months
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month		
Male, Other Eligibles												
All Ages	723	0.8	6,596	0.6	45	452	0.5	4,107	0.5	41	94,465	652,694
5 and younger	21	0.1	166	0.7	50	47	0.1	488	0.1	3	39,248	261,711
6-14	143	0.4	1,310	0.7	51	18	0.1	174	0.3	16	33,150	245,795
15-20	112	0.8	1,140	0.7	66	20	0.1	192	0.3	22	13,672	99,801
21-44	174	2.5	1,339	0.6	34	140	2.0	1,090	0.4	38	6,839	34,984
45-64	126	12.4	1,083	0.6	38	106	10.4	847	0.5	45	1,019	5,936
65-74	95	33.6	1,007	0.7	45	76	26.9	826	0.6	64	283	2,635
75-84	41	25.2	441	0.7	31	37	22.7	399	0.6	66	163	1,320
85 and older	11	12.1	110	0.8	34	8	8.8	91	0.7	40	91	512
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	17	18

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

a. Table ND.7D includes the beneficiaries represented by Cell K 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.medspan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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

Nondual Beneficiaries

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

Beneficiary Characteristics	Rx \$ per Benefit Month	Number of Rx per Benefit Month	Number of All-Year Nursing Facility Residents	Benefit Months Among All- Year Nursing Facility Residents
All	\$616	9.4	400	3,899
Age				
0-64	693	9.8	291	2,823
65-74	535	9.5	44	458
75-84	352	7.5	24	239
85 and older	309	7.1	41	379
Unknown	0	0.0	0	0
Gender				
Female	635	9.6	242	2,410
Male	587	9.1	158	1,489
Unknown	0	0.0	0	0
Race				
White	599	9.1	326	3,166
African American	587	9.6	44	435
Other/unknown	840	11.8	30	298
Basis of Eligibility^c				
Aged	412	8.2	105	1,065
Disabled	694	9.9	294	2,833
Adults	309	8.0	1	1
Children	0	0.0	0	0
Unknown	0	0.0	0	0

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

a. Table ND.8 includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their 2005 Medicaid enrollment. A total of 435 beneficiaries who were in nursing facilities for part of their enrollment and their 4,254 benefit months were excluded from the analysis. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

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

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

Nondual Beneficiaries

TABLE ND.9
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d, e}
 NONDUAL BENEFICIARIES, KANSAS, 2005

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per Rx				Users				
	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total Number of Rx	Total Rx \$	Number of Users	As a Percentage of All-Year Nursing Facility Residents	Number of Benefit Months
Anti-infective Agents	0.5	0.1	0.0	0.3	\$27	\$15	\$3	\$8	\$54	\$118	\$85	\$25	1,414	\$76,780	272	68.0	2,863
Biologicals	0.0	0.0	0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0.0	0
Antineoplastic Agents	0.6	0.3	0.0	0.3	186	163	0	24	332	614	0	80	55	18,267	14	3.5	98
Endocrine/Metabolic Drugs	1.5	0.7	0.1	0.8	73	62	2	10	49	94	27	13	3,012	147,206	192	48.0	2,004
Cardiovascular Agents	2.4	0.7	0.0	1.7	75	54	1	20	31	76	25	12	6,937	214,716	282	70.5	2,861
Respiratory Agents	0.8	0.4	0.0	0.4	39	32	0	7	48	84	64	15	1,276	60,698	151	37.8	1,555
Gastrointestinal Agents	1.3	0.6	0.0	0.7	81	71	0	11	64	127	81	15	2,833	181,606	219	54.8	2,229
Genitourinary Agents	0.8	0.4	0.0	0.4	48	34	2	12	60	85	70	32	879	52,855	103	25.8	1,112
CNS Drugs	2.5	1.5	0.0	1.0	274	238	3	33	111	164	92	34	8,405	933,474	332	83.0	3,408
Stimulants/Anti-obesity/Anorexia	1.1	0.6	0.0	0.5	85	76	0	9	74	124	0	17	62	4,591	8	2.0	54
Miscellaneous Psychological/Neurological Agents	1.0	0.9	0.0	0.0	214	213	0	0	223	224	0	63	623	139,027	64	16.0	651
Analgesics and Anesthetics	1.4	0.2	0.1	1.2	71	16	14	41	49	97	134	35	3,279	162,182	222	55.5	2,272
Neuromuscular Agents	1.7	0.4	0.0	1.3	111	61	2	49	65	155	56	37	4,209	272,037	239	59.8	2,448
Nutritional Products	0.9	0.0	0.0	0.9	17	0	1	16	18	12	33	18	1,210	22,378	136	34.0	1,334
Hematological Agents	1.2	0.3	0.0	0.8	65	55	1	10	54	168	13	12	1,247	67,551	107	26.8	1,036
Topical Products	0.5	0.1	0.0	0.3	19	10	1	8	41	94	51	24	1,005	41,463	205	51.3	2,217
Miscellaneous Products	0.3	0.0	0.0	0.3	30	27	0	3	87	568	0	10	80	6,970	21	5.3	234
Unknown Therapeutic Category	0.5	0.0	0.0	0.0	9	0	0	0	19	0	0	0	85	1,621	17	4.3	186
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.	36,611	2,403,422	n.a.	n.a.	n.a.

