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**STATISTICAL COMPENDIUM:  
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2006  
KANSAS**

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TABLE D.2  
CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY<sup>a, b</sup>  
DUAL ELIGIBLE BENEFICIARIES, KANSAS, 2006

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown
<b>All</b>	<b>49,148</b>	<b>26,395</b>	<b>22,430</b>	<b>305</b>	<b>13</b>	<b>5</b>	<b>512,125</b>	<b>263,827</b>	<b>245,973</b>	<b>2,146</b>	<b>139</b>	<b>40</b>
<b>Age</b>												
5 and younger	4	0	4	0	0	0	39	0	39	0	0	0
6-14	10	0	7	0	3	0	117	0	82	0	35	0
15-20	98	0	89	0	9	0	1,110	0	1,018	0	92	0
21-44	9,422	0	9,193	228	1	0	103,154	0	101,547	1,595	12	0
45-64	13,116	2	13,036	74	0	4	142,974	14	142,408	520	0	32
65-74	7,868	7,764	101	2	0	1	82,411	81,505	879	19	0	8
75-84	9,005	9,004	0	1	0	0	90,506	90,494	0	12	0	0
85 and older	9,625	9,625	0	0	0	0	91,814	91,814	0	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
<b>Gender</b>												
Female	31,368	19,299	11,840	218	6	5	327,313	195,323	130,367	1,518	65	40
Male	17,780	7,096	10,590	87	7	0	184,812	68,504	115,606	628	74	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
<b>Race</b>												
White	39,894	21,586	18,078	216	10	4	414,879	214,123	199,083	1,540	105	28
African American	5,197	2,157	2,987	53	0	0	55,003	22,479	32,183	341	0	0
Other/unknown	4,057	2,652	1,365	36	3	1	42,243	27,225	14,707	265	34	12
<b>Use of Nursing Facilities<sup>c</sup></b>												
Entire year	8,549	7,894	655	0	0	0	86,506	79,160	7,346	0	0	0
Part year	5,242	4,702	540	0	0	0	48,982	43,407	5,575	0	0	0
None	35,357	13,799	21,235	305	13	5	376,637	141,260	233,052	2,146	139	40
<b>Maintenance Assistance Status</b>												
Cash	17,439	6,118	11,097	224	0	0	193,216	68,300	123,358	1,558	0	0
Medically needy	2,617	790	1,825	2	0	0	23,667	6,535	17,117	15	0	0
Poverty-related	2,388	783	1,546	48	6	5	24,527	7,807	16,254	364	62	40
Other/unknown	26,704	18,704	7,962	31	7	0	270,715	181,185	89,244	209	77	0
<b>Dual Medicare Status<sup>d</sup></b>												
Full dual, all year	45,639	25,001	20,323	297	13	5	474,645	249,036	223,373	2,057	139	40
Full dual, part year	3,509	1,394	2,107	8	0	0	37,480	14,791	22,600	89	0	0
<b>Managed Care (MC) Status</b>												
Fee-for-service (FFS) all year	48,976	26,359	22,380	219	13	5	511,347	263,668	245,604	1,896	139	40
FFS part year, with Rx claims	84	10	27	47	0	0	422	57	220	145	0	0
FFS part year, no Rx claims	88	26	23	39	0	0	356	102	149	105	0	0

Source: Data for this table are from the MAX 2006 file for Kansas, released by CMS in 3/2010. This table was produced on 02/11/2010.

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 2006. The "Full dual, part year" group contains beneficiaries who had such benefits for some, but not all, months of their enrollment. Refer to footnote g of Table 1 for more information about how we determined dual eligibility status.

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

TABLE D.3  
ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC<sup>a, b</sup>  
DUAL ELIGIBLE BENEFICIARIES, KANSAS, 2006

Beneficiary Characteristics	Percentage with at Least		Mean Number of Rx	Mean Rx \$	\$ per Rx	Rx \$ as a Percentage		Number of Beneficiaries
	One Rx	Two Rx				Mean \$, All Medicaid FFS \$ <sup>c</sup>	of All Medicaid FFS \$ <sup>d</sup>	
<b>All</b>	<b>47.5</b>	<b>4.2</b>	<b>\$207</b>	<b>\$49</b>	<b>\$16,033</b>	<b>1.3</b>	<b>49,148</b>	
<b>Age</b>								
5 and younger	75.0	14.3	475	33	26,884	1.8	4	
6-14	80.0	9.6	863	90	17,033	5.1	10	
15-20	80.6	19.0	2,836	149	20,091	14.1	98	
21-44	48.5	4.9	355	72	15,225	2.3	9,422	
45-64	52.6	5.8	290	50	16,524	1.8	13,116	
65-74	45.2	4.2	179	42	12,032	1.5	7,868	
75-84	44.6	2.9	81	28	15,675	0.5	9,005	
85 and older	43.7	2.6	65	25	19,714	0.3	9,625	
Unknown	0.0	0.0	0	0	0	0.0	0	
<b>Basis of Eligibility<sup>e</sup></b>								
Aged	44.5	3.2	102	32	16,082	0.6	26,395	
Disabled	50.9	5.3	316	59	16,118	2.0	22,430	
Adults	62.3	15.8	1,231	78	5,165	23.8	305	
Children	84.6	22.4	2,856	128	25,803	11.1	13	
Unknown	40.0	8.8	835	95	9,810	8.5	5	
<b>Gender</b>								
Female	49.9	4.5	199	45	15,660	1.3	31,368	
Male	43.3	3.8	221	58	16,691	1.3	17,780	
Unknown	0.0	0.0	0	0	0	0.0	0	
<b>Race</b>								
White	48.7	4.4	207	47	17,035	1.2	39,894	
African American	42.5	3.6	221	61	12,677	1.7	5,197	
Other/unknown	42.3	3.4	196	58	10,475	1.9	4,057	
<b>Use of Nursing Facilities<sup>f</sup></b>								
Entire year	50.5	4.2	115	28	28,681	0.4	8,549	
Part year	51.3	3.6	112	31	19,341	0.6	5,242	
None	46.2	4.4	244	56	12,484	2.0	35,357	
<b>Maintenance Assistance Status</b>								
Cash	48.4	4.9	300	61	9,996	3.0	17,439	
Medically needy	32.2	3.0	214	70	6,470	3.3	2,617	
Poverty related	35.6	2.9	193	67	2,334	8.3	2,388	
Other/unknown	49.5	4.1	148	36	22,137	0.7	26,704	

Source: Data for this table are from the MAX 2006 file for Kansas, released by CMS in 3/2010. This table was produced on 02/11/2010.

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

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

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

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

TABLE D.4  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC<sup>a, b</sup>  
 DUAL ELIGIBLE BENEFICIARIES, KANSAS, 2006

Beneficiary Characteristics	Number of Rx, Percentage with:										Number	
	Mean Number of Rx	Mean Rx \$	Rx \$ as a Percentage of All Medicaid FFS \$ <sup>c</sup>	None	More than 0, but 1 or Less	More than 1, but 2 or Less	More than 2, but 5 or Less	More than 5, but 10 or Less	More than 10	Mean \$, All Medicaid FFS \$ <sup>d</sup>	Beneficiaries	Benefit Months
<b>All</b>	<b>0.4</b>	<b>\$20</b>	<b>1.3</b>	<b>52.5</b>	<b>41.0</b>	<b>3.6</b>	<b>2.0</b>	<b>0.7</b>	<b>0.1</b>	<b>\$1,539</b>	<b>49,148</b>	<b>512,125</b>
<b>Age</b>												
5 and younger	1.5	49	1.8	25.0	50.0	0.0	25.0	0.0	0.0	2,757	4	39
6-14	0.8	74	5.1	20.0	70.0	0.0	10.0	0.0	0.0	1,456	10	117
15-20	1.7	250	14.1	19.4	44.9	12.2	14.3	9.2	0.0	1,774	98	1,110
21-44	0.4	32	2.3	51.5	40.7	3.8	3.1	0.8	0.2	1,391	9,422	103,154
45-64	0.5	27	1.8	47.4	44.1	4.4	2.7	1.1	0.3	1,516	13,116	142,974
65-74	0.4	17	1.5	54.8	38.9	3.5	1.8	0.9	0.2	1,149	7,868	82,411
75-84	0.3	8	0.5	55.4	40.2	3.0	1.2	0.2	0.0	1,560	9,005	90,506
85 and older	0.3	7	0.3	56.3	39.7	2.7	1.0	0.3	0.0	2,067	9,625	91,814
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<b>Basis of Eligibility<sup>e</sup></b>												
Aged	0.3	10	0.6	55.5	39.7	3.1	1.3	0.4	0.1	1,609	26,395	263,827
Disabled	0.5	29	2.0	49.1	42.9	4.1	2.8	0.9	0.2	1,470	22,430	245,973
Adults	2.3	175	23.8	37.7	23.6	9.5	18.4	8.9	2.0	734	305	2,146
Children	2.1	267	11.1	15.4	38.5	23.1	7.7	15.4	0.0	2,413	13	139
Unknown	1.1	104	8.5	60.0	0.0	40.0	0.0	0.0	0.0	1,226	5	40
<b>Gender</b>												
Female	0.4	19	1.3	50.1	43.0	3.9	2.1	0.7	0.1	1,501	31,368	327,313
Male	0.4	21	1.3	56.7	37.4	3.1	1.9	0.6	0.2	1,606	17,780	184,812
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<b>Race</b>												
White	0.4	20	1.2	51.3	41.9	3.9	2.1	0.7	0.2	1,638	39,894	414,879
African American	0.3	21	1.7	57.5	37.3	2.4	2.1	0.7	0.1	1,198	5,197	55,003
Other/unknown	0.3	19	1.9	57.7	37.2	2.4	1.9	0.8	0.1	1,006	4,057	42,243
<b>Use of Nursing Facilities<sup>f</sup></b>												
Entire year	0.4	11	0.4	49.5	43.6	4.6	1.7	0.5	0.1	2,834	8,549	86,506
Part year	0.4	12	0.6	48.7	45.7	3.4	1.5	0.5	0.1	2,070	5,242	48,982
None	0.4	23	2.0	53.8	39.7	3.4	2.2	0.8	0.2	1,172	35,357	376,637
<b>Maintenance Assistance Status</b>												
Cash	0.4	27	3.0	51.6	41.2	3.3	2.6	1.0	0.2	902	17,439	193,216
Medically needy	0.3	24	3.3	67.8	26.3	2.7	2.3	0.7	0.1	715	2,617	23,667
Poverty related	0.3	19	8.3	64.4	31.1	1.8	2.1	0.4	0.1	227	2,388	24,527
Other/unknown	0.4	15	0.7	50.5	43.2	4.0	1.7	0.5	0.1	2,184	26,704	270,715

Source: Data for this table are from the MAX 2006 file for Kansas, released by CMS in 3/2010. This table was produced on 02/11/2010.

