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

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TABLE D.2
CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a, b}
DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 2006

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown
All	108,356	62,570	45,176	545	10	55	1,187,773	672,058	510,252	4,844	119	500
Age												
5 and younger	9	0	8	0	1	0	99	0	87	0	12	0
6-14	25	0	22	0	3	0	289	0	254	0	35	0
15-20	355	0	347	2	6	0	4,047	0	3,957	18	72	0
21-44	19,917	1	19,530	383	0	3	224,592	3	221,280	3,290	0	19
45-64	25,007	86	24,735	154	0	32	281,515	971	278,787	1,469	0	288
65-74	24,863	24,467	370	6	0	20	276,928	272,740	3,928	67	0	193
75-84	22,130	22,006	124	0	0	0	238,650	237,169	1,481	0	0	0
85 and older	16,050	16,010	40	0	0	0	161,653	161,175	478	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	70,758	46,879	23,452	368	4	55	777,715	507,550	266,352	3,265	48	500
Male	37,598	15,691	21,724	177	6	0	410,058	164,508	243,900	1,579	71	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	44,848	25,647	18,923	253	4	21	484,329	268,554	213,282	2,286	48	159
African American	48,942	25,945	22,708	255	5	29	548,005	288,071	257,359	2,225	59	291
Other/unknown	14,566	10,978	3,545	37	1	5	155,439	115,433	39,611	333	12	50
Use of Nursing Facilities^c												
Entire year	14,327	12,726	1,601	0	0	0	146,588	128,770	17,818	0	0	0
Part year	9,733	8,611	1,122	0	0	0	98,351	86,510	11,841	0	0	0
None	84,296	41,233	42,453	545	10	55	942,834	456,778	480,593	4,844	119	500
Maintenance Assistance Status												
Cash	66,105	35,539	30,195	370	1	0	751,389	404,967	342,924	3,486	12	0
Medically needy	71	44	13	14	0	0	643	390	129	124	0	0
Poverty-related	3,722	1,365	2,166	129	7	55	39,596	14,818	23,265	930	83	500
Other/unknown	38,458	25,622	12,802	32	2	0	396,145	251,883	143,934	304	24	0
Dual Medicare Status^d												
Full dual, all year	101,392	59,038	41,770	520	10	54	1,111,195	633,109	472,910	4,569	119	488
Full dual, part year	6,964	3,532	3,406	25	0	1	76,578	38,949	37,342	275	0	12
Managed Care (MC) Status												
Fee-for-service (FFS) all year	108,356	62,570	45,176	545	10	55	1,187,773	672,058	510,252	4,844	119	500
FFS part year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
FFS part year, no Rx claims	0	0	0	0	0	0	0	0	0	0	0	0

Source: Data for this table are from the MAX 2006 file for Louisiana, released by CMS in 7/2009. 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^{a, b}
DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 2006

Beneficiary Characteristics	Percentage with at Least One Rx	Mean Number of Rx	Mean Rx \$	\$ per Rx	Rx \$ as a Percentage of All Medicaid FFS \$ ^d		Number of Beneficiaries
					Mean \$, All Medicaid FFS \$ ^c		
All	38.5	4.9	\$235	\$48	\$11,041	2.1	108,356
Age							
5 and younger	44.4	8.4	948	112	19,511	4.9	9
6-14	64.0	16.0	2,861	179	11,962	23.9	25
15-20	69.9	13.9	1,487	107	12,377	12.0	355
21-44	35.3	4.8	331	69	9,737	3.4	19,917
45-64	41.7	6.5	350	54	12,716	2.7	25,007
65-74	36.5	5.3	251	47	7,474	3.4	24,863
75-84	37.7	3.4	89	26	11,021	0.8	22,130
85 and older	41.1	3.6	84	24	15,566	0.5	16,050
Unknown	0.0	0.0	0	0	0	0.0	0
Basis of Eligibility^e							
Aged	38.0	4.1	147	36	10,782	1.4	62,570
Disabled	38.8	5.7	338	60	11,486	2.9	45,176
Adults	65.9	19.4	1,546	80	3,835	40.3	545
Children	40.0	5.4	308	57	11,050	2.8	10
Unknown	83.6	26.0	3,833	147	11,244	34.1	55
Gender							
Female	40.6	5.2	240	47	10,366	2.3	70,758
Male	34.6	4.3	227	53	12,310	1.8	37,598
Unknown	0.0	0.0	0	0	0	0.0	0
Race							
White	45.9	6.1	276	45	15,341	1.8	44,848
African American	32.2	3.8	206	54	8,128	2.5	48,942
Other/unknown	37.0	4.5	210	47	7,587	2.8	14,566
Use of Nursing Facilities^f							
Entire year	56.0	7.5	245	33	28,007	0.9	14,327
Part year	57.5	5.6	194	35	18,789	1.0	9,733
None	33.4	4.3	238	55	7,263	3.3	84,296
Maintenance Assistance Status							
Cash	34.5	4.7	264	56	4,261	6.2	66,105
Medically needy	64.8	11.3	811	72	20,756	3.9	71
Poverty related	33.6	5.0	378	75	2,118	17.8	3,722
Other/unknown	45.9	5.1	171	34	23,540	0.7	38,458

Source: Data for this table are from the MAX 2006 file for Louisiana, released by CMS in 7/2009. 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^{a, b}
 DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 2006

Beneficiary Characteristics	Number of Rx, Percentage with:										Number	
	Mean Number of Rx	Mean Rx \$	Rx \$ as a Percentage of All Medicaid FFS \$ ^c	None	More than 0, but 1 or Less	More than 1, but 2 or Less	More than 2, but 5 or Less	More than 5, but 10 or Less	More than 10	Mean \$, All Medicaid FFS \$ ^d	Beneficiaries	Benefit Months
All	0.4	\$22	2.1	61.5	30.4	4.0	2.8	1.1	0.2	\$1,007	108,356	1,187,773
Age												
5 and younger	0.8	86	4.9	55.6	22.2	11.1	11.1	0.0	0.0	1,774	9	99
6-14	1.4	248	23.9	36.0	28.0	12.0	20.0	4.0	0.0	1,035	25	289
15-20	1.2	130	12.0	30.1	43.9	11.5	9.3	3.9	1.1	1,086	355	4,047
21-44	0.4	29	3.4	64.7	27.3	3.6	3.2	1.0	0.1	863	19,917	224,592
45-64	0.6	31	2.7	58.3	31.3	4.5	3.7	1.7	0.4	1,130	25,007	281,515
65-74	0.5	23	3.4	63.5	27.9	3.9	3.1	1.3	0.4	671	24,863	276,928
75-84	0.3	8	0.8	62.3	31.9	3.6	1.6	0.5	0.1	1,022	22,130	238,650
85 and older	0.4	8	0.5	58.9	34.6	4.2	1.8	0.4	0.1	1,546	16,050	161,653
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Basis of Eligibility^e												
Aged	0.4	14	1.4	62.0	31.0	3.9	2.2	0.8	0.2	1,004	62,570	672,058
Disabled	0.5	30	2.9	61.2	29.7	4.1	3.4	1.4	0.3	1,017	45,176	510,252
Adults	2.2	174	40.3	34.1	26.2	10.3	18.7	8.8	1.8	431	545	4,844
Children	0.5	26	2.8	60.0	20.0	20.0	0.0	0.0	0.0	929	10	119
Unknown	2.9	422	34.1	16.4	23.6	10.9	32.7	14.5	1.8	1,237	55	500
Gender												
Female	0.5	22	2.3	59.4	32.1	4.1	2.9	1.1	0.3	943	70,758	777,715
Male	0.4	21	1.8	65.4	27.2	3.7	2.6	1.0	0.2	1,129	37,598	410,058
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	0.6	26	1.8	54.1	35.6	5.4	3.2	1.4	0.3	1,421	44,848	484,329
African American	0.3	18	2.5	67.8	26.1	2.8	2.4	0.8	0.1	726	48,942	548,005
Other/unknown	0.4	20	2.8	63.0	29.0	3.6	2.9	1.1	0.4	711	14,566	155,439
Use of Nursing Facilities^f												
Entire year	0.7	24	0.9	44.0	40.8	8.8	4.1	1.6	0.7	2,737	14,327	146,588
Part year	0.6	19	1.0	42.5	47.8	5.6	3.0	1.0	0.2	1,859	9,733	98,351
None	0.4	21	3.3	66.6	26.7	3.0	2.5	1.0	0.2	649	84,296	942,834
Maintenance Assistance Status												
Cash	0.4	23	6.2	65.5	27.3	3.1	2.7	1.1	0.2	375	66,105	751,389
Medically needy	1.3	90	3.9	35.2	35.2	9.9	18.3	1.4	0.0	2,292	71	643
Poverty related	0.5	36	17.8	66.4	24.0	3.4	4.8	1.3	0.2	199	3,722	39,596
Other/unknown	0.5	17	0.7	54.1	36.4	5.6	2.7	0.9	0.3	2,285	38,458	396,145

Source: Data for this table are from the MAX 2006 file for Louisiana, released by CMS in 7/2009. 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 f of Table 1 for methodology used to determine nursing facility residence.