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

a. Table ND.9 includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2005. A total of 435 beneficiaries who were in nursing facilities for part of their enrollment and their 4,254 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.medispain.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.medispain.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

In Kansas, 0.3 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.

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.

Nondual Beneficiaries

TABLE ND.10
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS,
 BY TOP-10 DRUG GROUP^{a, b, c, d}
 NONDUAL BENEFICIARIES, KANSAS, 2005

Top 10 Drug Groups in Nursing Facilities	Total Medicaid Rx \$	Users		Among Users		Rx \$ per Benefit Month	Benefit Month
		Number of Users	As a Percentage of All-Year Nursing Facility Residents	Number of Benefit Months	Number of Rx per Benefit Month		
ANTIPSYCHOTICS	\$676,230	307	76.8	3,260	1.1	\$192	\$207
ANTIDEPRESSANTS	225,919	367	91.8	3,915	0.9	62	58
ANTICONVULSANT	220,636	254	63.5	2,652	1.1	77	83
ULCER DRUGS	157,417	241	60.3	2,504	0.8	77	63
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	139,610	76	19.0	794	0.8	213	176
ANALGESICS - Narcotic	118,613	257	64.3	2,667	0.9	49	44
ANTIDIABETIC	105,884	181	45.3	1,967	1.1	51	54
ANTIHYPERTENSIVE	79,329	93	23.3	1,035	0.9	84	77
ASTHMATIC	49,964	163	40.8	1,627	0.6	49	31
ANTIHYPERTENSIVE	47,584	169	42.3	1,842	0.9	29	26
Total	1,821,186	2,108		22,263	n.a.	n.a.	n.a.

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

a. Table ND.10 includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2005. A total of 435 beneficiaries who were in nursing facilities for part of their enrollment and their 4,254 benefit months were excluded from the analysis.

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

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

d. The top 10 drug groups were determined based on total 2005 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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

Nondual Beneficiaries

TABLE ND.10A
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR TOP 10 DRUG GROUPS COMBINED AND FIRST
 AND SECOND TOP DRUG GROUPS SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c, d}
 NONDUAL BENEFICIARIES, KANSAS, 2005

Beneficiary Characteristics	All Top 10 Drug Groups			ANTIPSYCHOTICS				ANTIDEPRESSANTS				
	Number of Rx	Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
All	20,848	\$1,821,186	307	76.7	3,260	1.1	\$207	367	91.8	3,915	0.9	\$58
Female												
All Females	13,208	1,198,685	196	81.0	2,130	1.1	218	226	93.4	2,432	0.9	58
Female, Disabled												
All Ages	10,100	993,938	160	91.4	1,741	1.1	232	172	98.3	1,848	0.9	60
64 or younger	10,015	988,414	160	93.0	1,741	1.1	232	170	98.8	1,846	0.9	60
65-74	85	5,524	0	0.0	0	0.0	0	2	66.7	2	1.0	20
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles												
All Ages	3,108	204,747	36	53.7	389	1.0	156	54	80.6	584	0.9	49
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	1,591	115,915	15	55.6	169	1.2	236	26	96.3	287	0.9	43
75-84	638	33,184	10	71.4	113	0.6	78	13	92.9	138	0.9	61
85 and older	879	55,648	11	42.3	107	1.2	112	15	57.7	159	0.9	49
Male												
All Males	7,640	622,501	111	70.3	1,130	1.0	187	141	89.2	1,483	0.9	58
Male, Disabled												
All Ages	5,812	499,957	85	71.4	880	1.0	207	105	88.2	1,128	0.9	63
64 or younger	5,804	499,773	85	72.0	880	1.0	207	105	89.0	1,128	0.9	63
65-74	8	184	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male, Other Eligibles												
All Ages	1,828	122,544	26	66.7	250	1.0	118	36	92.3	355	0.9	42
64 or younger	3	78	1	100.0	1	1.0	18	2	200.0	2	1.0	30
65-74	910	71,755	14	107.7	147	1.0	145	15	115.4	156	0.9	47
75-84	321	26,989	6	60.0	60	1.0	91	8	80.0	70	0.9	51
85 and older	594	23,722	5	33.3	42	1.0	62	11	73.3	127	0.8	31
Unknown	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