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 ten states (DE, IA, IL, NC, NE, NY, TN, 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 ten states (DE, IA, IL, NC, NE, NY, TN, 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 1 of Table 1 for methodology used to determine nursing facility residence.

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

TABLE D.5  
 AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, KANSAS, 2006

Beneficiary Characteristics	All Rx			Patented Brand-Name Drugs			Off-Patent Brand-Name Drugs			Generic Drugs		
	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx
<b>All</b>	<b>0.4</b>	<b>\$20</b>	<b>\$49</b>	<b>0.1</b>	<b>\$14</b>	<b>\$148</b>	<b>0.0</b>	<b>\$1</b>	<b>\$97</b>	<b>0.3</b>	<b>\$5</b>	<b>\$15</b>
<b>Age</b>												
5 and younger	1.5	49	33	0.3	34	121	0.0	0	0	1.2	15	12
6-14	0.8	74	90	0.3	57	201	0.2	13	59	0.3	5	14
15-20	1.7	250	149	0.8	223	296	0.1	5	87	0.9	22	26
21-44	0.4	32	72	0.1	25	196	0.0	2	116	0.3	6	19
45-64	0.5	27	50	0.1	19	148	0.0	2	114	0.4	7	17
65-74	0.4	17	42	0.1	12	119	0.0	1	84	0.3	4	15
75-84	0.3	8	28	0.1	5	92	0.0	1	69	0.2	3	12
85 and older	0.3	7	25	0.0	4	88	0.0	0	56	0.2	3	11
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Basis of Eligibility<sup>d</sup></b>												
Aged	0.3	10	32	0.1	7	103	0.0	1	72	0.2	3	13
Disabled	0.5	29	59	0.1	21	171	0.0	2	114	0.3	6	17
Adults	2.3	175	78	0.8	131	161	0.1	6	119	1.4	38	28
Children	2.1	267	128	0.9	248	268	0.1	1	25	1.1	18	16
Unknown	1.1	104	95	0.6	79	138	0.1	15	146	0.4	10	25
<b>Gender</b>												
Female	0.4	19	45	0.1	13	137	0.0	1	97	0.3	5	15
Male	0.4	21	58	0.1	16	167	0.0	1	97	0.3	4	17
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Race</b>												
White	0.4	20	47	0.1	14	144	0.0	1	93	0.3	5	15
African American	0.3	21	61	0.1	16	172	0.0	1	117	0.2	4	16
Other/unknown	0.3	19	58	0.1	14	152	0.0	1	117	0.2	3	15
<b>Use of Nursing Facilities<sup>e</sup></b>												
Entire year	0.4	11	28	0.1	7	104	0.0	1	61	0.3	4	12
Part year	0.4	12	31	0.1	8	110	0.0	1	63	0.3	4	13
None	0.4	23	56	0.1	17	157	0.0	1	107	0.3	5	17
<b>Maintenance Assistance Status</b>												
Cash	0.4	27	61	0.1	21	161	0.0	1	114	0.3	5	17
Medically needy	0.3	24	70	0.1	19	188	0.0	1	92	0.2	4	18
Poverty related	0.3	19	67	0.1	14	157	0.0	1	89	0.2	4	20
Other/unknown	0.4	15	36	0.1	9	127	0.0	1	83	0.3	4	14

Source: Data for this table are from the MAX 2006 file for Kansas, released by CMS in 3/2010. This table was produced on 02/11/2010.

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.medi-span.com/master-drug-database.aspx>.

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

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

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

TABLE D.6  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, KANSAS, 2006

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per Rx				Users <sup>e</sup>				
	Total	Patented	Off-Patent	Name Generic	Total	Patented	Off-Patent	Name Generic	Total	Patented	Off-Patent	Name Generic	Total Number of Rx	Total Rx \$	Number	As a Percentage of Dual Benes	Number of Benefit Months
		Brand-Name	Brand-Name			Brand-Name	Brand-Name			Brand-Name	Brand-Name						
Anti-infective Agents	0.2	0.1	0.0	0.1	\$17	\$13	\$0	\$3	\$89	\$265	\$124	\$24	6,563	\$587,216	3,150	6.4	34,610
Biologicals	0.6	0.6	0.0	0.0	1,390	1,390	0	0	2,275	2,275	0	0	22	50,057	3	0.0	36
Antineoplastic Agents	0.1	0.0	0.0	0.1	32	27	0	6	216	722	50	52	384	82,888	241	0.5	2,561
Endocrine/Metabolic Drugs	0.2	0.1	0.0	0.1	13	10	0	2	51	102	32	14	12,818	649,137	4,664	9.5	51,738
Cardiovascular Agents	0.3	0.1	0.0	0.2	15	10	2	3	44	87	93	13	25,564	1,134,115	6,911	14.1	76,863
Respiratory Agents	0.2	0.1	0.0	0.1	15	13	1	2	64	110	67	18	7,256	464,266	2,734	5.6	30,090
Gastrointestinal Agents	0.2	0.1	0.0	0.1	19	16	2	1	87	149	649	12	10,375	901,719	4,322	8.8	48,162
Genitourinary Agents	0.2	0.1	0.0	0.1	10	8	1	1	61	83	71	22	2,022	123,306	1,151	2.3	12,837
CNS Drugs	0.5	0.1	0.0	0.4	22	15	1	5	42	178	100	12	71,762	3,024,830	12,818	26.1	140,608
Stimulants/Anti-obesity/Anorexia	0.2	0.2	0.0	0.1	28	26	0	2	119	163	17	29	634	75,297	238	0.5	2,676
Miscellaneous Psychological/Neurological Agents	0.2	0.1	0.0	0.0	30	28	0	2	192	200	0	126	1,304	250,950	770	1.6	8,370
Analgesics and Anesthetics	0.3	0.0	0.0	0.2	16	7	0	9	55	192	111	34	14,845	815,639	4,671	9.5	51,480
Neuromuscular Agents	0.5	0.1	0.0	0.4	18	12	0	6	37	183	74	14	32,437	1,211,637	5,893	12.0	66,190
Nutritional Products	0.2	0.0	0.0	0.2	3	0	0	3	16	18	15	16	4,071	64,918	2,005	4.1	22,048
Hematological Agents	0.4	0.1	0.0	0.4	11	8	0	3	27	156	18	8	14,186	384,423	3,133	6.4	34,237
Topical Products	0.2	0.1	0.0	0.1	7	5	0	2	44	93	53	19	3,764	165,197	2,043	4.2	22,910
Miscellaneous Products	0.3	0.2	0.0	0.1	99	86	1	12	315	489	213	88	617	194,077	184	0.4	1,961
Unknown Therapeutic Category	0.1	0.0	0.0	0.0	8	0	0	0	55	0	0	0	176	9,720	116	0.2	1,278
<b>TOTAL NO. OF RX AND RX \$</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>208,800</b>	<b>10,189,392</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>

Source: Data for this table are from the MAX 2006 file for Kansas, released by CMS in 3/2010. This table was produced on 02/11/2010.

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.medi-span.com/master-drug-database.aspx>.

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, 0.2 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.medi-span.com/master-drug-database.aspx>.

e. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 2006.

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

TABLE D.7  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, KANSAS, 2006

Top 10 Drug Groups	Users			Among Users			
	Total Medicaid Rx \$	Number of Users	As a Percentage of Dual Beneficiaries	Number of Benefit Months	Number of Rx per Benefit Month	\$ per Rx	Rx \$ per Benefit Month
ANTIPSYCHOTICS	\$1,656,730	2,927	6.0	32,780	0.2	\$240	\$51
ANTICONVULSANT	1,121,113	5,586	11.4	63,017	0.5	38	18
ULCER DRUGS	780,723	4,633	9.4	51,269	0.3	60	15
ANTIDEPRESSANTS	711,165	5,197	10.6	57,654	0.2	66	12
ANTIHYPERTENSIVE	503,164	2,663	5.4	30,337	0.2	92	17
ANTIDIABETIC	465,743	3,150	6.4	35,053	0.2	66	13
ANTIANSIETY AGENTS	460,794	8,000	16.3	87,366	0.5	10	5
ANALGESICS - Narcotic	448,993	3,897	7.9	42,548	0.2	48	11
ANTIASTHMATIC	387,782	2,750	5.6	30,123	0.2	75	13
ANTIHISTAMINES	365,768	5,377	10.9	60,983	0.5	12	6
<b>Total</b>	<b>6,901,975</b>	<b>44,180</b>	<b>n.a.</b>	<b>491,130</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>

Source: Data for this table are from the MAX 2006 file for Kansas, released by CMS in 3/2010. This table was produced on 02/11/2010.