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

TABLE D.5
 AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 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
All	0.4	\$22	\$48	0.1	\$13	\$118	0.0	\$2	\$86	0.3	\$7	\$22
Age												
5 and younger	0.8	86	112	0.3	67	263	0.1	7	144	0.5	12	27
6-14	1.4	248	179	0.5	215	397	0.2	12	60	0.6	21	33
15-20	1.2	130	107	0.4	92	213	0.1	12	157	0.7	27	37
21-44	0.4	29	69	0.1	20	174	0.0	2	110	0.3	7	25
45-64	0.6	31	54	0.1	19	129	0.0	2	95	0.4	10	24
65-74	0.5	23	47	0.1	13	105	0.0	2	85	0.3	7	22
75-84	0.3	8	26	0.1	4	58	0.0	1	50	0.2	4	17
85 and older	0.4	8	24	0.1	4	51	0.0	0	34	0.3	4	16
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility^d												
Aged	0.4	14	36	0.1	7	82	0.0	1	67	0.3	5	19
Disabled	0.5	30	60	0.1	20	146	0.0	2	99	0.3	8	24
Adults	2.2	174	80	0.7	106	153	0.1	17	178	1.4	51	36
Children	0.5	26	57	0.2	19	105	0.1	1	11	0.2	5	27
Unknown	2.9	422	147	1.1	355	332	0.1	13	128	1.7	50	30
Gender												
Female	0.5	22	47	0.1	13	112	0.0	2	83	0.3	7	21
Male	0.4	21	53	0.1	13	130	0.0	1	92	0.3	6	23
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Race												
White	0.6	26	45	0.1	15	113	0.0	2	88	0.4	9	22
African American	0.3	18	54	0.1	12	127	0.0	1	86	0.2	5	22
Other/unknown	0.4	20	47	0.1	12	108	0.0	1	75	0.3	7	23
Use of Nursing Facilities^e												
Entire year	0.7	24	33	0.2	12	79	0.0	1	56	0.6	10	19
Part year	0.6	19	35	0.1	10	85	0.0	1	57	0.4	8	19
None	0.4	21	55	0.1	14	130	0.0	2	96	0.3	6	23
Maintenance Assistance Status												
Cash	0.4	23	56	0.1	15	131	0.0	2	96	0.3	7	24
Medically needy	1.3	90	72	0.3	53	162	0.1	14	176	0.8	23	27
Poverty related	0.5	36	75	0.2	25	155	0.0	2	102	0.3	8	27
Other/unknown	0.5	17	34	0.1	9	84	0.0	1	60	0.4	7	19

Source: Data for this table are from the MAX 2006 file for Louisiana, released by CMS in 7/2009. 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^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 2006

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per Rx				Users ^e				
	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total Number of Rx	Total Rx \$	Number	As a Percentage of Dual Benes	Number of Benefit Months
Anti-infective Agents	0.3	0.1	0.0	0.2	\$24	\$17	\$0	\$6	\$92	\$310	\$97	\$30	13,964	\$1,284,951	4,996	4.6	54,381
Biologicals	0.3	0.3	0.0	0.0	287	287	0	0	1021	1,021	0	0	27	27,565	8	0.0	96
Antineoplastic Agents	0.3	0.1	0.0	0.2	81	60	0	21	255	655	326	92	1,263	322,442	429	0.4	3,969
Endocrine/Metabolic Drugs	0.5	0.2	0.0	0.3	32	24	1	7	62	121	40	23	25,383	1,566,492	4,682	4.3	49,717
Cardiovascular Agents	0.9	0.3	0.1	0.5	46	27	5	13	51	84	98	26	67,432	3,438,362	7,222	6.7	75,177
Respiratory Agents	0.4	0.2	0.0	0.2	26	20	1	5	62	99	47	26	18,444	1,145,007	4,005	3.7	43,675
Gastrointestinal Agents	0.4	0.3	0.0	0.1	45	40	2	4	108	146	271	26	18,906	2,032,933	4,277	3.9	44,919
Genitourinary Agents	0.3	0.1	0.1	0.1	21	10	7	4	68	77	98	36	3,932	266,927	1,246	1.1	12,799
CNS Drugs	0.6	0.1	0.0	0.5	24	13	2	9	38	148	113	18	162,982	6,274,512	23,742	21.9	264,150
Stimulants/Anti-obesity/Anorexia	0.3	0.2	0.0	0.0	47	46	0	1	182	190	115	44	1,890	344,621	636	0.6	7,333
Miscellaneous Psychological/Neurological Agents	0.4	0.4	0.0	0.0	61	60	0	1	165	168	137	94	2,841	469,382	871	0.8	7,688
Analgesics and Anesthetics	0.4	0.0	0.0	0.4	24	7	4	13	54	194	192	33	36,423	1,958,806	7,398	6.8	80,986
Neuromuscular Agents	0.5	0.1	0.0	0.5	27	12	1	14	49	169	94	30	45,732	2,235,968	7,514	6.9	83,478
Nutritional Products	0.5	0.1	0.0	0.4	8	2	0	5	15	18	18	14	57,148	849,717	9,957	9.2	109,637
Hematological Agents	0.5	0.2	0.0	0.3	20	15	1	5	39	87	24	15	59,155	2,311,419	10,456	9.6	115,442
Topical Products	0.3	0.1	0.0	0.1	16	10	1	4	61	97	65	32	9,487	577,591	3,268	3.0	35,272
Miscellaneous Products	0.3	0.2	0.0	0.1	174	151	13	9	523	676	397	123	696	363,955	193	0.2	2,097
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	9	0	0	0	47	0	0	0	491	23,216	226	0.2	2,604
TOTAL NO. OF RX AND RX \$	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	526,196	25,493,866	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2006 file for Louisiana, released by CMS in 7/2009. 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 Louisiana, 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^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 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	\$2,419,677	2,408	2.2	25,334	0.4	\$234	\$96
ANTIANKXIETY AGENTS	1,995,707	17,689	16.3	198,522	0.5	20	10
ANTICONVULSANT	1,922,621	6,538	6.0	72,800	0.5	51	26
HEMATOPOIETIC AGENTS	1,828,516	14,890	13.7	165,799	0.5	24	11
ULCER DRUGS	1,600,469	3,883	3.6	41,174	0.3	119	39
ANTIDIABETIC	1,168,023	4,032	3.7	43,302	0.4	73	27
ANTIHYPERLIPIDEMIC	1,146,477	3,111	2.9	33,723	0.3	100	34
ANTIDEPRESSANTS	1,080,608	4,814	4.4	50,486	0.3	64	21
ANALGESICS - Narcotic	1,013,014	6,813	6.3	74,220	0.3	48	14
ANTIHYPERTENSIVE	1,004,115	5,835	5.4	61,848	0.3	47	16
Total	15,179,227	70,013	n.a.	767,208	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2006 file for Louisiana, released by CMS in 7/2009. 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^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 2006