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

a. Table ND.10A includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2005. A total of 435 beneficiaries who were in nursing facilities for part of their enrollment and their 4,254 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 ND.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}
 NONDUAL BENEFICIARIES, KANSAS, 2005

Beneficiary Characteristics	ANTICONVULSANT					ULCER DRUGS					MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
All	254	63.5	2,652	1.1	\$83	241	60.3	2,504	0.8	\$63	76	19.0	794	0.8	\$176
Female															
All Females	156	64.5	1,640	1.1	81	153	63.2	1,606	0.8	67	46	19.0	515	0.9	229
Female, Disabled															
All Ages	127	72.6	1,330	1.1	90	113	64.6	1,175	0.8	64	36	20.6	415	0.9	251
64 or younger	126	73.3	1,322	1.1	90	111	64.5	1,166	0.8	64	36	20.9	415	0.9	251
65-74	1	33.3	8	0.3	14	2	66.7	9	1.0	16	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	29	43.3	310	1.1	45	40	59.7	431	0.9	74	10	14.9	100	1.0	139
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	20	74.1	218	1.2	56	17	63.0	189	0.9	79	4	14.8	48	1.0	140
75-84	6	42.9	65	0.7	15	9	64.3	90	0.8	16	1	7.1	12	1.1	146
85 and older	3	11.5	27	1.0	33	14	53.8	152	1.0	102	5	19.2	40	1.0	135
Male															
All Males	98	62.0	1,012	1.1	86	88	55.7	898	0.8	56	30	19.0	279	0.7	77
Male, Disabled															
All Ages	84	70.6	868	1.0	82	70	58.8	725	0.8	56	21	17.6	199	0.6	64
64 or younger	84	71.2	868	1.0	82	70	59.3	725	0.8	56	21	17.8	199	0.6	64
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male, Other Eligibles															
All Ages	14	35.9	144	1.3	113	18	46.2	173	0.9	58	9	23.1	80	0.9	109
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	8	61.5	93	1.3	128	6	46.2	60	0.8	60	1	7.7	3	0.7	50
75-84	5	50.0	39	1.0	96	5	50.0	39	0.7	51	6	60.0	62	0.9	129
85 and older	1	6.7	12	1.8	51	7	46.7	74	1.0	59	2	13.3	15	0.9	39
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

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

a. Table ND.10B includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2005. A total of 435 beneficiaries who were in nursing facilities for part of their enrollment and their 4,254 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 ND.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}
 NONDUAL BENEFICIARIES, KANSAS, 2005