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 2006. 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 2006. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

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

Dual Medicaid Beneficiaries



TABLE D.7A  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS COMBINED  
 AND FIRST AND SECOND GROUPS SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, KANSAS, 2006

Beneficiary Characteristics	All Top 10 Drug Groups		ANTIPSYCHOTICS					ANTICONVULSANT				
	Number of Rx	Rx \$	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
<b>All</b>	<b>161,417</b>	<b>\$6,901,975</b>	<b>2,927</b>	<b>6.0</b>	<b>32,780</b>	<b>0.2</b>	<b>\$51</b>	<b>5,586</b>	<b>11.4</b>	<b>63,017</b>	<b>0.5</b>	<b>\$18</b>
<b>Female</b>												
All Females	109,057	4,264,601	1,582	5.0	17,559	0.2	46	3,571	11.4	40,252	0.5	17
<b>Female, Disabled</b>												
All Ages	56,505	2,743,327	1,004	8.5	11,403	0.2	55	2,410	20.4	27,600	0.5	20
5 and younger	12	180	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	7	287	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	448	52,210	23	53.5	268	0.5	112	15	34.9	167	0.6	53
21-44	18,964	1,132,696	488	11.4	5,575	0.2	58	975	22.7	11,110	0.4	28
45-64	36,647	1,517,077	491	6.6	5,536	0.2	45	1,411	19.0	16,257	0.5	14
65-74	427	40,877	2	3.0	24	1.0	741	9	13.6	66	0.3	17
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Female, Other Eligibles</b>												
All Ages	52,552	1,521,274	578	3.0	6,156	0.2	30	1,161	5.9	12,652	0.5	10
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	3	148	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	65	8,913	6	150.0	72	0.3	91	2	50.0	24	0.4	80
21-44	1,514	137,544	18	10.3	165	0.5	168	50	28.7	401	0.4	42
45-64	604	62,580	6	12.5	62	0.3	75	13	27.1	130	0.4	59
65-74	16,756	609,034	181	3.6	1,987	0.2	43	454	9.0	5,101	0.5	11
75-84	16,200	358,870	159	2.5	1,678	0.1	19	341	5.4	3,826	0.5	7
85 and older	17,410	344,185	208	2.6	2,192	0.1	14	301	3.8	3,170	0.5	5
<b>Male</b>												
All Males	52,360	2,637,374	1,345	7.6	15,221	0.2	56	2,015	11.3	22,765	0.5	20
<b>Male, Disabled</b>												
All Ages	36,901	2,070,456	1,115	10.5	12,728	0.2	59	1,625	15.3	18,616	0.5	21
5 and younger	6	135	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	4	240	0	0.0	0	0.0	0	1	20.0	10	0.1	8
15-20	383	93,841	14	30.4	164	0.9	417	11	23.9	128	0.6	141
21-44	15,236	991,796	596	12.2	6,799	0.2	63	790	16.1	9,014	0.5	25
45-64	21,135	975,515	504	9.0	5,753	0.2	44	820	14.6	9,436	0.5	16
65-74	137	8,929	1	2.9	12	0.1	8	3	8.6	28	0.5	19
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Dual Medicaid Beneficiaries

TABLE D.7A  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS COMBINED  
 AND FIRST AND SECOND GROUPS SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, KANSAS, 2006

Beneficiary Characteristics	All Top 10 Drug Groups		ANTIPSYCHOTICS					ANTICONVULSANT				
	Number of Rx	Rx \$	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
<b>Male, Other Eligibles</b>												
All Ages	15,459	566,918	230	3.2	2,493	0.2	38	390	5.4	4,149	0.4	11
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	1	79	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	72	13,122	3	60.0	36	0.8	291	1	20.0	12	0.9	186
21-44	669	57,480	12	21.8	124	0.4	158	17	30.9	169	0.4	25
45-64	339	22,100	2	6.3	24	0.7	197	10	31.3	90	0.5	26
65-74	6,846	286,457	96	3.5	1,106	0.2	36	197	7.2	2,155	0.5	13
75-84	4,658	118,130	70	2.6	730	0.1	15	112	4.2	1,172	0.4	7
85 and older	2,874	69,550	47	2.8	473	0.1	17	53	3.1	551	0.4	5
<b>Unknown</b>	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2006 file for Kansas, released by CMS in 3/2010. This table was produced on 02/11/2010.

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 2006. 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 2006. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

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

Dual Medicaid Beneficiaries

TABLE D.7B  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR THIRD TO FIFTH TOP DRUG GROUPS  
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, KANSAS, 2006

Beneficiary Characteristics	ULCER DRUGS					ANTIDEPRESSANTS					ANTIHYPERTENSIVES				
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
<b>All</b>	<b>4,633</b>	<b>9.4</b>	<b>51,269</b>	<b>0.3</b>	<b>\$15</b>	<b>5,197</b>	<b>10.6</b>	<b>57,654</b>	<b>0.2</b>	<b>\$12</b>	<b>2,663</b>	<b>5.4</b>	<b>30,337</b>	<b>0.2</b>	<b>\$17</b>
<b>Female</b>															
All Females	3,220	10.3	35,627	0.3	15	3,639	11.6	40,451	0.2	12	1,708	5.4	19,516	0.2	15
<b>Female, Disabled</b>															
All Ages	1,181	10.0	13,541	0.2	20	2,084	17.6	23,650	0.2	15	758	6.4	8,700	0.2	18
5 and younger	1	33.3	12	1.0	15	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	1	50.0	12	0.3	22	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	4	9.3	48	0.4	36	23	53.5	268	0.4	27	2	4.7	24	0.4	39
21-44	347	8.1	3,990	0.3	20	816	19.0	9,280	0.2	15	144	3.4	1,675	0.2	20
45-64	819	11.0	9,377	0.2	20	1,232	16.6	13,985	0.2	14	603	8.1	6,905	0.2	17
65-74	9	13.6	102	0.4	31	13	19.7	117	0.4	15	9	13.6	96	0.4	45
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Female, Other Eligibles</b>															
All Ages	2,039	10.4	22,086	0.3	13	1,555	8.0	16,801	0.1	9	950	4.9	10,816	0.1	13
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	1	50.0	12	0.1	11	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	2	50.0	24	0.1	12	2	50.0	24	0.2	1	0	0.0	0	0.0	0
21-44	26	14.9	241	0.5	69	70	40.2	609	0.5	48	12	6.9	123	0.6	58
45-64	10	20.8	111	0.5	57	26	54.2	246	0.5	49	12	25.0	132	0.5	50
65-74	573	11.4	6,520	0.2	16	471	9.4	5,337	0.2	9	438	8.7	5,052	0.2	15
75-84	630	9.9	6,912	0.3	10	435	6.8	4,769	0.1	6	323	5.1	3,670	0.1	9
85 and older	797	10.1	8,266	0.3	10	551	7.0	5,816	0.1	5	165	2.1	1,839	0.1	8
<b>Male</b>															
All Males	1,413	7.9	15,642	0.2	15	1,558	8.8	17,203	0.2	13	955	5.4	10,821	0.2	19
<b>Male, Disabled</b>															
All Ages	793	7.5	8,995	0.2	16	1,108	10.5	12,583	0.2	13	599	5.7	6,885	0.2	20
5 and younger	1	100.0	12	0.3	11	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	1	20.0	10	0.1	12	0	0.0	0	0.0	0
15-20	3	6.5	32	0.1	5	17	37.0	201	0.4	18	0	0.0	0	0.0	0
21-44	285	5.8	3,245	0.2	18	542	11.1	6,189	0.2	14	168	3.4	1,960	0.2	22
45-64	502	9.0	5,688	0.2	16	548	9.8	6,183	0.2	12	430	7.7	4,913	0.2	19
65-74	2	5.7	18	0.4	32	0	0.0	0	0.0	0	1	2.9	12	0.2	24
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Dual Medicaid Beneficiaries

TABLE D.7B  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR THIRD TO FIFTH TOP DRUG GROUPS  
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, KANSAS, 2006

Beneficiary Characteristics	ULCER DRUGS					ANTIDEPRESSANTS					ANTIHYPERTENSIVES				
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
<b>Male, Other Eligibles</b>															
All Ages	620	8.6	6,647	0.3	13	450	6.3	4,620	0.2	11	356	5.0	3,936	0.2	17
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	100.0	11	0.1	7
15-20	0	0.0	0	0.0	0	2	40.0	24	0.8	11	0	0.0	0	0.0	0
21-44	12	21.8	115	0.5	45	32	58.2	291	0.6	42	9	16.4	83	0.4	39
45-64	2	6.3	13	1.1	138	14	43.8	140	0.5	32	3	9.4	25	0.5	54
65-74	255	9.3	2,894	0.2	16	154	5.6	1,680	0.2	12	196	7.1	2,218	0.2	20
75-84	199	7.5	2,072	0.2	9	142	5.4	1,439	0.1	7	108	4.1	1,206	0.1	13
85 and older	152	8.9	1,553	0.3	10	106	6.2	1,046	0.1	6	39	2.3	393	0.1	11
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2006 file for Kansas, released by CMS in 3/2010. This table was produced on 02/11/2010.