Beneficiary Characteristics	All Top 10 Drug Groups							ANTIPSYCHOTICS						ANTIANKXIETY AGENTS					
	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	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month		
All	326,300	\$15,179,227	2,408	2.2	25,334	0.4	\$96	17,689	16.3	198,522	0.5	\$10							
Female																			
All Females	228,767	9,982,194	1,403	2.0	14,851	0.4	84	12,832	18.1	144,402	0.5	10							
Female, Disabled																			
All Ages	93,222	5,356,137	755	3.2	8,609	0.4	101	4,532	19.3	52,539	0.5	10							
5 and younger	5	131	0	0.0	0	0.0	0	0	0.0	0	0.0	0							
6-14	88	13,314	0	0.0	0	0.0	0	0	0.0	0	0.0	0							
15-20	898	70,214	30	21.1	357	0.4	77	22	15.5	257	0.2	5							
21-44	28,610	1,773,731	377	4.2	4,378	0.4	96	1,441	16.2	16,734	0.5	9							
45-64	61,437	3,335,789	340	2.4	3,778	0.4	107	3,004	21.4	34,824	0.5	10							
65-74	2,046	161,307	8	3.4	96	0.8	165	53	22.3	580	0.5	13							
75-84	90	1,247	0	0.0	0	0.0	0	9	9.7	108	0.5	8							
85 and older	48	404	0	0.0	0	0.0	0	3	11.1	36	0.4	2							
Female, Other Eligibles																			
All Ages	135,545	4,626,057	648	1.4	6,242	0.4	59	8,300	17.5	91,863	0.5	10							
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0							
6-14	4	511	0	0.0	0	0.0	0	1	100.0	12	0.2	1							
15-20	3	28	0	0.0	0	0.0	0	0	0.0	0	0.0	0							
21-44	2,505	213,588	30	10.1	327	0.4	96	71	24.0	726	0.5	9							
45-64	1,705	158,921	7	4.1	74	0.5	91	34	19.8	343	0.5	8							
65-74	55,313	2,586,100	297	1.8	3,303	0.4	78	2,867	17.3	32,823	0.5	10							
75-84	41,822	969,723	178	1.1	1,491	0.3	33	2,984	17.7	33,070	0.5	10							
85 and older	34,193	697,186	136	1.0	1,047	0.3	26	2,343	17.5	24,889	0.5	9							
Male																			
All Males	97,533	5,197,033	1,005	2.7	10,483	0.4	113	4,857	12.9	54,120	0.5	11							
Male, Disabled																			
All Ages	57,300	3,600,961	691	3.2	7,695	0.4	126	2,888	13.3	33,118	0.5	11							
5 and younger	18	1,817	0	0.0	0	0.0	0	0	0.0	0	0.0	0							
6-14	89	10,073	0	0.0	0	0.0	0	0	0.0	0	0.0	0							
15-20	1,163	154,922	44	21.5	518	0.5	130	15	7.3	180	0.3	4							
21-44	23,244	1,652,151	399	3.8	4,523	0.4	121	1,191	11.2	13,749	0.5	12							
45-64	31,972	1,730,224	247	2.3	2,650	0.5	133	1,667	15.6	19,012	0.5	11							
65-74	756	50,444	1	0.8	4	0.5	82	11	8.3	129	0.5	13							
75-84	46	1,210	0	0.0	0	0.0	0	4	12.9	48	0.5	17							
85 and older	12	120	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^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 2006

Beneficiary Characteristics	All Top 10 Drug Groups		ANTIPSYCHOTICS					ANTIANKXIETY AGENTS				
	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
Male, Other Eligibles												
All Ages	40,233	1,596,072	314	2.0	2,788	0.4	76	1,969	12.4	21,002	0.5	10
5 and younger	4	28	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	13	1,729	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	2	19	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	1,169	101,998	12	13.2	118	0.4	107	29	31.9	264	0.6	8
45-64	1,140	88,524	2	2.0	24	0.3	22	17	17.0	183	0.7	8
65-74	20,822	969,855	166	2.1	1,679	0.5	95	953	12.0	10,556	0.5	11
75-84	10,825	281,434	96	1.9	717	0.4	44	641	12.4	6,835	0.5	10
85 and older	6,258	152,485	38	1.5	250	0.4	33	329	12.6	3,164	0.5	10
Unknown	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2006 file for Louisiana, released by CMS in 7/2009. 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>.

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.7B
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR THIRD TO FIFTH TOP DRUG GROUPS
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 2006

Beneficiary Characteristics	ANTICONVULSANT					HEMATOPOIETIC AGENTS					ULCER DRUGS				
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	6,538	6.0	72,800	0.5	\$26	14,890	13.7	165,799	0.5	\$11	3,883	3.6	41,174	0.3	\$39
Female															
All Females	4,311	6.1	48,096	0.5	24	10,906	15.4	122,379	0.5	11	2,766	3.9	29,664	0.3	39
Female, Disabled															
All Ages	2,306	9.8	26,546	0.5	30	2,528	10.8	29,498	0.4	13	1,367	5.8	15,481	0.3	42
5 and younger	0	0.0	0	0.0	0	1	50.0	12	0.2	3	1	50.0	12	0.2	8
6-14	0	0.0	0	0.0	0	8	133.3	96	0.4	99	1	16.7	12	0.3	57
15-20	25	17.6	300	0.4	40	26	18.3	307	0.2	7	23	16.2	274	0.3	33
21-44	913	10.2	10,546	0.5	39	862	9.7	10,130	0.3	7	440	4.9	5,023	0.3	36
45-64	1,346	9.6	15,444	0.5	23	1,580	11.3	18,372	0.4	15	869	6.2	9,805	0.3	45
65-74	22	9.2	256	0.6	25	34	14.3	377	0.5	83	33	13.9	355	0.6	65
75-84	0	0.0	0	0.0	0	9	9.7	108	0.4	4	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	8	29.6	96	0.4	3	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	2,005	4.2	21,550	0.5	16	8,378	17.7	92,881	0.5	10	1,399	3.0	14,183	0.3	35
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	100.0	12	0.2	41	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	59	19.9	629	0.5	68	33	11.1	356	0.2	7	34	11.5	369	0.3	41
45-64	36	20.9	365	0.4	28	12	7.0	141	0.3	307	31	18.0	310	0.3	38
65-74	865	5.2	9,742	0.5	19	2,159	13.0	24,905	0.4	12	808	4.9	9,001	0.3	41
75-84	684	4.1	7,177	0.5	11	3,103	18.4	34,437	0.5	8	307	1.8	2,659	0.3	26
85 and older	360	2.7	3,625	0.5	10	3,071	22.9	33,042	0.5	9	219	1.6	1,844	0.2	18
Male															
All Males	2,227	5.9	24,704	0.5	32	3,984	10.6	43,420	0.5	12	1,117	3.0	11,510	0.3	40
Male, Disabled															
All Ages	1,629	7.5	18,517	0.6	35	1,361	6.3	15,510	0.5	16	622	2.9	6,825	0.3	42
5 and younger	0	0.0	0	0.0	0	3	50.0	36	0.4	37	1	16.7	12	0.4	41
6-14	0	0.0	0	0.0	0	14	87.5	166	0.3	50	2	12.5	24	0.1	9
15-20	39	19.0	462	0.7	105	12	5.9	142	0.3	23	27	13.2	315	0.3	54
21-44	806	7.6	9,249	0.6	41	368	3.5	4,316	0.5	12	256	2.4	2,902	0.3	38
45-64	775	7.2	8,720	0.6	26	941	8.8	10,608	0.5	18	325	3.0	3,458	0.4	43
65-74	8	6.1	74	0.8	44	19	14.4	194	0.6	11	11	8.3	114	0.6	97
75-84	1	3.2	12	0.7	9	3	9.7	36	0.4	8	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	1	7.7	12	1.0	10	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^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 2006

Beneficiary Characteristics	ANTICONVULSANT					HEMATOPOIETIC AGENTS					ULCER DRUGS				
	Number of Users	Users	Number of	Mean	Mean Rx \$	Number of Users	Users	Number of	Mean	Mean Rx \$	Number of Users	Users	Number of	Mean	Mean Rx \$
		as %					Benefit Months					as %			
		of Dual	Among Users	Benefit per	Benefit		of Dual	Among Users	Benefit per	Benefit		of Dual	Among Users	Benefit per	Benefit
Male, Other Eligibles															
All Ages	598	3.8	6,187	0.5	21	2,623	16.5	27,910	0.5	10	495	3.1	4,685	0.3	36
5 and younger	0	0.0	0	0.0	0	1	100.0	12	0.3	2	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	3	150.0	36	0.3	41	1	50.0	12	0.3	22
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	22	24.2	227	0.3	50	2	2.2	24	0.1	1	16	17.6	173	0.4	62
45-64	16	16.0	154	0.6	72	4	4.0	41	0.3	4	15	15.0	167	0.3	35
65-74	335	4.2	3,565	0.5	23	1,022	12.9	11,415	0.5	10	302	3.8	3,148	0.3	38
75-84	145	2.8	1,471	0.6	13	940	18.2	9,985	0.5	9	90	1.7	654	0.3	32
85 and older	80	3.1	770	0.5	12	651	25.0	6,397	0.5	10	71	2.7	531	0.3	23
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2006 file for Louisiana, released by CMS in 7/2009. 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>.