Beneficiary Characteristics	ANALGESICS - Narcotic					ANTIDIABETIC					ANTIHYPERLIPIDEMIC				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
All	257	64.2	2,667	0.9	\$45	181	45.3	1,967	1.1	\$54	93	23.3	1,035	0.9	\$77
Female															
All Females	149	61.6	1,555	0.9	32	120	49.6	1,278	1.1	57	55	22.7	616	0.9	79
Female, Disabled															
All Ages	107	61.1	1,132	0.9	33	92	52.6	974	1.1	58	35	20.0	389	0.9	87
64 or younger	104	60.5	1,115	0.9	33	89	51.7	957	1.1	58	34	19.8	381	0.9	88
65-74	3	100.0	17	0.5	13	3	100.0	17	1.2	69	1	33.3	8	0.9	81
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	42	62.7	423	0.9	29	28	41.8	304	1.1	54	20	29.9	227	0.9	64
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	18	66.7	196	0.5	11	15	55.6	172	1.3	73	12	44.4	140	0.9	75
75-84	8	57.1	85	1.0	27	7	50.0	84	0.8	21	2	14.3	24	1.0	64
85 and older	16	61.5	142	1.4	55	6	23.1	48	0.9	40	6	23.1	63	0.7	41
Male															
All Males	108	68.4	1,112	0.9	62	61	38.6	689	1.0	48	38	24.1	419	0.9	73
Male, Disabled															
All Ages	89	74.8	914	1.0	70	38	31.9	424	1.1	45	27	22.7	297	0.9	71
64 or younger	87	73.7	912	1.0	70	38	32.2	424	1.1	45	27	22.9	297	0.9	71
65-74	2	200.0	2	2.0	60	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male, Other Eligibles															
All Ages	19	48.7	198	0.8	23	23	59.0	265	0.8	53	11	28.2	122	0.9	79
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	8	61.5	93	0.5	6	15	115.4	180	0.8	59	5	38.5	60	1.0	107
75-84	1	10.0	7	0.9	117	0	0.0	0	0.0	0	1	10.0	7	2.0	275
85 and older	10	66.7	98	1.1	34	8	53.3	85	1.0	40	5	33.3	55	0.7	24
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

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

a. Table ND.10C includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2005. A total of 435 beneficiaries who were in nursing facilities for part of their enrollment and their 4,254 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 ND.10D
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR NINTH AND TENTH TOP DRUG GROUPS
 SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c, d}
 NONDUAL BENEFICIARIES, KANSAS, 2005

Beneficiary Characteristics	ANTIASTHMATIC						ANTIHYPERTENSIVE					
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	All-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents
All	163	40.8	1,627	0.6	\$31	169	42.3	1,842	0.9	\$26	400	3,899
Female												
All Females	109	45.0	1,090	0.6	31	101	41.7	1,090	0.9	28	242	2,410
Female, Disabled												
All Ages	84	48.0	846	0.6	34	70	40.0	754	0.9	31	175	1,726
64 or younger	81	47.1	822	0.6	31	68	39.5	745	0.9	31	172	1,716
65-74	3	100.0	24	1.2	131	2	66.7	9	0.7	5	3	10
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Female, Other Eligibles												
All Ages	25	37.3	244	0.6	19	31	46.3	336	1.0	22	67	684
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	13	48.1	116	0.6	23	14	51.9	158	0.9	11	27	303
75-84	7	50.0	84	0.5	15	9	64.3	97	1.0	50	14	147
85 and older	5	19.2	44	0.6	17	8	30.8	81	1.1	11	26	234
Male												
All Males	54	34.2	537	0.7	31	68	43.0	752	0.9	23	158	1,489
Male, Disabled												
All Ages	41	34.5	391	0.5	18	48	40.3	525	0.9	22	119	1,107
64 or younger	39	33.1	389	0.5	18	48	40.7	525	0.9	22	118	1,106
65-74	2	200.0	2	2.0	32	0	0.0	0	0.0	0	1	1
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Male, Other Eligibles												
All Ages	13	33.3	146	1.3	65	20	51.3	227	0.9	25	39	382
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	1
65-74	3	23.1	36	2.3	156	12	92.3	144	0.9	31	13	144
75-84	5	50.0	50	0.4	13	3	30.0	31	1.0	26	10	92
85 and older	5	33.3	60	1.3	54	5	33.3	52	0.7	9	15	145
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0

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

a. Table ND.10D includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2005. A total of 435 beneficiaries who were in nursing facilities for part of their enrollment and their 4,254 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.medispain.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 ND.11
USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
AMONG NONDUALS, BY BENEFICIARY CHARACTERISTIC^{a,b}
KANSAS, 2005