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 2006. 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 2006. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

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

Dual Medicaid Beneficiaries

TABLE D.7C  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR SIXTH TO EIGHTH TOP DRUG GROUPS  
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, KANSAS, 2006

Beneficiary Characteristics	ANTIDIABETIC					ANTI-ANXIETY AGENTS					ANALGESICS - Narcotic				
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Mean Rx \$ Benefit per Benefit Month		Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Mean Rx \$ Benefit per Benefit Month		Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Mean Rx \$ Benefit per Benefit Month	
				Rx per Month	Mean Rx \$ per Benefit Month				Rx per Month	Mean Rx \$ per Benefit Month				Rx per Month	Mean Rx \$ per Benefit Month
<b>All</b>	<b>3,150</b>	<b>6.4</b>	<b>35,053</b>	<b>0.2</b>	<b>\$13</b>	<b>8,000</b>	<b>16.3</b>	<b>87,366</b>	<b>0.5</b>	<b>\$5</b>	<b>3,897</b>	<b>7.9</b>	<b>42,548</b>	<b>0.2</b>	<b>\$11</b>
<b>Female</b>															
All Females	2,151	6.9	24,101	0.2	12	5,730	18.3	62,700	0.5	5	2,775	8.8	30,503	0.2	10
<b>Female, Disabled</b>															
All Ages	929	7.8	10,449	0.2	17	2,294	19.4	26,305	0.5	5	1,550	13.1	17,527	0.2	12
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	50.0	12	0.3	2
15-20	6	14.0	72	0.3	33	5	11.6	60	0.4	7	11	25.6	132	0.1	2
21-44	201	4.7	2,224	0.3	20	730	17.0	8,371	0.5	5	558	13.0	6,362	0.2	12
45-64	713	9.6	8,073	0.2	16	1,546	20.8	17,754	0.5	5	966	13.0	10,905	0.3	12
65-74	9	13.6	80	0.7	61	13	19.7	120	0.4	2	14	21.2	116	0.3	16
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Female, Other Eligibles</b>															
All Ages	1,222	6.3	13,652	0.1	9	3,436	17.6	36,395	0.5	5	1,225	6.3	12,976	0.2	8
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	100.0	24	0.1	1
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	4	100.0	48	0.6	3
21-44	22	12.6	222	0.5	41	33	19.0	286	0.5	5	95	54.6	838	0.5	28
45-64	13	27.1	147	0.6	49	5	10.4	44	0.2	3	31	64.6	297	0.4	41
65-74	518	10.3	5,946	0.2	11	843	16.8	9,322	0.5	6	389	7.8	4,418	0.2	7
75-84	412	6.5	4,599	0.1	5	1,142	17.9	12,322	0.5	6	326	5.1	3,625	0.1	5
85 and older	257	3.2	2,738	0.1	5	1,413	17.8	14,421	0.5	5	378	4.8	3,726	0.1	4
<b>Male</b>															
All Males	999	5.6	10,952	0.2	15	2,270	12.8	24,666	0.5	5	1,122	6.3	12,045	0.2	12
<b>Male, Disabled</b>															
All Ages	561	5.3	6,284	0.3	19	1,328	12.5	15,062	0.5	6	774	7.3	8,502	0.2	12
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	100.0	12	0.2	1
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	20.0	10	0.1	1
15-20	0	0.0	0	0.0	0	3	6.5	36	0.2	6	8	17.4	93	0.2	27
21-44	160	3.3	1,855	0.2	19	502	10.2	5,752	0.5	5	330	6.7	3,656	0.2	10
45-64	398	7.1	4,401	0.3	19	821	14.7	9,257	0.5	6	430	7.7	4,683	0.3	14
65-74	3	8.6	28	0.2	13	2	5.7	17	0.5	4	4	11.4	48	0.6	13
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Dual Medicaid Beneficiaries

TABLE D.7C  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR SIXTH TO EIGHTH TOP DRUG GROUPS  
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, KANSAS, 2006

Beneficiary Characteristics	ANTIDIABETIC					ANTI-ANXIETY AGENTS					ANALGESICS - Narcotic				
	Number of Users	Users as %	Number of Benefit Months Among Users	Mean		Number of Users	Users as %	Number of Benefit Months Among Users	Mean		Number of Users	Users as %	Number of Benefit Months Among Users	Mean	
		of Dual Benes		Rx per Month	Benefit per Month		Rx per Month		Benefit per Month	Rx per Month		Benefit per Month		Rx per Month	Benefit per Month
<b>Male, Other Eligibles</b>															
All Ages	438	6.1	4,668	0.2	11	942	13.1	9,604	0.5	5	348	4.8	3,543	0.3	12
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	10	18.2	64	0.4	26	7	12.7	69	0.6	5	44	80.0	374	0.4	21
45-64	3	9.4	29	0.6	19	6	18.8	67	0.7	3	18	56.3	155	0.7	37
65-74	215	7.8	2,400	0.2	13	324	11.8	3,473	0.5	6	144	5.2	1,624	0.3	13
75-84	147	5.6	1,600	0.1	7	348	13.2	3,464	0.5	5	77	2.9	755	0.1	6
85 and older	63	3.7	575	0.2	10	257	15.1	2,531	0.4	4	65	3.8	635	0.1	4
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2006 file for Kansas, released by CMS in 3/2010. This table was produced on 02/11/2010.  
 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 2006. 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 2006. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.  
 Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription (s) or pharmacy benefit; \$ = Medicaid reimbursement.

Dual Medicaid Beneficiaries

TABLE D.7D  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR NINTH AND TENTH TOP DRUG GROUPS  
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, KANSAS, 2006

Beneficiary Characteristics	ANTIASTHMATIC					ANTIHISTAMINES					Number of Beneficiaries	Number of Benefit Months
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month		
<b>All</b>	<b>2,750</b>	<b>5.6</b>	<b>30,123</b>	<b>0.2</b>	<b>\$13</b>	<b>5,377</b>	<b>10.9</b>	<b>60,983</b>	<b>0.5</b>	<b>\$6</b>	<b>49,148</b>	<b>512,125</b>
<b>Female</b>												
All Females	1,915	6.1	21,025	0.2	13	3,683	11.7	41,840	0.5	6	31,368	327,313
<b>Female, Disabled</b>												
All Ages	986	8.3	11,252	0.2	14	1,678	14.2	19,564	0.5	6	11,840	130,367
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	27
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	24
15-20	5	11.6	60	0.1	4	10	23.3	120	0.1	1	43	494
21-44	298	6.9	3,398	0.2	13	587	13.7	6,890	0.5	6	4,290	47,603
45-64	671	9.0	7,686	0.2	14	1,071	14.4	12,443	0.5	6	7,436	81,646
65-74	12	18.2	108	0.5	41	10	15.2	111	0.6	12	66	573
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
<b>Female, Other Eligibles</b>												
All Ages	929	4.8	9,773	0.2	11	2,005	10.3	22,276	0.5	6	19,528	196,946
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	24
15-20	1	25.0	12	0.1	2	2	50.0	24	0.1	1	4	41
21-44	24	13.8	235	0.3	21	23	13.2	203	0.3	7	174	1,220
45-64	12	25.0	131	0.5	42	6	12.5	63	0.3	4	48	333
65-74	339	6.8	3,714	0.2	14	581	11.6	6,716	0.4	5	5,018	53,433
75-84	282	4.4	2,969	0.1	8	639	10.0	7,168	0.5	6	6,363	65,439
85 and older	271	3.4	2,712	0.1	8	754	9.5	8,102	0.5	6	7,919	76,456
<b>Male</b>												
All Males	835	4.7	9,098	0.2	14	1,694	9.5	19,143	0.5	6	17,780	184,812
<b>Male, Disabled</b>												
All Ages	455	4.3	5,114	0.2	16	1,069	10.1	12,438	0.5	7	10,590	115,606
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12
6-14	1	20.0	12	0.1	3	0	0.0	0	0.0	0	5	58
15-20	7	15.2	84	0.1	4	7	15.2	84	0.3	6	46	524
21-44	166	3.4	1,924	0.2	10	470	9.6	5,502	0.5	6	4,903	53,944
45-64	276	4.9	3,034	0.2	18	589	10.5	6,816	0.6	7	5,600	60,762
65-74	5	14.3	60	0.9	103	3	8.6	36	0.5	6	35	306
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0

Dual Medicaid Beneficiaries

TABLE D.7D  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR NINTH AND TENTH TOP DRUG GROUPS  
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, KANSAS, 2006

ANTIASTHMATIC						ANTIHISTAMINES						
Beneficiary Characteristics	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Mean Rx \$ Benefit per Benefit Month		Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Mean Rx \$ Benefit per Benefit Month		Number of Beneficiaries	Number of Benefit Months
				Benefit per Month	Benefit Month				Benefit per Month	Benefit Month		
<b>Male, Other Eligibles</b>												
All Ages	380	5.3	3,984	0.2	11	625	8.7	6,705	0.5	6	7,190	69,206
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	11
15-20	0	0.0	0	0.0	0	2	40.0	24	0.6	7	5	51
21-44	9	16.4	97	0.5	31	6	10.9	65	0.4	5	55	387
45-64	6	18.8	59	0.1	14	1	3.1	12	0.1	1	32	233
65-74	172	6.3	1,929	0.1	13	238	8.7	2,623	0.5	6	2,749	28,099
75-84	119	4.5	1,154	0.2	8	213	8.1	2,259	0.5	6	2,642	25,067
85 and older	74	4.3	745	0.1	8	165	9.7	1,722	0.4	5	1,706	15,358
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0

Source: Data for this table are from the MAX 2006 file for Kansas, released by CMS in 3/2010. This table was produced on 02/11/2010.