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.7C
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR SIXTH TO EIGHTH TOP DRUG GROUPS
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 2006

Beneficiary Characteristics	ANTIDIABETIC					ANTIHYPERTENSIVE					ANTIDEPRESSANTS				
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	4,032	3.7	43,302	0.4	\$27	3,111	2.9	33,723	0.3	\$34	4,814	4.4	50,486	0.3	\$21
Female															
All Females	2,957	4.2	32,240	0.4	27	2,135	3.0	23,297	0.3	34	3,491	4.9	36,790	0.3	21
Female, Disabled															
All Ages	1,425	6.1	16,074	0.4	30	980	4.2	11,066	0.4	37	2,046	8.7	22,984	0.3	22
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	2	33.3	24	0.7	52	1	16.7	12	0.5	56	0	0.0	0	0.0	0
15-20	5	3.5	57	0.3	20	1	0.7	12	0.3	64	41	28.9	484	0.3	21
21-44	294	3.3	3,371	0.4	29	165	1.8	1,910	0.3	31	802	9.0	9,062	0.3	21
45-64	1,083	7.7	12,198	0.4	30	779	5.6	8,786	0.4	37	1,175	8.4	13,135	0.4	23
65-74	41	17.2	424	0.6	42	34	14.3	346	0.6	64	28	11.8	303	0.6	27
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	1,532	3.2	16,166	0.3	24	1,155	2.4	12,231	0.3	31	1,445	3.1	13,806	0.3	19
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	29	9.8	296	0.3	20	19	6.4	209	0.4	36	109	36.8	1,119	0.4	32
45-64	36	20.9	366	0.5	51	35	20.3	342	0.4	38	56	32.6	564	0.5	31
65-74	1,025	6.2	11,599	0.4	27	760	4.6	8,537	0.3	35	677	4.1	7,279	0.4	22
75-84	281	1.7	2,549	0.3	12	212	1.3	2,036	0.2	21	350	2.1	2,846	0.3	13
85 and older	161	1.2	1,356	0.3	10	129	1.0	1,107	0.2	14	253	1.9	1,998	0.2	10
Male															
All Males	1,075	2.9	11,062	0.4	27	976	2.6	10,426	0.3	34	1,323	3.5	13,696	0.3	22
Male, Disabled															
All Ages	601	2.8	6,459	0.4	30	544	2.5	6,040	0.4	36	862	4.0	9,516	0.3	23
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	1	6.3	12	0.7	43	0	0.0	0	0.0	0
15-20	3	1.5	35	0.3	11	2	1.0	24	0.2	14	44	21.5	521	0.4	23
21-44	187	1.8	2,059	0.3	28	165	1.6	1,900	0.3	32	419	3.9	4,786	0.3	25
45-64	389	3.6	4,131	0.4	30	364	3.4	3,966	0.4	37	392	3.7	4,158	0.3	21
65-74	22	16.7	234	0.7	53	12	9.1	138	0.6	57	7	5.3	51	0.5	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.7C
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR SIXTH TO EIGHTH TOP DRUG GROUPS
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 2006

Beneficiary Characteristics	ANTIDIABETIC					ANTIHYPERTENSIVE					ANTIDEPRESSANTS				
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit	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	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
Male, Other Eligibles															
All Ages	474	3.0	4,603	0.4	23	432	2.7	4,386	0.3	32	461	2.9	4,180	0.3	21
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	12	13.2	130	0.3	43	14	15.4	149	0.3	28	50	54.9	505	0.4	33
45-64	26	26.0	269	0.6	45	22	22.0	235	0.4	41	29	29.0	319	0.3	31
65-74	296	3.7	3,099	0.4	24	282	3.6	3,060	0.3	35	215	2.7	2,116	0.4	19
75-84	94	1.8	761	0.3	14	80	1.6	699	0.2	21	97	1.9	716	0.3	16
85 and older	46	1.8	344	0.2	12	34	1.3	243	0.3	21	70	2.7	524	0.3	15
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2006 file for Louisiana, released by CMS in 7/2009. 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^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 2006

Beneficiary Characteristics	ANALGESICS - Narcotic					ANTIHYPERTENSIVE						
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit per Month	Mean Rx \$ Benefit	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit per Month	Mean Rx \$ Benefit	Number of Beneficiaries	Number of Benefit Months
All	6,813	6.3	74,220	0.3	\$14	5,835	5.4	61,848	0.3	\$16	108,356	1,187,773
Female												
All Females	4,646	6.6	51,105	0.3	12	3,986	5.6	42,779	0.3	17	70,758	777,715
Female, Disabled												
All Ages	2,887	12.3	32,917	0.3	12	1,839	7.8	20,681	0.4	18	23,452	266,352
5 and younger	0	0.0	0	0.0	0	1	50.0	12	0.1	1	2	24
6-14	1	16.7	12	0.1	1	3	50.0	36	0.7	34	6	72
15-20	77	54.2	905	0.2	3	21	14.8	239	0.3	17	142	1,620
21-44	1,148	12.9	13,256	0.3	9	406	4.6	4,527	0.3	15	8,921	101,641
45-64	1,623	11.6	18,314	0.3	13	1,365	9.7	15,429	0.4	18	14,023	159,029
65-74	38	16.0	430	0.4	34	43	18.1	438	0.6	34	238	2,533
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	93	1,109
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	27	324
Female, Other Eligibles												
All Ages	1,759	3.7	18,188	0.3	13	2,147	4.5	22,098	0.3	15	47,306	511,363
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	12
15-20	3	60.0	36	0.1	1	0	0.0	0	0.0	0	5	54
21-44	190	64.2	1,961	0.4	31	50	16.9	533	0.3	13	296	2,549
45-64	93	54.1	922	0.4	26	53	30.8	547	0.4	20	172	1,764
65-74	994	6.0	11,165	0.3	12	1,329	8.0	14,707	0.4	18	16,572	186,261
75-84	300	1.8	2,635	0.2	5	444	2.6	4,057	0.3	10	16,851	183,779
85 and older	179	1.3	1,469	0.2	5	271	2.0	2,254	0.3	10	13,409	136,944
Male												
All Males	2,167	5.8	23,115	0.3	17	1,849	4.9	19,069	0.4	16	37,598	410,058
Male, Disabled												
All Ages	1,524	7.0	16,666	0.3	15	1,018	4.7	10,938	0.4	17	21,724	243,900
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	6	63
6-14	0	0.0	0	0.0	0	7	43.8	84	0.3	13	16	182
15-20	57	27.8	669	0.1	4	18	8.8	205	0.3	13	205	2,337
21-44	752	7.1	8,358	0.3	14	342	3.2	3,726	0.3	15	10,609	119,639
45-64	701	6.5	7,478	0.3	17	626	5.8	6,637	0.4	17	10,712	119,758
65-74	14	10.6	161	0.2	29	25	18.9	286	0.5	20	132	1,395
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	31	372
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	13	154

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^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 2006

Beneficiary Characteristics	ANALGESICS - Narcotic					ANTIHYPERTENSIVE						
	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	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	Number of Beneficiaries	Number of Benefit Months
Male, Other Eligibles												
All Ages	643	4.1	6,449	0.3	22	831	5.2	8,131	0.3	15	15,874	166,158
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	23
15-20	1	33.3	12	0.1	1	1	33.3	12	0.1	1	3	36
21-44	87	95.6	856	0.5	41	21	23.1	212	0.5	19	91	763
45-64	58	58.0	615	0.5	48	37	37.0	366	0.4	23	100	964
65-74	374	4.7	4,015	0.3	18	514	6.5	5,514	0.3	16	7,921	86,739
75-84	78	1.5	634	0.2	5	166	3.2	1,399	0.2	9	5,155	53,390
85 and older	45	1.7	317	0.3	6	92	3.5	628	0.3	11	2,601	24,231
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0

Source: Data for this table are from the MAX 2006 file for Louisiana, released by CMS in 7/2009. 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.