Beneficiary Characteristics	Number of Beneficiaries with at Least One Part D Excluded Rx	Percentage of Beneficiaries with at Least One Part D Excluded Rx	Number of Part D Excluded Rx per Beneficiary	Total Number Part D Excluded Rx	Part D Excluded Rx \$ per Beneficiary	Total Part D Excluded Rx \$	\$ per Part D Excluded Rx	Part D Excluded Rx \$ as a Percentage of All Nondual Rx \$	Total Number of Beneficiaries
All	44,550	17.7	0.6	153,626	\$10	\$2,607,250	\$17	2.0	252,368
Age									
5 and younger	14,659	18.7	0.4	29,868	5	420,161	14	4.0	78,596
6-14	11,376	16.0	0.4	27,773	7	531,552	19	2.0	71,139
15-20	5,812	15.9	0.4	15,802	12	422,601	27	2.2	36,638
21-44	7,052	14.1	0.7	34,153	11	546,580	16	1.6	50,007
45-64	5,189	36.2	3.0	42,281	44	636,975	15	1.8	14,329
65-74	324	33.4	2.7	2,664	38	36,951	14	2.0	971
75-84	80	20.8	1.5	565	19	7,255	13	1.6	384
85 and older	58	19.1	1.7	520	17	5,175	10	2.3	304
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Basis of Eligibility^c									
Aged	446	29.0	2.4	3,651	31	48,272	13	1.9	1,538
Disabled	10,953	33.5	2.3	76,098	47	1,538,172	20	2.0	32,730
Adults	5,067	10.0	0.3	14,626	3	156,589	11	1.3	50,503
Children	28,039	16.7	0.4	59,090	5	862,050	15	2.4	167,451
Unknown	45	30.8	1.1	161	15	2,167	13	0.9	146
Gender									
Female	25,237	17.8	0.7	93,127	10	1,473,677	16	2.2	141,434
Male	19,313	17.4	0.5	60,499	10	1,133,573	19	1.9	110,917
Unknown	0	0.0	0.0	0	0	0	0	0.0	17
Race									
White	29,492	19.5	0.7	112,627	13	2,037,207	18	2.1	151,533
African American	5,353	13.3	0.4	17,442	6	254,976	15	1.6	40,185
Other/unknown	9,705	16.0	0.4	23,557	5	315,067	13	2.2	60,650
Use of Nursing Facilities^d									
Entire year	310	77.5	10.7	4,271	152	60,896	14	2.5	400
Part year	343	78.9	7.8	3,380	166	72,168	21	3.3	435
None	43,897	17.5	0.6	145,975	10	2,474,186	17	2.0	251,533
Maintenance Assistance Status									
Cash	20,532	19.9	0.9	95,543	16	1,600,651	17	2.0	103,189
Medically needy	622	19.6	0.8	2,646	17	55,242	21	1.6	3,173
Poverty related	16,645	14.4	0.3	32,322	4	476,520	15	3.3	115,465
Other/unknown	6,751	22.1	0.8	23,115	16	474,837	21	1.7	30,541

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

a. Table ND.11 includes the beneficiaries represented by Cell K of Table 1. Beneficiaries include all nondual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2005.

b. The statute establishing the Medicare Part D prescription program that started in 2006 excludes several types of drugs from coverage. State Medicaid programs have been allowed to exclude these drugs since 1990, but many states have chosen to cover them, and if states cover them for any Medicaid beneficiaries they must also cover them for dual eligibles, who as of 2006 receive the remainder of their prescription drug coverage through Part D. Excluded drugs include benzodiazepines; barbiturates; nonprescription (OTC) medications; prescription vitamins and minerals (not including prenatal vitamins and fluoride preparations); and drugs used for anorexia, weight loss, or weight gain. Other excluded drugs include those that promote fertility; those used for cosmetic purposes or hair growth, for symptomatic relief of coughs and colds; or drugs for which the manufacturer requires that associated tests or monitoring services be purchased exclusively from the manufacturer.

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

d. Please refer to footnote f on Table 1 for methodology used to determine use of nursing facilities.

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

TABLE ND.12
USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
AMONG NONDUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a,b}
KANSAS, 2005