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 2006. 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 2006. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

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

Dual Medicaid Beneficiaries



TABLE D.8  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,  
 BY BENEFICIARY CHARACTERISTIC<sup>a, b</sup>  
 DUAL ELIGIBLE BENEFICIARIES, KANSAS, 2006

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
<b>All</b>	<b>\$11</b>	<b>0.4</b>	<b>8,549</b>	<b>86,506</b>
<b>Age</b>				
0-64	33	0.9	651	7,307
65-74	18	0.6	972	10,261
75-84	10	0.4	2,595	26,023
85 and older	7	0.3	4,331	42,915
Unknown	0	0.0	0	0
<b>Gender</b>				
Female	10	0.4	6,266	63,913
Male	14	0.5	2,283	22,593
Unknown	0	0.0	0	0
<b>Race</b>				
White	11	0.4	7,771	78,471
African American	9	0.3	374	3,976
Other/unknown	13	0.4	404	4,059
<b>Basis of Eligibility<sup>c</sup></b>				
Aged	9	0.4	7,894	79,160
Disabled	33	0.9	655	7,346
Adults	0	0.0	0	0
Children	0	0.0	0	0
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 2006 file for Kansas, released by CMS in 3/2010. This table was produced on 02/11/2010.

a. Table D.8 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their 2006 Medicaid enrollment. A total of 5,242 beneficiaries who were in nursing facilities for part of their enrollment and their 48,982 benefit months were excluded from the analysis. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

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

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

Dual Medicaid Beneficiaries

TABLE D.9  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,  
 BY BRAND STATUS AND THERAPEUTIC CATEGORY<sup>a, b, c, d, e</sup>  
 DUAL ELIGIBLE BENEFICIARIES, KANSAS, 2006

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 Dual All-Year Nursing Facility Residents	Number of Benefit Months			
Anti-infective Agents	0.1	0.0	0.0	0.1	\$7	\$4	\$0	\$2	\$46	\$109	\$65	\$23	571	\$26,426	374	4.4	3,890
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	0.1	0.0	0.0	0.1	16	11	0	6	135	318	0	66	62	8,381	49	0.6	510
Endocrine/Metabolic Drugs	0.2	0.1	0.0	0.1	8	6	0	1	41	79	29	13	1,323	53,789	635	7.4	6,847
Cardiovascular Agents	0.3	0.1	0.0	0.2	8	4	1	2	28	62	64	12	3,073	85,996	1,041	12.2	11,342
Respiratory Agents	0.2	0.1	0.0	0.1	9	7	1	2	52	103	73	16	761	39,837	403	4.7	4,276
Gastrointestinal Agents	0.2	0.1	0.0	0.1	10	8	1	2	54	134	201	13	1,457	78,591	719	8.4	7,820
Genitourinary Agents	0.1	0.1	0.0	0.1	8	6	0	2	57	81	71	27	403	23,111	253	3.0	2,747
CNS Drugs	0.5	0.1	0.0	0.5	12	6	1	5	22	104	75	11	15,048	327,959	2,589	30.3	27,620
Stimulants/Anti-obesity/Anorexia	0.1	0.0	0.0	0.1	7	5	0	2	49	116	0	16	30	1,483	19	0.2	216
Miscellaneous Psychological/Neurological Agents	0.2	0.2	0.0	0.0	24	24	0	0	160	161	0	95	465	74,233	275	3.2	3,047
Analgesics and Anesthetics	0.2	0.0	0.0	0.2	8	3	0	6	42	100	45	33	1,152	48,767	545	6.4	5,763
Neuromuscular Agents	0.6	0.0	0.0	0.5	12	5	0	6	21	140	47	12	4,637	95,869	732	8.6	8,034
Nutritional Products	0.2	0.0	0.0	0.1	2	0	0	2	16	12	17	16	831	12,913	481	5.6	5,310
Hematological Agents	0.5	0.0	0.0	0.5	7	4	0	3	14	105	10	7	4,868	69,432	880	10.3	9,498
Topical Products	0.2	0.1	0.0	0.1	7	5	0	2	43	101	57	17	726	31,219	384	4.5	4,182
Miscellaneous Products	0.2	0.1	0.0	0.1	11	9	0	2	54	172	0	13	43	2,318	21	0.2	216
Unknown Therapeutic Category	0.1	0.0	0.0	0.0	7	0	0	0	50	0	0	0	46	2,320	33	0.4	353
<b>TOTAL NO. OF RX AND RX \$</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>35,496</b>	<b>982,644</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>

Source: Data for this table are from the MAX 2006 file for Kansas, released by CMS in 3/2010. This table was produced on 02/11/2010.

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 2006. A total of 5,242 beneficiaries who were in nursing facilities for part of their enrollment and their 48,982 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 2006. 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.medi-span.com/master-drug-database.aspx>.

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.medi-span.com/master-drug-database.aspx>.

In Kansas, 0.2 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.

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

TABLE D.10  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS,  
 BY TOP-10 DRUG GROUP<sup>a</sup>, b, c, d  
 DUAL ELIGIBLE BENEFICIARIES, KANSAS, 2006

Top 10 Drug Groups in Nursing Facilities	Users			Among Users			
	Total Medicaid Rx \$	Number of Users	As a Percentage of All-Year Nursing Facility Residents	Number of Benefit Months	Number of Rx per Benefit Month	\$ per Rx	Rx \$ per Benefit Month
ANTIANKXIETY AGENTS	\$121,030	1,859	21.7	19,678	0.6	\$11	\$6
ULCER DRUGS	111,972	971	11.4	10,582	0.3	31	11
ANTIPSYCHOTICS	108,295	399	4.7	4,447	0.2	149	24
ANALGESICS - NonNarcotic	100,216	2,783	32.6	29,606	0.7	5	3
ANTIHISTAMINES	82,833	1,112	13.0	12,284	0.5	13	7
ANTICONVULSANT	81,253	655	7.7	7,272	0.6	19	11
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	75,281	352	4.1	3,902	0.1	151	19
ANTIDEPRESSANTS	69,035	816	9.5	8,887	0.1	53	8
OPHTHALMIC	62,223	1,426	16.7	15,734	0.3	11	4
HEMATOPOIETIC AGENTS	55,589	719	8.4	7,783	0.6	12	7
Total	867,727	11,092	n.a.	120,175	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2006 file for Kansas, released by CMS in 3/2010. This table was produced on 02/11/2010.

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 2006. A total of 5,242 beneficiaries who were in nursing facilities for part of their enrollment and their 48,982 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 2006. 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 2006 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters

Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

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; n.a. = not applicable.

Dual Medicaid Beneficiaries

TABLE D.10A  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR TOP 10 DRUG GROUPS COMBINED AND FIRST  
 AND SECOND TOP DRUG GROUPS SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, KANSAS, 2006

Beneficiary Characteristics	All Top 10 Drug Groups				ANTIAXIETY AGENTS				ULCER DRUGS			
	Number of Rx	Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
<b>All</b>	<b>59,835</b>	<b>\$867,727</b>	<b>1,859</b>	<b>21.7</b>	<b>19,678</b>	<b>0.6</b>	<b>\$6</b>	<b>971</b>	<b>11.4</b>	<b>10,582</b>	<b>0.3</b>	<b>\$11</b>
<b>Female</b>												
All Females	45,397	626,444	1,401	22.4	14,816	0.6	6	727	11.6	7,911	0.3	10
<b>Female, Disabled</b>												
All Ages	3,094	76,713	96	28.8	1,089	0.6	7	49	14.7	552	0.4	13
64 or younger	3,068	76,572	95	28.8	1,077	0.6	7	49	14.8	552	0.4	13
65-74	26	141	1	33.3	12	0.1	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
<b>Female, Other Eligibles</b>												
All Ages	42,303	549,731	1,305	22.0	13,727	0.6	6	678	11.4	7,359	0.3	10
64 or younger	3	27	1	100.0	12	0.3	2	0	0.0	0	0.0	0
65-74	4,726	99,160	144	25.2	1,578	0.6	8	75	13.1	811	0.4	14
75-84	13,086	172,907	406	22.9	4,347	0.6	6	204	11.5	2,314	0.3	10
85 and older	24,488	277,637	754	21.0	7,790	0.6	6	399	11.1	4,234	0.3	10
<b>Male</b>												
All Males	14,438	241,283	458	20.1	4,862	0.5	6	244	10.7	2,671	0.3	11
<b>Male, Disabled</b>												
All Ages	3,094	91,371	92	28.6	1,061	0.7	9	44	13.7	519	0.4	16
64 or younger	3,094	91,371	92	28.8	1,061	0.7	9	44	13.8	519	0.4	16
65-74	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Male, Other Eligibles</b>												
All Ages	11,344	149,912	366	18.7	3,801	0.5	5	200	10.2	2,152	0.3	10
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	2,516	42,933	91	23.0	964	0.6	7	51	12.9	575	0.3	12
75-84	4,469	58,994	142	17.2	1,483	0.5	6	72	8.7	762	0.3	9
85 and older	4,359	47,985	133	18.0	1,354	0.4	4	77	10.4	815	0.3	10
<b>Unknown</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>

Source: Data for this table are from the MAX 2006 file for Kansas, released by CMS in 3/2010. This table was produced on 02/11/2010.