TABLE D.8
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BENEFICIARY CHARACTERISTIC^{a, b}
 DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 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
All	\$24	0.7	14,327	146,588
Age				
0-64	50	1.1	1,554	17,294
65-74	44	1.0	2,554	27,218
75-84	16	0.6	4,631	46,958
85 and older	13	0.5	5,588	55,118
Unknown	0	0.0	0	0
Gender				
Female	21	0.7	9,911	101,678
Male	32	0.8	4,416	44,910
Unknown	0	0.0	0	0
Race				
White	22	0.7	8,620	88,425
African American	24	0.7	3,755	40,132
Other/unknown	32	0.8	1,952	18,031
Basis of Eligibility^c				
Aged	20	0.7	12,726	128,770
Disabled	52	1.1	1,601	17,818
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 Louisiana, released by CMS in 7/2009. 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 9,733 beneficiaries who were in nursing facilities for part of their enrollment and their 98,351 benefit months were excluded from the analysis. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

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

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

TABLE D.9
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d, e}
 DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 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	Total	Patented Brand-Name	Off-Patent Brand-Name	Total	Patented Brand-Name	Off-Patent Brand-Name	Total	Patented Brand-Name	Off-Patent Brand-Name	Total	Total Rx \$	Number of Users	As a Percentage of Dual All-Year Nursing Facility Residents	Number of Benefit Months	
Anti-infective Agents	0.3	0.1	0.0	0.2	\$21	\$13	\$0	\$7	\$70	\$189	\$106	\$33	1,126	\$79,316	434	3.0	3,768	
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	0.3	0.0	0.0	0.3	48	12	0	36	155	335	0	131	218	33,699	97	0.7	698	
Endocrine/Metabolic Drugs	0.5	0.2	0.1	0.3	26	19	2	5	48	97	44	17	2,318	110,214	542	3.8	4,231	
Cardiovascular Agents	0.9	0.2	0.1	0.7	36	13	6	17	38	58	88	26	7,513	282,026	996	7.0	7,942	
Respiratory Agents	0.5	0.2	0.0	0.3	26	17	1	7	51	89	55	24	1,560	79,115	372	2.6	3,100	
Gastrointestinal Agents	0.6	0.3	0.0	0.3	44	34	2	8	76	115	139	30	2,826	214,800	600	4.2	4,897	
Genitourinary Agents	0.4	0.2	0.1	0.1	27	14	8	5	61	67	81	36	957	57,996	278	1.9	2,134	
CNS Drugs	0.8	0.1	0.0	0.7	24	11	1	13	32	117	83	20	35,075	1,131,922	4,428	30.9	46,254	
Stimulants/Anti-obesity/Anorexia	0.4	0.3	0.0	0.1	43	39	0	3	121	157	0	32	83	10,060	30	0.2	236	
Miscellaneous Psychological/Neurological Agents	0.5	0.5	0.0	0.0	55	54	0	1	117	117	0	118	1,277	149,890	370	2.6	2,743	
Analgesics and Anesthetics	0.5	0.1	0.0	0.5	24	7	5	11	44	138	167	24	2,421	106,350	536	3.7	4,497	
Neuromuscular Agents	0.8	0.1	0.0	0.7	28	10	1	17	36	150	61	24	8,271	296,010	1,054	7.4	10,711	
Nutritional Products	0.7	0.1	0.0	0.6	9	2	0	7	13	15	17	12	22,476	288,587	2,894	20.2	30,929	
Hematological Agents	0.7	0.2	0.0	0.5	21	15	1	6	30	66	23	12	19,789	589,696	2,632	18.4	27,617	
Topical Products	0.4	0.1	0.1	0.2	19	8	5	5	51	73	70	29	1,511	76,834	458	3.2	4,033	
Miscellaneous Products	0.2	0.0	0.0	0.2	32	17	0	15	158	585	0	87	35	5,527	21	0.1	174	
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	7	0	0	0	25	0	0	0	107	2,689	36	0.3	409	
TOTAL NO. OF RX AND RX \$	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	107,563	3,514,731	n.a.	n.a.	n.a.	

Source: Data for this table are from the MAX 2006 file for Louisiana, released by CMS in 7/2009. 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 9,733 beneficiaries who were in nursing facilities for part of their enrollment and their 98,351 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 Louisiana, 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^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 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	
HEMATOPOIETIC AGENTS	\$559,309	4,205	29.4	45,176	0.6	\$20	\$12	
ANTI-ANXIETY AGENTS	479,519	3,326	23.2	35,618	0.6	21	13	
ANTI-PSYCHOTICS	357,286	527	3.7	4,568	0.5	170	78	
ANTI-CONVULSANTS	254,633	1,021	7.1	10,500	0.7	34	24	
MULTIVITAMINS	250,859	2,441	17.0	26,718	0.8	12	9	
HYPNOTICS	174,189	1,140	8.0	12,331	0.7	21	14	
ULCER DRUGS	167,951	515	3.6	4,218	0.4	93	40	
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	149,890	500	3.5	3,662	0.3	117	41	
ANTI-DEPRESSANTS	120,928	688	4.8	5,487	0.4	56	22	
ANTI-HISTAMINES	113,240	1,660	11.6	18,210	0.5	13	6	
Total	2,627,804	16,023	n.a.	166,488	n.a.	n.a.	n.a.	

Source: Data for this table are from the MAX 2006 file for Louisiana, released by CMS in 7/2009. 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 9,733 beneficiaries who were in nursing facilities for part of their enrollment and their 98,351 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^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 2006

Beneficiary Characteristics	HEMATOPOIETIC AGENTS							ANTIAXIETY AGENTS				
	Number of Rx	Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
All	103,049	\$2,627,804	4,205	29.4	45,176	0.6	\$12	3,326	23.2	35,618	0.6	\$14
Female												
All Females	70,704	1,631,094	2,980	30.1	32,213	0.6	11	2,394	24.2	25,678	0.6	13
Female, Disabled												
All Ages	6,763	234,413	165	26.6	1,847	0.6	20	202	32.6	2,335	0.7	17
64 or younger	6,391	204,311	159	26.9	1,776	0.6	11	193	32.7	2,231	0.7	17
65-74	350	29,849	5	26.3	59	0.6	305	9	47.4	104	0.7	16
75-84	22	253	1	14.3	12	0.2	1	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles												
All Ages	63,941	1,396,681	2,815	30.3	30,366	0.6	11	2,192	23.6	23,343	0.6	13
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	13,401	423,325	430	31.6	4,749	0.6	12	427	31.4	4,755	0.6	15
75-84	22,982	462,236	1,024	31.1	11,039	0.6	11	823	25.0	8,680	0.6	13
85 and older	27,558	511,120	1,361	29.4	14,578	0.6	11	942	20.3	9,908	0.6	11
Male												
All Males	32,345	996,710	1,225	27.7	12,963	0.7	15	932	21.1	9,940	0.6	15
Male, Disabled												
All Ages	10,132	392,680	225	22.9	2,468	0.6	28	315	32.1	3,568	0.7	18
64 or younger	9,957	388,576	223	23.2	2,444	0.6	28	312	32.4	3,532	0.7	18
65-74	137	3,698	1	8.3	12	1.0	19	2	16.7	24	0.9	32
75-84	12	132	0	0.0	0	0.0	0	1	25.0	12	0.3	3
85 and older	26	274	1	50.0	12	1.0	10	0	0.0	0	0.0	0
Male, Other Eligibles												
All Ages	22,213	604,030	1,000	29.1	10,495	0.7	12	617	18.0	6,372	0.6	13
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	9,595	329,921	340	29.3	3,747	0.7	13	238	20.5	2,581	0.6	14
75-84	7,559	164,627	367	27.7	3,895	0.6	11	221	16.7	2,309	0.6	13
85 and older	5,059	109,482	293	30.9	2,853	0.7	13	158	16.6	1,482	0.5	12
Unknown	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2006 file for Louisiana, released by CMS in 7/2009. 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 9,733 beneficiaries who were in nursing facilities for part of their enrollment and their 98,351 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^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 2006