Beneficiary Characteristics	Number Rx per Benefit Month	Rx \$ per Benefit Month	\$ per Rx	Barbiturate \$ per Benefit Month	Benzodiazepine \$ per Benefit Month	Number of Benefit Months
All	0.1	\$1	\$17	\$0	\$0	1,795,911
Age						
5 and younger	0.1	1	14	0	0	529,755
6-14	0.1	1	19	0	0	543,076
15-20	0.1	2	27	0	0	268,199
21-44	0.1	2	16	0	1	314,508
45-64	0.3	5	15	0	2	126,624
65-74	0.3	4	14	0	1	9,014
75-84	0.2	2	13	0	0	3,148
85 and older	0.3	3	10	0	0	1,587
Unknown	0.0	0	0	0	0	0
Basis of Eligibility^c						
Aged	0.3	4	13	0	1	13,237
Disabled	0.2	5	20	0	2	326,732
Adults	0.1	1	11	0	0	274,116
Children	0.1	1	15	0	0	1,180,661
Unknown	0.1	2	13	0	1	1,165
Gender						
Female	0.1	2	16	0	0	980,940
Male	0.1	1	19	0	0	814,953
Unknown	0.0	0	0	0	0	18
Race						
White	0.1	2	18	0	1	1,081,051
African American	0.1	1	15	0	0	291,371
Other/unknown	0.1	1	13	0	0	423,489
Use of Nursing Facilities^d						
Entire year	1.1	16	14	0	5	3,899
Part year	0.8	17	21	0	4	4,254
None	0.1	1	17	0	0	1,787,758
Maintenance Assistance Status						
Cash	0.1	2	17	0	1	771,842
Medically needy	0.1	3	21	0	1	20,320
Poverty related	0.0	1	15	0	0	729,263
Other/unknown	0.1	2	21	0	0	274,486

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

a. Table ND.12 includes the beneficiaries represented by Cell K of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits. Beneficiaries include all nondual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2005.

b. The statute establishing the Medicare Part D prescription program that started in 2006 excludes several types of drugs from coverage. State Medicaid programs have been allowed to exclude these drugs since 1990, but many states have chosen to cover them, and if states cover them for any Medicaid beneficiaries they must also cover them for dual eligibles, who as of 2006 receive the remainder of their prescription drug coverage through Part D. Excluded drugs include benzodiazepines; barbiturates; nonprescription (OTC) medications; prescription vitamins and minerals (not including prenatal vitamins and fluoride preparations); and drugs used for anorexia, weight loss, or weight gain. Other excluded drugs include those that promote fertility; those used for cosmetic purposes or hair growth, for symptomatic relief of coughs and colds; or drugs for which the manufacturer requires that associated tests or monitoring services be purchased exclusively from the manufacturer.

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

d. Please refer to footnote f on Table 1 for methodology used to determine use of nursing facilities.

TABLE ND.13
USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D FOR SELECTED DRUG CATEGORIES AMONG NONDUALS^{a,b,c}
KANSAS, 2005

Drug Category	Number of Users	Rx \$ per User	Total Rx \$	Rx \$ as a Percentage of All Part D		Number Rx as a Percentage of All Part D	
				Excluded Rx \$	Total Number Rx.	\$ per Rx	Excluded Rx
All	53,509	\$49	\$2,607,250	100.0	153,626	\$17	100.0
Anorexia or weight loss/gain	18	239	4,300	0.2	39	110	0.0
Fertility drugs	3	49	148	0.0	3	49	0.0
Drugs for cosmetic purposes	3	6	17	0.0	3	6	0.0
Cough and cold medications	16,870	23	392,715	15.1	25,464	15	16.6
Vitamins and minerals	4,158	75	311,901	12.0	17,695	18	11.5
Non-prescription drugs	23,231	31	729,469	28.0	61,222	12	39.9
Barbiturates	459	52	24,000	0.9	3,938	6	2.6
Benzodiazepines	7,746	99	770,144	29.5	42,082	18	27.4
Other Part D Excl Rx Drugs	1,021	367	374,556	14.4	3,180	118	2.1

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

a. Table ND.13 includes the beneficiaries represented by Cell K of Table 1. Beneficiaries include all nondual 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 ND11.

b. Includes OTC drugs as well as prescription drugs.

c. The statute establishing the Medicare Part D prescription program that started in 2006 excludes several types of drugs from coverage. State Medicaid programs have been allowed to exclude these drugs since 1990, but many states have chosen to cover them, and if states cover them for any Medicaid beneficiaries they must also cover them for dual eligibles, who as of 2006 receive the remainder of their prescription drug coverage through Part D. Excluded drugs include benzodiazepines; barbiturates; nonprescription (OTC) medications; prescription vitamins and minerals (not including prenatal vitamins and fluoride preparations); and drugs used for anorexia, weight loss, or weight gain. Other excluded drugs include those that promote fertility; those used for cosmetic purposes or hair growth, for symptomatic relief of coughs and colds; or drugs for which the manufacturer requires that associated tests or monitoring services be purchased exclusively from the manufacturer.