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 2006. A total of 5,242 beneficiaries who were in nursing facilities for part of their enrollment and their 48,982 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 2006. 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 2006 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters

Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

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

TABLE D.10B  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY  
 AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, KANSAS, 2006

Beneficiary Characteristics	ANTIPSYCHOTICS					ANALGESICS - NonNarcotic					ANTIHISTAMINES				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
<b>All</b>	<b>399</b>	<b>4.7</b>	<b>4,447</b>	<b>0.2</b>	<b>\$24</b>	<b>2,783</b>	<b>32.6</b>	<b>29,606</b>	<b>0.7</b>	<b>\$3</b>	<b>1,112</b>	<b>13.0</b>	<b>12,284</b>	<b>0.5</b>	<b>\$7</b>
<b>Female</b>															
All Females	270	4.3	2,970	0.1	22	2,115	33.8	22,655	0.7	4	833	13.3	9,264	0.5	7
<b>Female, Disabled</b>															
All Ages	19	5.7	185	0.2	33	60	18.0	711	0.7	3	72	21.6	823	0.6	8
64 or younger	19	5.8	185	0.2	33	57	17.3	675	0.7	3	72	21.8	823	0.6	8
65-74	0	0.0	0	0.0	0	3	100.0	36	0.4	2	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
<b>Female, Other Eligibles</b>															
All Ages	251	4.2	2,785	0.1	21	2,055	34.6	21,944	0.7	4	761	12.8	8,441	0.5	7
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	43	7.5	484	0.2	46	177	31.0	1,976	0.7	3	91	15.9	1,051	0.5	7
75-84	89	5.0	959	0.1	20	584	33.0	6,380	0.7	3	245	13.8	2,738	0.5	7
85 and older	119	3.3	1,342	0.1	13	1,294	36.0	13,588	0.8	4	425	11.8	4,652	0.5	6
<b>Male</b>															
All Males	129	5.7	1,477	0.2	30	668	29.3	6,951	0.7	3	279	12.2	3,020	0.6	7
<b>Male, Disabled</b>															
All Ages	43	13.4	516	0.3	56	61	18.9	710	0.7	3	41	12.7	489	0.7	9
64 or younger	43	13.4	516	0.3	56	61	19.1	710	0.7	3	41	12.8	489	0.7	9
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
<b>Male, Other Eligibles</b>															
All Ages	86	4.4	961	0.1	16	607	31.0	6,241	0.7	3	238	12.1	2,531	0.5	7
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	25	6.3	298	0.2	21	93	23.5	1,029	0.6	3	69	17.4	707	0.6	7
75-84	37	4.5	415	0.1	13	240	29.1	2,504	0.7	3	77	9.3	840	0.6	7
85 and older	24	3.2	248	0.1	14	274	37.0	2,708	0.7	3	92	12.4	984	0.5	6
<b>Unknown</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>

Source: Data for this table are from the MAX 2006 file for Kansas, released by CMS in 3/2010. This table was produced on 02/11/2010.  
 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 2006. A total of 5,242 beneficiaries who were in nursing facilities for part of their enrollment and their 48,982 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 2006. 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 2006 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.  
 Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.10C  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY  
 AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, KANSAS, 2006

Beneficiary Characteristics	ANTICONVULSANT					MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL					ANTIDEPRESSANTS				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
<b>All</b>	<b>655</b>	<b>7.7</b>	<b>7,272</b>	<b>0.6</b>	<b>\$11</b>	<b>352</b>	<b>4.1</b>	<b>3,902</b>	<b>0.1</b>	<b>\$19</b>	<b>816</b>	<b>9.5</b>	<b>8,887</b>	<b>0.1</b>	<b>\$8</b>
<b>Female</b>															
All Females	448	7.1	4,969	0.6	10	263	4.2	2,923	0.1	22	594	9.5	6,477	0.1	7
<b>Female, Disabled</b>															
All Ages	69	20.7	791	0.8	22	11	3.3	129	0.3	124	39	11.7	412	0.3	23
64 or younger	69	20.9	791	0.8	22	11	3.3	129	0.3	124	39	11.8	412	0.3	23
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
<b>Female, Other Eligibles</b>															
All Ages	379	6.4	4,178	0.6	7	252	4.2	2,794	0.1	17	555	9.4	6,065	0.1	6
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	86	15.1	960	0.6	10	25	4.4	274	0.2	59	67	11.7	707	0.2	11
75-84	135	7.6	1,515	0.6	8	104	5.9	1,187	0.1	13	170	9.6	1,879	0.1	6
85 and older	158	4.4	1,703	0.5	6	123	3.4	1,333	0.1	12	318	8.9	3,479	0.1	5
<b>Male</b>															
All Males	207	9.1	2,303	0.5	14	89	3.9	979	0.1	12	222	9.7	2,410	0.2	10
<b>Male, Disabled</b>															
All Ages	82	25.5	967	0.7	24	10	3.1	120	0.2	13	53	16.5	622	0.3	17
64 or younger	82	25.6	967	0.7	24	10	3.1	120	0.2	13	53	16.6	622	0.3	17
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
<b>Male, Other Eligibles</b>															
All Ages	125	6.4	1,336	0.4	7	79	4.0	859	0.1	11	169	8.6	1,788	0.1	7
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	55	13.9	610	0.4	10	14	3.5	157	0.1	9	35	8.8	386	0.2	12
75-84	44	5.3	455	0.4	5	36	4.4	372	0.1	13	68	8.2	723	0.1	7
85 and older	26	3.5	271	0.5	6	29	3.9	330	0.1	11	66	8.9	679	0.1	5
<b>Unknown</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>

Source: Data for this table are from the MAX 2006 file for Kansas, released by CMS in 3/2010. This table was produced on 02/11/2010.  
 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 2006. A total of 5,242 beneficiaries who were in nursing facilities for part of their enrollment and their 48,982 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 2006. 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 2006 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.  
 Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.10D  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR NINTH AND TENTH TOP DRUG GROUPS  
 SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, KANSAS, 2006

Beneficiary Characteristics	OPHTHALMIC					HEMATOPOIETIC AGENTS					All-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$		
<b>All</b>	<b>1,426</b>	<b>16.7</b>	<b>15,734</b>	<b>0.3</b>	<b>\$4</b>	<b>719</b>	<b>8.4</b>	<b>7,783</b>	<b>0.6</b>	<b>\$7</b>	<b>8,549</b>	<b>86,506</b>
<b>Female</b>												
All Females	1,138	18.2	12,617	0.4	4	524	8.4	5,649	0.6	7	6,266	63,913
<b>Female, Disabled</b>												
All Ages	38	11.4	449	0.3	3	34	10.2	400	0.6	7	333	3,692
64 or younger	38	11.5	449	0.3	3	33	10.0	388	0.6	7	330	3,656
65-74	0	0.0	0	0.0	0	1	33.3	12	0.9	5	3	36
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
<b>Female, Other Eligibles</b>												
All Ages	1,100	18.5	12,168	0.4	4	490	8.3	5,249	0.6	7	5,933	60,221
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12
65-74	74	13.0	787	0.4	4	50	8.8	527	0.6	6	571	6,098
75-84	324	18.3	3,663	0.4	4	149	8.4	1,620	0.6	6	1,770	18,049
85 and older	702	19.5	7,718	0.4	4	291	8.1	3,102	0.6	8	3,591	36,062
<b>Male</b>												
All Males	288	12.6	3,117	0.3	4	195	8.5	2,134	0.6	7	2,283	22,593
<b>Male, Disabled</b>												
All Ages	24	7.5	288	0.3	5	29	9.0	345	0.6	5	322	3,654
64 or younger	24	7.5	288	0.3	5	29	9.1	345	0.6	5	320	3,639
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	15
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
<b>Male, Other Eligibles</b>												
All Ages	264	13.5	2,829	0.3	4	166	8.5	1,789	0.6	7	1,961	18,939
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	34	8.6	394	0.3	3	31	7.8	326	0.6	6	396	4,112
75-84	105	12.7	1,111	0.3	5	68	8.2	731	0.6	9	825	7,974
85 and older	125	16.9	1,324	0.3	3	67	9.1	732	0.7	5	740	6,853
<b>Unknown</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0</b>

Source: Data for this table are from the MAX 2006 file for Kansas, released by CMS in 3/2010. This table was produced on 02/11/2010.  
 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 2006. A total of 5,242 beneficiaries who were in nursing facilities for part of their enrollment and their 48,982 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 2006. 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 2006 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.  
 Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.11  
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D  
 AMONG DUALS, BY BENEFICIARY CHARACTERISTIC<sup>a,b</sup>  
 KANSAS, 2006

Beneficiary Characteristics	Number of Beneficiaries with at Least One Part D Excluded Rx	Percentage of Beneficiaries with at Least One Part D Excluded Rx	Number of Part D Excluded Rx per Beneficiary	Total Number Part D Excluded Rx	Part D Excluded Rx \$ per Beneficiary	Total Part D Excluded Rx \$	\$ per Part D Excluded Rx	Part D Excluded Rx \$ as a Percentage of All Dual Rx \$	Total Number of Beneficiaries	
<b>All</b>	<b>20,085</b>	<b>40.9</b>	<b>3.5</b>	<b>170,632</b>	<b>\$34</b>	<b>\$1,680,395</b>	<b>\$10</b>	<b>16.5</b>	<b>49,148</b>	
<b>Age</b>										
5 and younger	2	50.0	8.5	34	93	370	11	19.5	4	
6-14	2	20.0	0.5	5	4	38	8	0.4	10	
15-20	36	36.7	1.2	122	15	1,457	12	0.5	98	
21-44	2,968	31.5	2.4	22,268	26	247,389	11	7.4	9,422	
45-64	5,421	41.3	3.6	47,722	40	521,338	11	13.7	13,116	
65-74	2,858	36.3	3.0	23,760	30	237,249	10	16.9	7,868	
75-84	3,865	42.9	3.7	33,281	34	303,569	9	41.6	9,005	
85 and older	4,933	51.3	4.5	43,440	38	368,985	8	59.2	9,625	
Unknown	0	0.0	0.0	0	0	0	0	0.0	0	
<b>Basis of Eligibility<sup>c</sup></b>										
Aged	11,622	44.0	3.8	100,256	34	907,299	9	33.7	26,395	
Disabled	8,376	37.3	3.1	69,946	34	769,202	11	10.9	22,430	
Adults	80	26.2	1.3	401	12	3,538	9	0.9	305	
Children	7	53.8	2.2	29	27	356	12	1.0	13	
Unknown	0	0.0	0.0	0	0	0	0	0.0	5	
<b>Gender</b>										
Female	13,832	44.1	3.8	119,633	37	1,157,205	10	18.5	31,368	
Male	6,253	35.2	2.9	50,999	29	523,190	10	13.3	17,780	
Unknown	0	0.0	0.0	0	0	0	0	0.0	0	
<b>Race</b>										
White	17,464	43.8	3.8	153,284	38	1,501,687	10	18.2	39,894	
African American	1,447	27.8	1.8	9,575	20	102,271	11	8.9	5,197	
Other/unknown	1,174	28.9	1.9	7,773	19	76,437	10	9.6	4,057	
<b>Use of Nursing Facilities<sup>d</sup></b>										
Entire year	5,349	62.6	6.5	55,551	59	504,038	9	51.3	8,549	
Part year	3,099	59.1	4.1	21,548	39	204,156	9	34.9	5,242	
None	11,637	32.9	2.6	93,533	27	972,201	10	11.3	35,357	
<b>Maintenance Assistance Status</b>										
Cash	5,414	31.0	2.3	40,555	23	400,832	10	7.7	17,439	
Medically needy	569	21.7	1.1	2,842	19	48,490	17	8.7	2,617	
Poverty related	424	17.8	0.6	1,355	7	15,807	12	3.4	2,388	
Other/unknown	13,678	51.2	4.7	125,880	46	1,215,266	10	30.8	26,704	

Source: Data for this table are from the MAX 2006 file for Kansas, released by CMS in 3/2010. This table was produced on 02/11/2010.