Beneficiary Characteristics	ANTIPSYCHOTICS					ANTICONVULSANT					MULTIVITAMINS				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
All	527	3.7	4,568	0.5	\$78	1,021	7.1	10,500	0.7	\$24	2,441	17.0	26,718	0.8	\$9
Female															
All Females	305	3.1	2,654	0.4	63	653	6.6	6,653	0.7	20	1,654	16.7	18,096	0.8	9
Female, Disabled															
All Ages	23	3.7	275	0.5	71	110	17.7	1,261	0.8	33	120	19.4	1,399	0.7	9
64 or younger	21	3.6	251	0.5	69	108	18.3	1,240	0.8	33	115	19.5	1,339	0.7	9
65-74	2	10.5	24	1.3	91	2	10.5	21	1.0	36	4	21.1	48	1.0	12
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	14.3	12	0.8	8
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	282	3.0	2,379	0.4	62	543	5.8	5,392	0.7	18	1,534	16.5	16,697	0.8	9
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	108	7.9	1,141	0.5	89	173	12.7	1,798	0.7	26	245	18.0	2,796	0.8	10
75-84	94	2.9	687	0.3	40	216	6.6	2,140	0.7	15	506	15.4	5,480	0.8	9
85 and older	80	1.7	551	0.3	31	154	3.3	1,454	0.7	12	783	16.9	8,421	0.8	9
Male															
All Males	222	5.0	1,914	0.5	100	368	8.3	3,847	0.7	31	787	17.8	8,622	0.8	10
Male, Disabled															
All Ages	60	6.1	602	0.5	129	162	16.5	1,866	0.7	34	204	20.8	2,334	0.8	9
64 or younger	60	6.2	602	0.5	129	162	16.8	1,866	0.7	34	198	20.6	2,262	0.8	9
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	25.0	36	1.0	12
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	25.0	12	0.8	8
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	100.0	24	0.6	6
Male, Other Eligibles															
All Ages	162	4.7	1,312	0.5	87	206	6.0	1,981	0.7	28	583	17.0	6,288	0.8	10
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	83	7.1	782	0.6	114	108	9.3	1,061	0.7	38	237	20.4	2,701	0.8	10
75-84	56	4.2	407	0.4	48	55	4.2	523	0.7	17	203	15.3	2,167	0.8	10
85 and older	23	2.4	123	0.4	42	43	4.5	397	0.6	17	143	15.1	1,420	0.8	9
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2006 file for Louisiana, released by CMS in 7/2009. 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 9,733 beneficiaries who were in nursing facilities for part of their enrollment and their 98,351 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^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 2006

Beneficiary Characteristics	HYPNOTICS					ULCER DRUGS					MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
All	1,140	8.0	12,331	0.7	\$14	515	3.6	4,218	0.4	\$40	500	3.5	3,662	0.3	\$41
Female															
All Females	743	7.5	8,042	0.7	15	315	3.2	2,554	0.4	34	356	3.6	2,628	0.3	38
Female, Disabled															
All Ages	85	13.7	988	0.8	14	28	4.5	323	0.6	47	12	1.9	129	0.5	212
64 or younger	82	13.9	953	0.8	14	23	3.9	266	0.6	45	12	2.0	129	0.5	212
65-74	3	15.8	35	0.9	30	5	26.3	57	0.7	59	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	658	7.1	7,054	0.7	15	287	3.1	2,231	0.4	32	344	3.7	2,499	0.3	29
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	156	11.5	1,713	0.7	17	90	6.6	848	0.5	42	49	3.6	385	0.4	41
75-84	259	7.9	2,739	0.7	13	102	3.1	662	0.3	31	153	4.6	1,067	0.3	29
85 and older	243	5.2	2,602	0.6	17	95	2.1	721	0.3	22	142	3.1	1,047	0.3	26
Male															
All Males	397	9.0	4,289	0.7	12	200	4.5	1,664	0.5	49	144	3.3	1,034	0.4	48
Male, Disabled															
All Ages	142	14.5	1,603	0.8	11	68	6.9	703	0.4	49	21	2.1	191	0.5	66
64 or younger	140	14.5	1,579	0.8	11	67	7.0	691	0.4	47	21	2.2	191	0.5	66
65-74	2	16.7	24	1.1	7	1	8.3	12	1.0	141	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male, Other Eligibles															
All Ages	255	7.4	2,686	0.6	13	132	3.8	961	0.5	49	123	3.6	843	0.4	44
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	100	8.6	1,078	0.7	14	62	5.3	538	0.5	56	37	3.2	257	0.5	63
75-84	99	7.5	1,053	0.6	10	41	3.1	254	0.4	43	54	4.1	368	0.4	34
85 and older	56	5.9	555	0.6	15	29	3.1	169	0.4	37	32	3.4	218	0.4	38
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2006 file for Louisiana, released by CMS in 7/2009. 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 9,733 beneficiaries who were in nursing facilities for part of their enrollment and their 98,351 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^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 2006

Beneficiary Characteristics	ANTIDEPRESSANTS					ANTIHISTAMINES					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 \$		
All	688	4.8	5,487	0.4	\$22	1,660	11.6	18,210	0.5	\$6	14,327	146,588
Female												
All Females	472	4.8	3,741	0.4	20	1,195	12.1	13,210	0.5	6	9,911	101,678
Female, Disabled												
All Ages	48	7.7	489	0.6	37	106	17.1	1,232	0.5	8	620	6,956
64 or younger	43	7.3	435	0.5	37	100	16.9	1,160	0.5	8	591	6,648
65-74	5	26.3	54	0.8	33	5	26.3	60	0.6	9	19	195
75-84	0	0.0	0	0.0	0	1	14.3	12	0.9	12	7	77
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	36
Female, Other Eligibles												
All Ages	424	4.6	3,252	0.4	17	1,089	11.7	11,978	0.5	6	9,291	94,722
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	111	8.1	1,008	0.5	27	214	15.7	2,401	0.5	6	1,362	14,538
75-84	160	4.9	1,076	0.3	15	375	11.4	4,116	0.5	6	3,295	33,707
85 and older	153	3.3	1,168	0.3	11	500	10.8	5,461	0.5	6	4,634	46,477
Male												
All Males	216	4.9	1,746	0.4	27	465	10.5	5,000	0.4	6	4,416	44,910
Male, Disabled												
All Ages	66	6.7	676	0.4	33	140	14.3	1,583	0.5	7	981	10,862
64 or younger	66	6.9	676	0.4	33	136	14.1	1,535	0.5	7	963	10,646
65-74	0	0.0	0	0.0	0	4	33.3	48	0.6	9	12	144
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	4	48
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	24
Male, Other Eligibles												
All Ages	150	4.4	1,070	0.4	24	325	9.5	3,417	0.4	6	3,435	34,048
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	64	5.5	527	0.5	29	123	10.6	1,343	0.5	6	1,161	12,341
75-84	49	3.7	313	0.3	20	126	9.5	1,303	0.4	5	1,325	13,126
85 and older	37	3.9	230	0.3	18	76	8.0	771	0.5	7	949	8,581
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0