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

Nondual Beneficiaries

APPENDIX TABLE A.1
CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY^{a, b}
NONDUAL BENEFICIARIES, KANSAS, 2005

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Blind/ Disabled	Adults	Children	Other/ Unknown	All	Aged	Blind/ Disabled	Adults	Children	Other/ Unknown
All	294,578	1,538	32,735	58,447	201,712	146	2,604,584	13,262	329,419	440,219	1,820,507	1,177
Age												
5 and younger	97,208	0	1,676	0	95,532	0	862,320	0	16,972	0	845,348	0
6-14	83,142	0	5,817	0	77,325	0	783,901	0	61,426	0	722,475	0
15-20	41,166	0	4,163	8,229	28,774	0	357,655	0	43,487	61,938	252,230	0
21-44	56,592	0	9,412	47,068	81	31	451,314	0	96,982	353,713	454	165
45-64	14,811	4	11,546	3,146	0	115	135,620	29	110,034	24,545	0	1,012
65-74	971	848	119	4	0	0	9,028	8,493	512	23	0	0
75-84	384	382	2	0	0	0	3,156	3,150	6	0	0	0
85 and older	304	304	0	0	0	0	1,590	1,590	0	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	164,751	1,001	16,283	48,101	99,220	146	1,436,501	8,773	165,800	364,425	896,326	1,177
Male	129,809	537	16,452	10,346	102,474	0	1,168,064	4,489	163,619	75,794	924,162	0
Unknown	18	0	0	0	18	0	19	0	0	0	19	0
Race												
White	176,218	690	23,384	38,979	113,051	114	1,541,339	5,201	233,516	289,242	1,012,453	927
African American	48,278	214	5,935	10,236	31,881	12	453,510	1,883	61,370	85,827	304,354	76
Other/unknown	70,082	634	3,416	9,232	56,780	20	609,735	6,178	34,533	65,150	503,700	174
Use of Nursing Facilities^c												
Entire year	400	105	294	1	0	0	3,900	1,065	2,833	2	0	0
Part year	435	54	378	1	0	2	4,256	493	3,742	4	0	17
None	293,743	1,379	32,063	58,445	201,712	144	2,596,428	11,704	322,844	440,213	1,820,507	1,160
Maintenance Assistance Status												
Cash	119,312	813	26,634	36,609	55,256	0	1,098,289	8,564	277,847	293,351	518,527	0
Medically needy	3,173	288	1,869	421	595	0	20,689	2,430	11,888	2,376	3,995	0
Poverty related	137,801	34	47	14,739	122,835	146	1,143,400	157	279	80,994	1,060,793	1,177
Other/unknown	34,292	403	4,185	6,678	23,026	0	342,206	2,111	39,405	63,498	237,192	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	183,326	1,538	32,241	32,578	116,825	144	1,588,607	13,262	323,903	222,804	1,027,480	1,158
FFS part year, with Rx claims	22,818	0	367	8,024	14,426	1	221,368	0	4,148	70,431	146,781	8
FFS part year, no Rx claims	46,224	0	122	9,901	36,200	1	428,103	0	1,321	82,044	344,727	11
MC all year, with Rx claims	36	0	0	13	23	0	286	0	0	59	227	0
MC all year, no Rx claims	42,174	0	5	7,931	34,238	0	366,220	0	47	64,881	301,292	0

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

a. Table A.1 includes the beneficiaries represented by Cell J of Table 1. Benefit months are months during which beneficiaries had pharmacy benefit coverage.

b. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services. The total includes some beneficiaries with unknown basis of eligibility and some whose age categories are not consistent with basis of eligibility.

c. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.

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.2
 MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS^a
 NONDUAL BENEFICIARIES, KANSAS, 2005

	Beneficiaries and Benefit Months in Cell J of Table 1		Included in Cell K of Table 1		Excluded from Cell K of Table 1	
	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months
All	294,578	2,604,584	252,368	1,795,911	0	808,673
Fee-for-service (FFS) all year	183,326	1,588,607	183,326	1,588,549	0	58
FFS part year, with Rx claims	22,818	221,368	22,818	90,022	0	131,346
FFS part year, with no Rx claims	46,224	428,103	46,224	117,340	0	310,763
Managed care (MC) all year, with Rx claims	36	286	0	0	0	286
MC all year, with no Rx claims	42,174	366,220	0	0	0	366,220

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

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

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; FFS = fee-for-service pharmacy benefit; MAX = Medicaid Analytic Extract;

MC = managed care; Rx = pharmacy benefit.

Nondual Beneficiaries