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 2006.

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

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

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

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



TABLE D.12  
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D  
 AMONG DUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC<sup>a,b</sup>  
 KANSAS, 2006

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
<b>All</b>	<b>0.3</b>	<b>\$3</b>	<b>\$10</b>	<b>\$0</b>	<b>\$1</b>	<b>512,125</b>
<b>Age</b>						
5 and younger	0.9	9	11	0	0	39
6-14	0.0	0	8	0	0	117
15-20	0.1	1	12	0	0	1,110
21-44	0.2	2	11	0	1	103,154
45-64	0.3	4	11	0	2	142,974
65-74	0.3	3	10	0	1	82,411
75-84	0.4	3	9	0	1	90,506
85 and older	0.5	4	8	0	1	91,814
Unknown	0.0	0	0	0	0	0
<b>Basis of Eligibility<sup>c</sup></b>						
Aged	0.4	3	9	0	1	263,827
Disabled	0.3	3	11	0	2	245,973
Adults	0.2	2	9	0	1	2,146
Children	0.2	3	12	0	1	139
Unknown	0.0	0	0	0	0	40
<b>Gender</b>						
Female	0.4	4	10	0	2	327,313
Male	0.3	3	10	0	1	184,812
Unknown	0.0	0	0	0	0	0
<b>Race</b>						
White	0.4	4	10	0	2	414,879
African American	0.2	2	11	0	1	55,003
Other/unknown	0.2	2	10	0	1	42,243
<b>Use of Nursing Facilities<sup>d</sup></b>						
Entire year	0.6	6	9	0	2	86,506
Part year	0.4	4	9	0	2	48,982
None	0.2	3	10	0	1	376,637
<b>Maintenance Assistance Status</b>						
Cash	0.2	2	10	0	1	193,216
Medically needy	0.1	2	17	0	1	23,667
Poverty related	0.1	1	12	0	0	24,527
Other/unknown	0.5	4	10	0	2	270,715

Source: Data for this table are from the MAX 2006 file for Kansas, released by CMS in 3/2010. This table was produced on 02/11/2010.

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 2006.

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.

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

TABLE D.13  
USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D FOR SELECTED DRUG CATEGORIES AMONG DUALS<sup>a,b,c</sup>  
KANSAS, 2006

Drug Category	Number of Users	Rx \$ per User	Total Rx \$	Rx \$ as a		Number Rx as a	
				Percentage of All Part D Excluded Rx \$	Total Number Rx. \$ per Rx	Percentage of All Part D Excluded Rx	Excluded Rx
<b>All</b>	<b>25,356</b>	<b>\$66</b>	<b>\$1,680,395</b>	<b>100.0</b>	<b>170,632</b>	<b>\$10</b>	<b>100.0</b>
Anorexia or weight loss/gain	4	295	1,181	0.1	11	107	0.0
Fertility drugs	0	0	0	0.0	0	0	0.0
Drugs for cosmetic purposes	0	0	0	0.0	0	0	0.0
Cough and cold medications	23	31	724	0.0	36	20	0.0
Vitamins and minerals	1,886	31	59,328	3.5	3,665	16	2.1
Non-prescription drugs	12,181	68	831,914	49.5	90,752	9	53.2
Barbiturates	459	69	31,852	1.9	4,886	7	2.9
Benzodiazepines	10,385	68	708,561	42.2	69,795	10	40.9
Other Part D Excl Rx Drugs	418	112	46,835	2.8	1,487	31	0.9

Source: Data for this table are from the MAX 2006 file for Kansas, released by CMS in 3/2010. This table was produced on 02/11/2010.

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 2006. A user is a beneficiary who had at least one prescription filled for a Part D excluded drug in 2006. A beneficiary who used drugs from two or more Part D excluded categories was counted as a user for each category. Therefore, the sum of users across drug categories may exceed the total number of individual users as noted on Table D11.

b. Includes OTC drugs as well as prescription drugs.

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

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

Dual Medicaid Beneficiaries

SUPPLEMENTAL TABLE 1  
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES<sup>a, b</sup>  
 KANSAS, 2006

Total Number of Dual Eligible Beneficiaries: 49,148  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries: \$10,189,392  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary: \$207

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	25,801	52.5	\$0	0.0
1-500	19,565	39.8	2,315,241	22.7
501-1,000	1,904	3.9	1,318,681	12.9
1,001-1,500	631	1.3	761,866	7.5
1,501-2,000	284	0.6	485,635	4.8
2,001-2,500	186	0.4	415,027	4.1
2,501-3,000	126	0.3	348,287	3.4
3,001-3,500	122	0.2	393,633	3.9
3,501-4,000	84	0.2	313,479	3.1
4,001-4,500	57	0.1	241,216	2.4
4,501-5,000	47	0.1	222,349	2.2
5,001-5,500	37	0.1	194,331	1.9
5,501-6,000	36	0.1	207,097	2.0
6,001-6,500	26	0.1	162,091	1.6
6,501-7,000	37	0.1	249,388	2.4
7,001-7,500	26	0.1	187,811	1.8
7,501-8,000	21	0.0	162,097	1.6
8,001-8,500	22	0.0	180,426	1.8
8,501-9,000	11	0.0	96,099	0.9
9,001-9,500	12	0.0	111,234	1.1
9,501-10,000	6	0.0	58,987	0.6
10,001+	107	0.2	1,764,417	17.3

Source: Data for this table are from the MAX 2006 file for Kansas, released by CMS in 3/2010. This table was produced on 02/11/2010.

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 2006.

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

Dual Medicaid Beneficiaries

SUPPLEMENTAL TABLE 1A  
 MEDICAID PHARMACY REIMBURSEMENT FOR DISABLED DUAL ELIGIBLE BENEFICIARIES UNDER AGE 65<sup>a, b, c</sup>  
 KANSAS, 2006

Total Number of Disabled Dual Eligible Beneficiaries, Age < 65: 22,329  
 Total Pharmacy Reimbursement for Disabled Dual Eligible Beneficiaries, Age < 65: \$7,014,258  
 Mean Pharmacy Reimbursement per Disabled Dual Eligible Beneficiary, Age < 65: \$314

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Disabled Dual Beneficiaries,		Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
		Age < 65	Pharmacy Reimbursement		
\$0	10,971	49.1	\$0	0.0	
1-500	8,801	39.4	1,104,116	15.7	
501-1,000	1,153	5.2	808,778	11.5	
1,001-1,500	453	2.0	549,944	7.8	
1,501-2,000	213	1.0	363,629	5.2	
2,001-2,500	132	0.6	295,787	4.2	
2,501-3,000	106	0.5	293,493	4.2	
3,001-3,500	86	0.4	276,899	3.9	
3,501-4,000	65	0.3	242,356	3.5	
4,001-4,500	40	0.2	170,122	2.4	
4,501-5,000	35	0.2	165,309	2.4	
5,001-5,500	26	0.1	136,515	1.9	
5,501-6,000	31	0.1	178,800	2.5	
6,001-6,500	23	0.1	143,136	2.0	
6,501-7,000	30	0.1	202,797	2.9	
7,001-7,500	21	0.1	152,063	2.2	
7,501-8,000	16	0.1	122,855	1.8	
8,001-8,500	16	0.1	131,452	1.9	
8,501-9,000	10	0.0	87,320	1.2	
9,001-9,500	9	0.0	83,398	1.2	
9,501-10,000	4	0.0	39,219	0.6	
10,001+	88	0.4	1,466,270	20.9	

Source: Data for this table are from the MAX 2006 file for Kansas, released by CMS in 3/2010. This table was produced on 02/11/2010.

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 2006.

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.

Dual Medicaid Beneficiaries

SUPPLEMENTAL TABLE 1B  
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 AND OLDER<sup>a, b</sup>  
 KANSAS, 2006

Total Number of Dual Eligible Beneficiaries, Age 65+: 26,498  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65+: \$2,758,996  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65+: \$104

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 65+	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	14,713	55.5	\$0	0.0
1-500	10,666	40.3	1,196,496	43.4
501-1,000	725	2.7	491,831	17.8
1,001-1,500	163	0.6	193,491	7.0
1,501-2,000	64	0.2	109,864	4.0
2,001-2,500	42	0.2	92,246	3.3
2,501-3,000	18	0.1	49,414	1.8
3,001-3,500	28	0.1	91,119	3.3
3,501-4,000	14	0.1	52,697	1.9
4,001-4,500	12	0.0	50,047	1.8
4,501-5,000	9	0.0	42,654	1.5
5,001-5,500	9	0.0	47,391	1.7
5,501-6,000	5	0.0	28,297	1.0
6,001-6,500	3	0.0	18,955	0.7
6,501-7,000	5	0.0	33,177	1.2
7,001-7,500	4	0.0	28,573	1.0
7,501-8,000	3	0.0	23,489	0.9
8,001-8,500	2	0.0	16,199	0.6
8,501-9,000	1	0.0	8,779	0.3
9,001-9,500	0	0.0	0	0.0
9,501-10,000	2	0.0	19,768	0.7
10,001+	10	0.0	164,509	6.0

Source: Data for this table are from the MAX 2006 file for Kansas, released by CMS in 3/2010. This table was produced on 02/11/2010.