Source: Data for this table are from the MAX 2006 file for Louisiana, released by CMS in 7/2009. 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 9,733 beneficiaries who were in nursing facilities for part of their enrollment and their 98,351 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^{a,b}
 LOUISIANA, 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
All	35,995	33.2	2.5	267,059	\$42	\$4,550,471	\$17	17.8	108,356
Age									
5 and younger	3	33.3	2.7	24	100	900	38	10.6	9
6-14	17	68.0	5.4	135	97	2,433	18	3.4	25
15-20	94	26.5	1.5	519	51	18,243	35	3.5	355
21-44	5,252	26.4	1.8	35,991	36	719,983	20	10.9	19,917
45-64	8,924	35.7	2.8	68,918	52	1,296,391	19	14.8	25,007
65-74	7,696	31.0	2.3	57,885	39	964,662	17	15.5	24,863
75-84	7,775	35.1	2.6	57,407	40	874,394	15	44.3	22,130
85 and older	6,234	38.8	2.9	46,180	42	673,465	15	49.8	16,050
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Basis of Eligibility^c									
Aged	21,535	34.4	2.6	160,109	40	2,489,788	16	27.2	62,570
Disabled	14,229	31.5	2.3	105,719	45	2,040,185	19	13.4	45,176
Adults	202	37.1	2.0	1,063	33	18,071	17	2.1	545
Children	3	30.0	4.9	49	66	659	13	21.4	10
Unknown	26	47.3	2.2	119	32	1,768	15	0.8	55
Gender									
Female	25,337	35.8	2.6	185,141	45	3,178,191	17	18.7	70,758
Male	10,658	28.3	2.2	81,918	36	1,372,280	17	16.1	37,598
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Race									
White	18,491	41.2	3.4	153,549	59	2,628,521	17	21.3	44,848
African American	13,076	26.7	1.7	83,418	29	1,424,707	17	14.1	48,942
Other/unknown	4,428	30.4	2.1	30,092	34	497,243	17	16.2	14,566
Use of Nursing Facilities^d									
Entire year	7,633	53.3	5.4	76,934	84	1,204,185	16	34.3	14,327
Part year	5,288	54.3	3.7	36,317	57	555,770	15	29.5	9,733
None	23,074	27.4	1.8	153,808	33	2,790,516	18	13.9	84,296
Maintenance Assistance Status									
Cash	18,702	28.3	1.9	125,087	34	2,255,139	18	12.9	66,105
Medically needy	33	46.5	3.0	210	41	2,883	14	5.0	71
Poverty related	785	21.1	0.8	3,087	16	59,480	19	4.2	3,722
Other/unknown	16,475	42.8	3.6	138,675	58	2,232,969	16	34.0	38,458

Source: Data for this table are from the MAX 2006 file for Louisiana, released by CMS in 7/2009. 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^{a,b}
 LOUISIANA, 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
All	0.2	\$4	\$17	\$0	\$2	1,187,773
Age						
5 and younger	0.2	9	38	0	0	99
6-14	0.5	8	18	0	0	289
15-20	0.1	5	35	0	0	4,047
21-44	0.2	3	20	0	2	224,592
45-64	0.2	5	19	0	3	281,515
65-74	0.2	3	17	0	2	276,928
75-84	0.2	4	15	0	2	238,650
85 and older	0.3	4	15	0	2	161,653
Unknown	0.0	0	0	0	0	0
Basis of Eligibility^c						
Aged	0.2	4	16	0	2	672,058
Disabled	0.2	4	19	0	2	510,252
Adults	0.2	4	17	0	2	4,844
Children	0.4	6	13	1	0	119
Unknown	0.2	4	15	0	3	500
Gender						
Female	0.2	4	17	0	2	777,715
Male	0.2	3	17	0	2	410,058
Unknown	0.0	0	0	0	0	0
Race						
White	0.3	5	17	0	4	484,329
African American	0.2	3	17	0	1	548,005
Other/unknown	0.2	3	17	0	2	155,439
Use of Nursing Facilities^d						
Entire year	0.5	8	16	0	5	146,588
Part year	0.4	6	15	0	3	98,351
None	0.2	3	18	0	2	942,834
Maintenance Assistance Status						
Cash	0.2	3	18	0	2	751,389
Medically needy	0.3	4	14	0	3	643
Poverty related	0.1	2	19	0	1	39,596
Other/unknown	0.4	6	16	0	3	396,145

Source: Data for this table are from the MAX 2006 file for Louisiana, released by CMS in 7/2009. 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.

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

TABLE D.13
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D FOR SELECTED DRUG CATEGORIES AMONG DUALS^{a,b,c}
 LOUISIANA, 2006

Drug Category	Number of Users	Rx \$ per User	Total Rx \$	Rx \$ as a Percentage of All Part D Excluded Rx \$	Total Number Rx.	\$ per Rx	Number Rx as a Percentage of All Part D Excluded Rx
All	45,063	\$101	\$4,550,471	100.0	267,059	\$17	100.0
Anorexia or weight loss/gain	0	0	0	0.0	0	0	0.0
Fertility drugs	0	0	0	0.0	0	0	0.0
Drugs for cosmetic purposes	0	0	0	0.0	0	0	0.0
Cough and cold medications	675	44	29,400	0.6	1,216	24	0.5
Vitamins and minerals	9,107	81	733,668	16.1	52,900	14	19.8
Non-prescription drugs	10,341	53	544,035	12.0	51,851	10	19.4
Barbiturates	1,549	99	154,098	3.4	14,231	11	5.3
Benzodiazepines	21,580	123	2,661,559	58.5	140,784	19	52.7
Other Part D Excl Rx Drugs	1,811	236	427,711	9.4	6,077	70	2.3

Source: Data for this table are from the MAX 2006 file for Louisiana, released by CMS in 7/2009. 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^{a, b}
 LOUISIANA, 2006

Total Number of Dual Eligible Beneficiaries: 108,356
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries: \$25,493,866
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary: \$235

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	66,615	61.5	\$0	0.0
1-500	33,537	31.0	4,196,576	16.5
501-1,000	3,149	2.9	2,212,914	8.7
1,001-1,500	1,327	1.2	1,630,628	6.4
1,501-2,000	801	0.7	1,394,721	5.5
2,001-2,500	547	0.5	1,225,817	4.8
2,501-3,000	402	0.4	1,102,394	4.3
3,001-3,500	325	0.3	1,054,145	4.1
3,501-4,000	261	0.2	977,801	3.8
4,001-4,500	184	0.2	779,783	3.1
4,501-5,000	185	0.2	875,653	3.4
5,001-5,500	143	0.1	750,753	2.9
5,501-6,000	110	0.1	631,787	2.5
6,001-6,500	92	0.1	573,312	2.2
6,501-7,000	79	0.1	532,525	2.1
7,001-7,500	68	0.1	491,900	1.9
7,501-8,000	61	0.1	470,429	1.8
8,001-8,500	51	0.0	419,803	1.6
8,501-9,000	41	0.0	359,008	1.4
9,001-9,500	44	0.0	407,444	1.6
9,501-10,000	30	0.0	292,625	1.1
10,001+	304	0.3	5,113,848	20.1

Source: Data for this table are from the MAX 2006 file for Louisiana, released by CMS in 7/2009. 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^{a, b, c}
 LOUISIANA, 2006

Total Number of Disabled Dual Eligible Beneficiaries, Age < 65: 44,642
 Total Pharmacy Reimbursement for Disabled Dual Eligible Beneficiaries, Age < 65: \$14,901,972
 Mean Pharmacy Reimbursement per Disabled Dual Eligible Beneficiary, Age < 65: \$333

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	27,335	61.2	\$0	0.0	
1-500	12,921	28.9	1,672,315	11.2	
501-1,000	1,434	3.2	1,018,527	6.8	
1,001-1,500	701	1.6	862,124	5.8	
1,501-2,000	438	1.0	765,750	5.1	
2,001-2,500	318	0.7	712,212	4.8	
2,501-3,000	220	0.5	602,817	4.0	
3,001-3,500	194	0.4	627,625	4.2	
3,501-4,000	171	0.4	640,783	4.3	
4,001-4,500	101	0.2	427,835	2.9	
4,501-5,000	114	0.3	541,057	3.6	
5,001-5,500	93	0.2	489,299	3.3	
5,501-6,000	72	0.2	413,639	2.8	
6,001-6,500	58	0.1	362,012	2.4	
6,501-7,000	54	0.1	364,290	2.4	
7,001-7,500	44	0.1	319,086	2.1	
7,501-8,000	45	0.1	346,848	2.3	
8,001-8,500	36	0.1	296,526	2.0	
8,501-9,000	26	0.1	227,636	1.5	
9,001-9,500	30	0.1	277,932	1.9	
9,501-10,000	19	0.0	185,344	1.2	
10,001+	218	0.5	3,748,315	25.2	

Source: Data for this table are from the MAX 2006 file for Louisiana, released by CMS in 7/2009. 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^{a, b}
 LOUISIANA, 2006

Total Number of Dual Eligible Beneficiaries, Age 65+: 63,043
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65+: \$9,561,706
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65+: \$151

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 65+	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	39,025	61.9	\$0	0.0
1-500	20,452	32.4	2,499,501	26.1
501-1,000	1,670	2.6	1,162,686	12.2
1,001-1,500	582	0.9	713,825	7.5
1,501-2,000	338	0.5	586,669	6.1
2,001-2,500	205	0.3	460,023	4.8
2,501-3,000	165	0.3	452,086	4.7
3,001-3,500	115	0.2	373,912	3.9
3,501-4,000	81	0.1	303,734	3.2
4,001-4,500	75	0.1	317,940	3.3
4,501-5,000	65	0.1	306,165	3.2
5,001-5,500	47	0.1	246,007	2.6
5,501-6,000	33	0.1	188,992	2.0
6,001-6,500	29	0.0	180,226	1.9
6,501-7,000	17	0.0	114,542	1.2
7,001-7,500	16	0.0	115,411	1.2
7,501-8,000	14	0.0	108,371	1.1
8,001-8,500	13	0.0	106,815	1.1
8,501-9,000	14	0.0	122,540	1.3
9,001-9,500	12	0.0	111,160	1.2
9,501-10,000	8	0.0	77,846	0.8
10,001+	67	0.1	1,013,255	10.6

Source: Data for this table are from the MAX 2006 file for Louisiana, released by CMS in 7/2009. 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^{a, b}
 LOUISIANA, 2006

Total Number of Dual Eligible Beneficiaries, Age 65-74: 24,863
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65-74: \$6,234,928
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65-74: \$250

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 65-74	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	15,779	63.5	\$0	0.0
1-500	6,996	28.1	865,452	13.9
501-1,000	721	2.9	513,676	8.2
1,001-1,500	341	1.4	421,411	6.8
1,501-2,000	224	0.9	389,146	6.2
2,001-2,500	146	0.6	328,904	5.3
2,501-3,000	118	0.5	324,879	5.2
3,001-3,500	91	0.4	294,758	4.7
3,501-4,000	70	0.3	262,729	4.2
4,001-4,500	65	0.3	275,924	4.4
4,501-5,000	57	0.2	268,363	4.3
5,001-5,500	43	0.2	225,151	3.6
5,501-6,000	27	0.1	154,789	2.5
6,001-6,500	27	0.1	168,030	2.7
6,501-7,000	17	0.1	114,542	1.8
7,001-7,500	16	0.1	115,411	1.9
7,501-8,000	14	0.1	108,371	1.7
8,001-8,500	12	0.0	98,612	1.6
8,501-9,000	13	0.1	113,788	1.8
9,001-9,500	12	0.0	111,160	1.8
9,501-10,000	8	0.0	77,846	1.2
10,001+	66	0.3	1,001,986	16.1

Source: Data for this table are from the MAX 2006 file for Louisiana, released by CMS in 7/2009. 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^{a, b}
 LOUISIANA, 2006

Total Number of Dual Eligible Beneficiaries, Age 75-84: 22,130
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 75-84: \$1,975,189
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 75-84: \$89

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 75-84	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	13,791	62.3	\$0	0.0
1-500	7,471	33.8	914,323	46.3
501-1,000	528	2.4	366,681	18.6
1,001-1,500	138	0.6	167,964	8.5
1,501-2,000	81	0.4	140,451	7.1
2,001-2,500	39	0.2	86,490	4.4
2,501-3,000	33	0.1	88,765	4.5
3,001-3,500	19	0.1	62,497	3.2
3,501-4,000	6	0.0	22,160	1.1
4,001-4,500	9	0.0	37,962	1.9
4,501-5,000	6	0.0	28,354	1.4
5,001-5,500	2	0.0	10,620	0.5
5,501-6,000	4	0.0	22,823	1.2
6,001-6,500	1	0.0	6,078	0.3
6,501-7,000	0	0.0	0	0.0
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	1	0.0	8,752	0.4
9,001-9,500	0	0.0	0	0.0
9,501-10,000	0	0.0	0	0.0
10,001+	1	0.0	11,269	0.6

Source: Data for this table are from the MAX 2006 file for Louisiana, released by CMS in 7/2009. 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^{a, b}
 LOUISIANA, 2006

Total Number of Dual Eligible Beneficiaries, Age 85+: 16,050
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 85+: \$1,351,589
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 85+: \$84

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 85+	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	9,455	58.9	\$0	0.0
1-500	5,985	37.3	719,726	53.3
501-1,000	421	2.6	282,329	20.9
1,001-1,500	103	0.6	124,450	9.2
1,501-2,000	33	0.2	57,072	4.2
2,001-2,500	20	0.1	44,629	3.3
2,501-3,000	14	0.1	38,442	2.8
3,001-3,500	5	0.0	16,657	1.2
3,501-4,000	5	0.0	18,845	1.4
4,001-4,500	1	0.0	4,054	0.3
4,501-5,000	2	0.0	9,448	0.7
5,001-5,500	2	0.0	10,236	0.8
5,501-6,000	2	0.0	11,380	0.8
6,001-6,500	1	0.0	6,118	0.5
6,501-7,000	0	0.0	0	0.0
7,001-7,500	0	0.0	0	0.0
7,501-8,000	0	0.0	0	0.0
8,001-8,500	1	0.0	8,203	0.6
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 Louisiana, released by CMS in 7/2009. 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^{a, b}
DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 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
All	108,356	62,570	45,176	545	10	55	1,187,773	672,058	510,252	4,844	119	500
Age												
5 and younger	9	0	8	0	1	0	99	0	87	0	12	0
6-14	25	0	22	0	3	0	289	0	254	0	35	0
15-20	355	0	347	2	6	0	4,047	0	3,957	18	72	0
21-44	19,917	1	19,530	383	0	3	224,592	3	221,280	3,290	0	19
45-64	25,007	86	24,735	154	0	32	281,515	971	278,787	1,469	0	288
65-74	24,863	24,467	370	6	0	20	276,928	272,740	3,928	67	0	193
75-84	22,130	22,006	124	0	0	0	238,650	237,169	1,481	0	0	0
85 and older	16,050	16,010	40	0	0	0	161,653	161,175	478	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	70,758	46,879	23,452	368	4	55	777,715	507,550	266,352	3,265	48	500
Male	37,598	15,691	21,724	177	6	0	410,058	164,508	243,900	1,579	71	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	44,848	25,647	18,923	253	4	21	484,329	268,554	213,282	2,286	48	159
African American	48,942	25,945	22,708	255	5	29	548,005	288,071	257,359	2,225	59	291
Other/unknown	14,566	10,978	3,545	37	1	5	155,439	115,433	39,611	333	12	50
Use of Nursing Facilities^c												
Entire year	14,327	12,726	1,601	0	0	0	146,588	128,770	17,818	0	0	0
Part year	9,733	8,611	1,122	0	0	0	98,351	86,510	11,841	0	0	0
None	84,296	41,233	42,453	545	10	55	942,834	456,778	480,593	4,844	119	500
Maintenance Assistance Status												
Cash	66,105	35,539	30,195	370	1	0	751,389	404,967	342,924	3,486	12	0
Medically needy	71	44	13	14	0	0	643	390	129	124	0	0
Poverty related	3,722	1,365	2,166	129	7	55	39,596	14,818	23,265	930	83	500
Other/unknown	38,458	25,622	12,802	32	2	0	396,145	251,883	143,934	304	24	0
Dual Status^d												
Full dual, all year	101,392	59,038	41,770	520	10	54	1,111,195	633,109	472,910	4,569	119	488
Full dual, part year	6,964	3,532	3,406	25	0	1	76,578	38,949	37,342	275	0	12
Managed Care (MC) Status												
Fee-for-service (FFS) all year	108,356	62,570	45,176	545	10	55	1,187,773	672,058	510,252	4,844	119	500
FFS part year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
FFS part year, no Rx claims	0	0	0	0	0	0	0	0	0	0	0	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	0	0	0	0	0	0	0	0	0	0	0	0

Source: Data for this table are from the MAX 2006 file for Louisiana, released by CMS in 7/2009. 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^a
 DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 2006

Beneficiary Characteristics	Beneficiaries and		Included in Cell G of Table 1		Excluded from Cell G of Table 1	
	Benefit Months in Cell F of Table 1					
	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months
All	108,356	1,187,773	108,356	1,187,773	0	0
Fee-for-service (FFS) all year	108,356	1,187,773	108,356	1,187,773	0	0
FFS part year, with Rx claims	0	0	0	0	0	0
FFS part year, with no Rx claims	0	0	0	0	0	0
Managed care (MC) all year, with Rx claims	0	0	0	0	0	0
MC all year, with no Rx claims	0	0	0	0	0	0

Source: Data for this table are from the MAX 2006 file for Louisiana, released by CMS in 7/2009. 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