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 2006.

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

Dual Medicaid Beneficiaries

SUPPLEMENTAL TABLE 1C  
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 TO 74<sup>a, b</sup>  
 KANSAS, 2006

Total Number of Dual Eligible Beneficiaries, Age 65-74: 7,868  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65-74: \$1,406,224  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65-74: \$178

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 65-74	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	4,309	54.8	\$0	0.0
1-500	3,019	38.4	371,006	26.4
501-1,000	265	3.4	181,579	12.9
1,001-1,500	91	1.2	109,036	7.8
1,501-2,000	45	0.6	77,190	5.5
2,001-2,500	31	0.4	68,057	4.8
2,501-3,000	15	0.2	41,334	2.9
3,001-3,500	25	0.3	81,507	5.8
3,501-4,000	12	0.2	45,375	3.2
4,001-4,500	11	0.1	46,040	3.3
4,501-5,000	7	0.1	33,129	2.4
5,001-5,500	9	0.1	47,391	3.4
5,501-6,000	3	0.0	17,016	1.2
6,001-6,500	1	0.0	6,254	0.4
6,501-7,000	3	0.0	19,993	1.4
7,001-7,500	4	0.1	28,573	2.0
7,501-8,000	3	0.0	23,489	1.7
8,001-8,500	2	0.0	16,199	1.2
8,501-9,000	1	0.0	8,779	0.6
9,001-9,500	0	0.0	0	0.0
9,501-10,000	2	0.0	19,768	1.4
10,001+	10	0.1	164,509	11.7

Source: Data for this table are from the MAX 2006 file for Kansas, released by CMS in 3/2010. This table was produced on 02/11/2010.

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 2006.

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

Dual Medicaid Beneficiaries

SUPPLEMENTAL TABLE 1D  
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 75 TO 84<sup>a, b</sup>  
 KANSAS, 2006

Total Number of Dual Eligible Beneficiaries, Age 75-84: 9,005  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 75-84: \$730,008  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 75-84: \$81

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 75-84	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	4,989	55.4	\$0	0.0
1-500	3,688	41.0	419,881	57.5
501-1,000	258	2.9	175,046	24.0
1,001-1,500	38	0.4	44,580	6.1
1,501-2,000	12	0.1	20,529	2.8
2,001-2,500	7	0.1	15,291	2.1
2,501-3,000	2	0.0	5,434	0.7
3,001-3,500	3	0.0	9,612	1.3
3,501-4,000	2	0.0	7,322	1.0
4,001-4,500	1	0.0	4,007	0.5
4,501-5,000	2	0.0	9,525	1.3
5,001-5,500	0	0.0	0	0.0
5,501-6,000	1	0.0	5,719	0.8
6,001-6,500	1	0.0	6,438	0.9
6,501-7,000	1	0.0	6,624	0.9
7,001-7,500	0	0.0	0	0.0
7,501-8,000	0	0.0	0	0.0
8,001-8,500	0	0.0	0	0.0
8,501-9,000	0	0.0	0	0.0
9,001-9,500	0	0.0	0	0.0
9,501-10,000	0	0.0	0	0.0
10,001+	0	0.0	0	0.0

Source: Data for this table are from the MAX 2006 file for Kansas, released by CMS in 3/2010. This table was produced on 02/11/2010.

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 2006.

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

Dual Medicaid Beneficiaries

SUPPLEMENTAL TABLE 1E  
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 85 AND OLDER<sup>a, b</sup>  
 KANSAS, 2006

Total Number of Dual Eligible Beneficiaries, Age 85+: 9,625  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 85+: \$622,764  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 85+: \$64

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 85+	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	5,415	56.3	\$0	0.0
1-500	3,959	41.1	405,609	65.1
501-1,000	202	2.1	135,206	21.7
1,001-1,500	34	0.4	39,875	6.4
1,501-2,000	7	0.1	12,145	2.0
2,001-2,500	4	0.0	8,898	1.4
2,501-3,000	1	0.0	2,646	0.4
3,001-3,500	0	0.0	0	0.0
3,501-4,000	0	0.0	0	0.0
4,001-4,500	0	0.0	0	0.0
4,501-5,000	0	0.0	0	0.0
5,001-5,500	0	0.0	0	0.0
5,501-6,000	1	0.0	5,562	0.9
6,001-6,500	1	0.0	6,263	1.0
6,501-7,000	1	0.0	6,560	1.1
7,001-7,500	0	0.0	0	0.0
7,501-8,000	0	0.0	0	0.0
8,001-8,500	0	0.0	0	0.0
8,501-9,000	0	0.0	0	0.0
9,001-9,500	0	0.0	0	0.0
9,501-10,000	0	0.0	0	0.0
10,001+	0	0.0	0	0.0

Source: Data for this table are from the MAX 2006 file for Kansas, released by CMS in 3/2010. This table was produced on 02/11/2010.

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 2006.

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

Dual Medicaid Beneficiaries



APPENDIX TABLE A.3  
 CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY<sup>a, b</sup>  
 DUAL ELIGIBLE BENEFICIARIES, KANSAS, 2006

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
<b>All</b>	<b>49,371</b>	<b>26,529</b>	<b>22,465</b>	<b>358</b>	<b>14</b>	<b>5</b>	<b>515,519</b>	<b>265,463</b>	<b>246,553</b>	<b>3,313</b>	<b>150</b>	<b>40</b>
<b>Age</b>												
5 and younger	4	0	4	0	0	0	39	0	39	0	0	0
6-14	10	0	7	0	3	0	117	0	82	0	35	0
15-20	99	0	89	0	10	0	1,121	0	1,018	0	103	0
21-44	9,458	0	9,193	264	1	0	104,110	0	101,650	2,448	12	0
45-64	13,167	2	13,070	91	0	4	143,758	14	142,878	834	0	32
65-74	7,906	7,801	102	2	0	1	82,885	81,972	886	19	0	8
75-84	9,061	9,060	0	1	0	0	91,196	91,184	0	12	0	0
85 and older	9,666	9,666	0	0	0	0	92,293	92,293	0	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
<b>Gender</b>												
Female	31,527	19,401	11,864	251	6	5	329,842	196,571	130,775	2,391	65	40
Male	17,844	7,128	10,601	107	8	0	185,677	68,892	115,778	922	85	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
<b>Race</b>												
White	40,056	21,680	18,105	256	11	4	417,271	215,278	199,510	2,339	116	28
African American	5,237	2,180	2,995	62	0	0	55,695	22,766	32,322	607	0	0
Other/unknown	4,078	2,669	1,365	40	3	1	42,553	27,419	14,721	367	34	12
<b>Use of Nursing Facilities<sup>c</sup></b>												
Entire year	8,549	7,894	655	0	0	0	86,506	79,160	7,346	0	0	0
Part year	5,242	4,702	540	0	0	0	48,998	43,423	5,575	0	0	0
None	35,580	13,933	21,270	358	14	5	380,015	142,880	233,632	3,313	150	40
<b>Maintenance Assistance Status</b>												
Cash	17,512	6,137	11,102	273	0	0	194,704	68,560	123,507	2,637	0	0
Medically needy	2,617	790	1,825	2	0	0	23,689	6,535	17,139	15	0	0
Poverty related	2,390	783	1,546	49	7	5	24,613	7,815	16,300	385	73	40
Other/unknown	26,852	18,819	7,992	34	7	0	272,513	182,553	89,607	276	77	0
<b>Dual Status<sup>d</sup></b>												
Full dual, all year	45,862	25,135	20,358	350	14	5	477,905	250,596	223,895	3,224	150	40
Full dual, part year	3,509	1,394	2,107	8	0	0	37,614	14,867	22,658	89	0	0
<b>Managed Care (MC) Status</b>												
Fee-for-service (FFS) all year	48,976	26,359	22,380	219	13	5	511,348	263,668	245,605	1,896	139	40
FFS part year, with Rx claims	84	10	27	47	0	0	904	115	311	478	0	0
FFS part year, no Rx claims	88	26	23	39	0	0	892	250	242	400	0	0
MC all year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
MC all year, no Rx claims	223	134	35	53	1	0	2,375	1,430	395	539	11	0

Source: Data for this table are from the MAX 2006 file for Kansas, released by CMS in 3/2010. This table was produced on 02/11/2010.

a. Table A.3 includes the beneficiaries represented by Cell F of Table 1. Benefit months are months during which beneficiaries had pharmacy benefit coverage.

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

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

d. The "Full dual, all year" group contains beneficiaries who had Medicare as well as Medicaid pharmacy benefits during all months of Medicaid enrollment in 2006. 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<sup>a</sup>  
 DUAL ELIGIBLE BENEFICIARIES, KANSAS, 2006

Beneficiary Characteristics	Beneficiaries and Benefit Months in Cell F of Table 1		Included in Cell G of Table 1		Excluded from Cell G of Table 1	
	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months
<b>All</b>	<b>49,371</b>	<b>515,519</b>	<b>49,148</b>	<b>512,125</b>	<b>0</b>	<b>3,394</b>
Fee-for-service (FFS) all year	48,976	511,348	48,976	511,347	0	1
FFS part year, with Rx claims	84	904	84	422	0	482
FFS part year, with no Rx claims	88	892	88	356	0	536
Managed care (MC) all year, with Rx claims	0	0	0	0	0	0
MC all year, with no Rx claims	223	2,375	0	0	0	2,375

Source: Data for this table are from the MAX 2006 file for Kansas, released by CMS in 3/2010. This table was produced on 02/11/2010.

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

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

Dual Medicaid Beneficiaries